# **Hazard Identification Report Form**

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| --- | --- |
| Name |  |
| Location |  |
| Date |  |
| Equipment |  |

**Description of hazard**

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|  |

**Suggested corrective action**

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|  |  |
| --- | --- |
| Employee signature |  |
| Supervisor’s remarks |  |

**Corrective action taken**

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Supervisor’s signature |  |
| Date |  |

End of Hazard Identification Report Form