

Hazard Report Form & Corrective Action Log

When a Hazard has been identified and requires certain specific measures, the Corrective Action is to be taken by the supervisor indicated, within the time frame allotted.

Identified Hazard or Problem:

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Date and Time: _____

Required Corrective Action:

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Supervisor Responsible for Corrective Action:	
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Corrective Action to be completed by what date:	
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Signature of Supervisor responsible for taking the corrective action to deal with the identified hazard:

Signature: _____ Date: _____

Signature of Supervisor confirming the hazard has been dealt with, and Corrective Action is complete:

Signature: _____ Date: _____

Reference: OH&S Regulation 4.13(1), (2); 4.20.2; 26.2(1), (2), 26.11