

# FALLON



# Hazard and Safe Behaviour Report Card

Date

Time

Site

Reported by  
(optional)

Hazard or Safe Behaviour description

Location on site

Risk Level (tick)

**LOW**



**MEDIUM**



**HIGH**



Please place your completed card  
in the site office report card post box

# Corrective Actions

Corrective action recommendations

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## TO BE COMPLETED BY SUPERVISOR

Corrective action to be taken

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Work can commence once all corrective action has been taken and the hazard risk level is re-assessed as low

Name

Signed

Date

