

BELLINGER LANDCARE INC. HAZARD REPORT FORM



To be completed when the group becomes aware of any particular potential hazards that has arisen on-site and cannot be safely and simply managed on site at the time.

1. Name:.....Site: Date: ____ / ____ / ____

2. What is the hazard?

3. What has been done to avoid, manage or rectify the problem?

On what date? ____ / ____ / ____

4. What further action needs to be taken?

5. Referred to Landcare Office for further information or action by:

Signed: _____ Date: ____ / ____ / ____

Once complete, please email this form to the BLI Office at office@bellingerlandcare.org.au and if urgent call the Landcare Coordinator on 0490 857 879

To be completed by BLI staff and/or BLI Executive Committee

6. Action taken by Executive:

Signed: _____ Date: ____ / ____ / ____