

## Environmental Health and Safety Incident/Potential Hazard Report Form

Document No. \_\_\_\_\_

 Incident Report     Possible Hazard Observed

***Report Information:***

Reported/Observed By: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Mail Stop: \_\_\_\_\_ Phone: \_\_\_\_\_

Date Observation/Incident: \_\_\_\_\_ Time: \_\_\_\_\_ AM PM

Exact Location: (Building, room, street, etc.): \_\_\_\_\_

Description of Incident/Potential Hazard: \_\_\_\_\_

Information Taken By: \_\_\_\_\_

*initials*
***Investigation Information:***

Investigated by: \_\_\_\_\_ Date: \_\_\_\_\_

Property Damage: \_\_\_\_\_

Person(s) involved: \_\_\_\_\_

Actions Taken by Investigator (at the time of investigation): \_\_\_\_\_

Investigator's or EHS Departmental Recommendations for Prevention and/or Corrective Actions: \_\_\_\_\_

 Follow-up Information  or Outcome  \_\_\_\_\_

<i>For EHS Dept Use Only:</i> Internal Routing:    PM _____ GS    KD    BS    SR    MR _____	Date Entered into Database (Initial): _____	Incident/Hazard Code (See Below)	Follow-up Date: _____	Date Report Closed:  Location Filed: _____
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*Incident/Hazard Codes (I/H Codes)*
*Fall    TS    Chem    Bio    Fire    IAQ    Ergo    Const    Misc    OAQ    EE    WQ    AI(AccInv)    Noise    Elec    Strk (Struck by)*