





HAZARD REPORT FORM

A hazard is a situation which presents the potential for an incident, accident or near miss/hit. Do not use this form to report a near miss, incident or injury. There is a confidential incident, injury and near miss/hit form for that purpose.

Person submitting this report								
Name:								
Phone number:								
Hazard Details								
Date	Date observed: Time observed:							
Description of hazard:								
Location of hazard:								
Corrective Action								
Using the Risk Matrix below, please determine the level of risk:								
	Very High High Medium Low							
	Very High	High	Wiedi	um	Low			
	Potential Consequences							
			Minor injuries or Injuries or Illness					
			discomfort. No medical treatment or measurable physical effects.	requiring medical treatment. Temporary impairment.	Injuries or illness requiring hospital admission.	Injury or illness resulting in permanent impairment.	Fatality.	
			Not Significant	Minor	Moderate	Major	Severe	
	Expected to occur regularly under normal circumstances	Almost Certain	Medium	High	Very High	Very High	Very High	
poo	Expected to occur at some time	Likely	Medium	High	High	Very High	Very High	
Likelihood	May occur at some time	Possible	Low	Medium	High	High	Very High	
Ē	Not likely to occur in normal circumstances	Unlikely	Low	Low	Medium	Medium	High	
	Could happen, but probably never will	Rare	Low	Low	Low	Low	Medium	







Corrective Action required:
Name Person responsible for Corrective Action
Date Corrective Action DUE
Date Corrective Action COMPLETED
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