



WORKPLACE:	DATE:	
We want to be able to come to w We are reporting the following h	work every day and work safely. But problems in our work environment nazards: (tick all that apply)	are putting us at risk.
Lack of effective control m	neasures to prevent the spread of COVID-19	
Lack of genuine consultation	ion about COVID-19 control measures	
Lack of, or incorrect, PPE		
Insufficient cleaning of wo	orkplace, including high touch surfaces	
No RAT testing of all perso	ons entering the workplace	
Other (specify)		
and then swiftly put those co	that our employer will promptly consult with employees about appropriate controls in place <u>— as they are legally required to do.</u> ake prompt action to consult and control the risks then they are in brea	
	e further action from members, HSRs and the regulator.	
	e further action from members, HSRs and the regulator. SIGNATURE	
and safety act and will face		
and safety act and will face	SIGNATURE	
NAME	SIGNATURE	
NAME This hazard form will be provide	signature contact the state of	

Send a copy of the form to your union on <u>covidhotline@unitedworkers.org.au</u>

Employers are legally obligated to control all risks to health and safety, and may face significant fines and/or jail time if they fail to do so. (s19 of WHS Acts and s21 of the VIC OHS Act)