

**HAZARD REPORT**

SS-WHS-SAF-000

Authorised By:  
Rev 1 29/09/2023

<b>SITE / PROJECT</b>				
<i>Use this form to report hazards that are not adequately managed and pose a serious or imminent threat to the health and safety of workers or other persons.</i>				
<b>REPORTED BY</b>		<b>DATE</b>		
<b>REPORTED TO</b>		<b>REPORT #</b>		
<b>HAZARD DETAILS</b>				
<i>List the details of the hazard, where it is and who is responsible for safety in that area:</i>				
<b>RISK LEVEL</b>	<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> High	<input type="checkbox"/> Catastrophic
<b>CORRECTIVE ACTIONS</b>				
<i>List any suggested corrective actions:</i>				
<b>PERSON RESPONSIBLE</b>				
<b>CLOSEOUT TIMEFRAME</b>	<input type="checkbox"/> Immediately	<input type="checkbox"/> 1 day	<input type="checkbox"/> 1 week	
<b>CORRECTIVE ACTIONS ADDED TO CORRECTIVE ACTIONS REGISTER? YES / NO</b>				
<b>REPORTER NAME AND SIGN</b>				
<b>RESPONSIBLE PERSON NAME AND SIGN</b>				