

**HAZARD IDENTIFICATION FORM**

EMPLOYEE'S NAME (optional): \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

PHONE# (optional): \_\_\_\_\_

UNSAFE CONDITION OR PRACTICE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LOCATION: \_\_\_\_\_

SUGGESTION FOR IMPROVING SAFETY: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has this matter been reported to your supervisor?    Yes            No

Employees are advised that it is illegal for an employer to take any action against an employee in reprisal for exercising rights to participate in reporting safety issues.

FORWARD THIS REPORT TO ENVIRONMENTAL HEALTH & SAFETY

SBS 409 OR CALL ext 5711 or 3302