Safety Committee Use Only

Form Tracking Number _____

Date Received _____

HAZARD COMMUNICATION FORM

This form is to be used for notifying the City of Toledo Safety Committee that a safety problem or potential problem exists.

PERSON REPORTING: Describe the incident, problem or potential problem._____

_____

_____

_____

_____

Reporter Sign/Date _____ **Witnesses** _____

****

SAFETY COMMITTEE RECOMMENDATIONS: _____

_____

_____

_____

_____

Safety Committee Sign/Date _____

****

City Manager Comment: _____

_____

Referred to: _____**Initial/Date:** _____

****

SUPERVISORS: Describe what you have done or will do to respond to the problem or incident within 60 days.

_____

_____

_____

_____

_____

Supervisor Signiture_____**Date:** _____

Please return the completed form (white) to the Safety Committee

White – Safety Committee Pink – Supervisor Yellow – Person Reporting

Form adoption date: April 15, 2010