

SCHEDULE J - SAFETY HAZARD REPORT FORM

A = IMMINENT DANGER WHICH REQUIRES IMMEDIATE CORRECTIVE ACTION
B = HAZARDOUS CONDITION OR ACTIVITY WHICH IS NOT IMMEDIATELY DANGEROUS BUT SHOULD BE ATTENDED TO AS SOON AS POSSIBLE
C = LOW HAZARD, GENERALLY DOES NOT INCLUDE MACHINERY WITH MOVING PARTS

PRODUCTION/COMPANY: _____ DATE: _____

HAZARD CLASSIFICATION A ____ B ____ C ____

DESCRIPTION OF HAZARD:

LOCATION (BE SPECIFIC):

ACTION NEEDED (NOTE IF INTERMEDIATE STEPS WERE TAKEN TO ALLEVIATE THE HAZARD):

OTHER COMMENTS (CONTINUE ON BACK IF NECESSARY):

CORRECTIVE ACTION (DESCRIBE WHO WILL CORRECT THE SITUATION, WHAT WILL BE DONE & WHEN):

COMMENTS:

Signature, Crew Representative/Steward

Signature, Production Manager

**Be sure to submit this form to the Union and the
Production Manager**

HAZARD CORRECTED Y ____ N ____
SIGNED: _____
DATE: _____