

WSH – Reporting of Concerns

Workplace Safety & Health Committee Inspection Corrective Action Recommendations

Approved by:

VP of Administration & Finance

Author: Al Trotz

Reviewed by: WSH Committee

Version 2.0 FRM-GEN-WSH-002

Document Initial Approval Date: April 2022

Revised Date: March 1, 2024

Document review date:

January 2026

Name of WSH Committee Inspector(s):	Inspe	ection Date:	Parent WO #:
Area Inspected:	Repo	ort Provided to:	

Corrective Action Recommendations and Observations		nendation epted No	If no, provide rationale	Assigned to: Work Request # if avail:	Target Completion Date:
Add observations below	✓	✓		Person / WR#	day/month/year



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	Yes	No		avail:	Date:			
General Comments:								
Report sent to WSH Advisor on:								
Corrective Action Plan to be reviewed at next WSH Committee meeting scheduled for: ENTER DATE								