

Joint Health and Safety Committee

Workplace Inspection Recording Form

Inspection Location(s):							Time of Inspection:			
Department/Areas Covered:							Date of Inspection:			
						FOR FOLLOW UP				
Item (and location)	Hazards Observed	Hazard Class (see below)	Repeat Item		Recommended Action	By		Action Taken	Date Completed	Authorized Signature
			Yes	No		Whom	When			
Copies To (For Action):							Inspected By:			
Copies To (For Information):							Worker Rep.: _____			
							Management Rep: _____			

- Class "A" Hazard: A condition or practice with the potential for permanent disability, loss of life or body part, and/or extensive loss of structure, equipment or material.
- Class "B" Hazard: A condition or practice with the potential for serious injury or illness (resulting in serious or temporary disability) or property damage that is disruptive but less so than Class "A".
- Class "C" Hazard: A condition or practice with the potential for injury or illness, or disruptive (non-disabling) property damage.