

Hazard Correction Form

Date that Hazard ("Hazardous Condition") was reported: _____

Location of Hazard: _____

Description of Hazard:

Severity of Hazard is: Urgent (Poses imminent threat to health and safety)

Important (Could pose a threat to health and safety)

Note : "Urgent" or "Important" both require immediate response

Has this hazard also been reported on an "Incident/Hazardous Condition/Bloodborne Pathogen Exposure" Form? Yes
 No

If Yes, on what date was this form submitted? _____

Description of Corrective Action:

Name of person taking Corrective Action: _____

Date Corrective Action was implemented: _____

Date of Follow-up Evaluation: _____

Results of Follow-up Evaluation:

Date that Corrective Action was communicated to original submitter/reporter of the Hazardous Condition: _____