

U.S. DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD CG-4903 (Rev. 6-04)	<b>USCG EMPLOYEE HAZARD          REPORT</b>  (See Instructions on Page 2)	Hazard Report No. _____ (Assigned by Safety Office)
<b>HAZARD (Completed by individual reporting hazard)</b>		
Reports may be submitted anonymously. Reprisals for reporting actual or suspected hazardous conditions are forbidden (COMDTINST M5100.47 Chapter 1)		
To: Unit Safety Supervisor/Safety Officer	From: (Optional) Name, Organization	
Description of Hazard (Date, Time, Summarize - Who, What, When, Where, How, Why)		
Facility, Procedure, Equipment (Type, Model, Serial Number) or Material Involved		
Recommendations (What you think will solve the problem)		
<b>INVESTIGATION OF HAZARD</b>		
Criticality:    Imminent Danger <input type="checkbox"/> Serious <input type="checkbox"/> Non-Serious <input type="checkbox"/>		
Summary of Investigation (Cite Standard Violated)		
Recommendations by Safety Investigator		
Action Taken by Office of Primary Responsibility		
Date Received	Reviewer	Signature of Reviewer
Date Forwarded		
Date Closed	Investigator/Action Officer	Signature of Investigator

## INSTRUCTIONS FOR COMPLETING USCG EMPLOYEE HAZARD REPORT

HAZARD REPORT NO. is completed by Collateral Duty Safety Officer/Safety Supervisor

SECTION 1 HAZARD is completed by individual reporting hazard.

1. Enter the name of your UNIT SAFETY SUPERVISOR /OFFICER.
2. Enter name, Organization. (No adverse actions may be taken against an employee for reporting actual or suspected hazards.)
3. Give a DESCRIPTION of the HAZARD summarizing who did what, when (time and date), where, how and why.
4. Enter TYPE, MODEL, SERIAL NUMBER of equipment or MATERIAL used, FACILITY involved, or a description of the HAZARD involved.
5. State what RECOMMENDATIONS you think will solve the problem.

SECTION 2 INVESTIGATION OF HAZARD is to be completed by the investigating safety supervisor/officer at the unit, district or MLC level as appropriate.

1. A SUMMARY of INVESTIGATION by the investigator will be entered along with the STANDARD that was VIOLATED. The CRITICALITY shall be entered based on the following:
  - a. Imminent Danger. A condition or practice that could reasonably be expected to cause death, disease, illness, or serious physical harm immediately or before the danger can be eliminated through normal abatement procedures.
  - b. Serious. A hazard that could adversely affect a person's health or safety or mission accomplishment, if such a condition or practice is allowed to persist.
  - c. Non-serious. A hazard that is less than serious, but has the potential to cause mishaps or is in violation of Coast Guard Safety and Occupational Health Standards.
2. The RECOMMENDATIONS of the Safety Investigator will be entered here.
3. ACTIONS TAKEN BY THE OFFICE OF RESPONSIBILITY will be entered to indicate what interim abatement measures the responsible party is taking. Follow up shall be included.

### REVIEW AND COORDINATION SECTION.

1. THE REVIEWING OFFICIAL shall enter dates received, forwarded, and closed. This person is responsible for monitoring the hazard reports of the affected unit, district, or MLC area as appropriate. May be the Safety Supervisor, Collateral Duty Safety Officer, or Industrial Hygienist. The name of the reviewer will be legibly entered and signed in the appropriate blocks.
2. The INVESTIGATOR or ACTION OFFICER (person investigating hazard) will legibly enter name and signature in the appropriate blocks.