**Inspection report**

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| --- | --- |
| Item # | Description of hazard: *(specific location and/or equipment, nature of hazard)* |
| Recommended action:*(detailed action, taking account of hierarchy of controls, two or more options where appropriate)* |
| Person responsible: | Target date: |
| Item # | Description of hazard: *(specific location and/or equipment, nature of hazard)* |
| Recommended action:*(detailed action, taking account of hierarchy of controls, two or more options where appropriate)* |
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| Report reviewed by:(senior management)Comments: | Date: |