

**CAIRNS KURANDA STEAM  
HAZARD IDENTIFICATION RECORD  
FORM: CK010**

Reporting ID:

**Instructions:** This form is to be completed for any hazard identified, with-in the work place or on the Queensland Rail Network. Attach any other documents / photos that support the identification and on completion, forwarded to the Operations Manager.

Section 1: Reporting Officer Details	
Date:	Time:
Person Reporting	Position:
	Contact Number:
Section 2: Hazard Details	
Location:	
Description of Hazard	
<b>Activities that lead to the identification of the Hazard:</b>	
<b>What are the likely consequences if the hazard is not addressed?</b>	
Section 3: Controls	
Are there any controls that are meant to address the hazard?	
What additional controls are proposed:	
Close out Details and follow up records	
<b>Signature of reporting person</b>	<b>Ops Manager sig and date of close out</b>