

Community Facility Hazard Report

Section A

To be completed when reporting a hazard which has potential to cause injury to a person using Council's facilities. A copy of this form should be sent to the General Manager, Greater Hume Shire Council, PO Box 99, Holbrook NSW 2644

Date _____ **Location** _____

Reported Hazard _____

Name _____

Phone Number _____

Address _____

Detailed Description of Hazard *Write a Detailed Description of the Hazard*

Risk Rating
Circle Applicable

High Risk Medium Risk Low Risk

Action Required
Circle Applicable

Immediately Within 1 Week Within a Month When Scheduled

Suggested Action To Be Taken To Fix The Hazard

Signed _____ **Date** _____
Person Completing the Form

Document Name	Version Number	Date of Issue	Review Date
RISK – Community Facility Hazard Report Form	1.0.1	20 May 2015	As Required

Section B

Section B to be completed by Greater Hume Shire Council.

Hazard Investigated

Circle Applicable

Yes

No

Corrective Action Taken

Signed

Council Manager

Date

Action Completed

Circle Applicable

Yes

No

Signed Off

Manager

Date

NOTE: Please ensure this is registered with Risk Management Safety Officer