



Workplace Hazard Report

1. Who reported the problem? Name: _____

Contact Details: _____ Date and Time: _____

2. What is the problem?

3. What has been done to rectify the problem? (Date and Time): _____

4. What further action needs to be taken? (e.g. review of work procedures, training)

5. Outline corrective action taken (Date and Time): _____

6. Has the problem been fixed? if not, what further action will be taken?

Management Signed: _____ **Dated:** ____ / ____ / ____