HAZARD CONTROL LOG

HC-1-90

DEPARTMENT:	AGENCY:
LOCATION:	DATE:

DATE	HAZARD	IMMEDIATE TEMPORARY CONTROL	LONG-TERM SOLUTION	HAZARD DETECTED	PRIORITY	SCHEDULED/DATE COMPLETION

HAZARD NOT CORRECTED AFTER 30 DAYS SEND LOG TO:
OFFICE OF RISK MANAGEMENT, LOSS PREVENTION SECTION
P.O. BOX 91106
BATON ROUGE, LOUISIANA 70821-9106

SAFETY PAYS

PRIORITY
E = EMERGENCY
A = TODAY
B = ONE WEEK
C = ONE MONTH
D = THREE MONTH

REVIEWED BY:	DATE:	REVIEWED BY:	DATE: