**Hazard Audit Report**

**ALL Areas**

|  |  |
| --- | --- |
| **Area audited:** |  |
| **Date:** |  |
| **Audited by:** |  |
| Please complete the table below for each hazard that you identify. |
| **Hazard**(Provide a brief description of the hazard) | **Action taken**(List any action taken to eliminate or minimise the risk) | **Follow-up required**(If yes, please specify) |
|  |  |  | Details: |
|  |  |  | Details:  |
|  |  |  | Details:  |
|  |  |  | Details: |
|  |  |  | Details: |
|  |  |  | Details: |