

UMBC
UNSAFE CONDITION REPORT

Location: _____ **Date:** _____ **Time:** _____

Unsafe or Hazardous Condition: (Explain in detail)

If it is helpful/necessary, please include a sketch of area where hazard exists: (Dock, unloading areas, area of campus, etc.)

Is This Condition Permanent? _____

If Answer is No, At What Periods of Time/Under What Circumstances?

Signature of Employee Reporting Condition

Send Report to Robert D. Huntington, x-5-5735, Tech Center, David G. Dietsch, Safety Officer, Environmental Safety & Health, x-5-2918, fax 5-1166

