

# UT Chattanooga

Department of Safety & Risk Management

## Report of Unsafe Condition

This form is to be used by University employees to report unsafe conditions on the UTC campus. It is for the use of all employees and is not limited to the immediate work area. You are not required to give your name, department or phone number, however; this information will be kept confidential and will greatly assist in follow-up should additional details be needed.

Date: \_\_\_\_\_

Time of Day: \_\_\_\_\_

Location of Unsafe Condition: \_\_\_\_\_

Existing Condition Which You Consider Unsafe: \_\_\_\_\_

\_\_\_\_\_

Has This Been Reported to Anyone?: \_\_\_\_\_

Other / Comments: \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Department: \_\_\_\_\_

### For use by Department of Safety and Risk Management

Inspection Date: \_\_\_\_\_ Work Order Submitted?: \_\_\_\_\_

Existing Condition: \_\_\_\_\_

\_\_\_\_\_

Abatement Date: \_\_\_\_\_ Follow - up - Y/N: \_\_\_\_\_

Return completed form to:  
UTC Department of Safety & Risk Management 425-5209