Date :____________________ Time:____________

Reported to:____________________ Position:____________

Reported by: Position:

LEIGHTON

HAZARD IDENTIFICATION CARD

Site:____________________ Area:____________

Hazard description:____________________________

Exact location of Hazard:

IMMEDIATE ACTION TAKEN

Details:__________________________________

CLASSIFICATION AND CATEGORY

Safety Essential Category:________________________

Environment

☐Air Emissions ☐Erosion & Sediment
☐Flora & fauna ☐Heritage
☐Land e.g. spills ☐Noise & Vibration
☐Unauthorised use of resources ☐Waste
☐Water contamination ☐Other ________________

Personal Damage

☐Human ☐Gravitational ☐Vehicular
☐Machine ☐Object ☐Electrical
☐Thermal ☐Chemical ☐Radiation
☐Noise ☐Other ☐Susceptible part
☐Specialised shape ☐Insufficient Information ☐Disaster

Plant & Equipment

☐Damage ☐Electrical ☐Other
☐Vehicles ☐Guarding ________________

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ADDITIONAL ACTION REQUIRED

Assigned to: Due Date:

Assigned to: Due Date:

SIGN OFF

Supervisor Name:

Supervisor Sign Off:

Date: Time (in 24H):

PROJECT SHE TEAM

Sign Off Comments:

Ensure comments are given to the originator of this report

Administration Only

Cintellate Reference # Date Entered:

ADDITIONAL ACTION REQUIRED

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Assigned to: Due Date:

SIGN OFF

Supervisor Name:

Supervisor Sign Off:

Date: Time (in 24H):

PROJECT SHE TEAM

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PROJECT SHE TEAM

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