

NOTICE OF UNSAFE WORKPLACE CONDITIONS

Today's Date and time: _____

Location of Condition: MP _____ Subdivision _____

Description and Cause of Condition

(examples – large rocks in walkway; stiff switch; vegetation interfering with duties; debris in walkway; hole in walkway; defective railcar or locomotive – handbrake, grabiron, airhose, oil on walkways, loose or stuck seat, etc.; danger at industry; unsafe taxi or driver; etc.)

(use margins if necessary)

Date and Time Danger Discovered:

Date, Time and Method of Initial Report:

(examples – 6/1/07, 2300, called tower on radio and spoke to "John"; radioed dispatcher 6/5/07, 0900 spoke to "Sally"; left note in locomotive inspection book 6/8/07; Local Safety Committee 6/7/07, 1350, etc.; or write "see below if this is first report")

Date, Time and Method of this Report:

(examples –delivered to Roadmaster Smith's office 6/5/07, 0900; Delivered to Trainmaster Jones 6/5/07, 0915; Delivered to Local Safety Committee 6/7/07, 1350, etc.;)

Local Chairman: _____

Safety Committee: _____

Company Official: _____

REPORTED BY:

Name: _____

Railroad I.D. Number: _____