

Hazard and/or Maintenance Report

REPORT # _____

Reported By:		Date reported	

Hazard or problem identified:			
Hazard or problem corrected immediately	YES	NO	

Further action required	YES	NO	

Recommended type of action required			
Machine requiring action			

Reported to:			

Action taken:			

COMPLETED: YES OR NO **Manager sign off:** _____

Doc # 2.5.1	Rev Level: 0	Effective Date:	Approved Date:
Written By: BM	Checked By:	Approved By:	