HAZARD INVENTORY AND CONTROL FORM

Department of Infrastructure

HAZARD RATING *R = S x P			
S	Severity	P	Probability
4	**Catastrophic -** may cause death or loss of facility	4	**Likely -** occur immediately or soon
3	**Critical -** severe: injury, occupational illness, property/equipment damage	3	**Probable -** will occur eventually
2	**Marginal -** non-serious: injury, occupational illness, or damage	2	**Possible -** could occur at some point
1	**Negligible -** minor: injury or damage	1	**Remote -** unlikely to occur

Location: _____

Assessment Team: _____

Hazard Identified	Hazard Rating			Priority #	CONTROLS		
	S	P	*R		In Place / Existing	BP/SWP/JP	Needed / Additional

Supervisor's Signature: _____ **Date:** _____

Manager's Signature: _____ **Date:** _____