

## HAZARD ABATEMENT PROJECT REQUEST FORM

ACTIVITY NAME AND ADDRESS:	Date submitted:
	Activity UIC:
	Major claimant:

PROJECT INFORMATION
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1. Project title: <i>(Describe action to abate/eliminate the hazard)</i>
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2. Project No.	3. Estimated Cost (\$K)	4. Risk Assessment Code <i>(Check one)</i>	Probability	Severity
		1   2   3 <u>    </u> <u>    </u>		

5. Problem:    No. of people regularly exposed to the hazard:

6. Proposed Corrective Action:

7. Applicable Standards/Regulations:

8. Citation <i>(OSHA, STATE AGENCIES, NOIU, ECT.):</i>

9. Interim Controls:

10. Points Of Contact <i>(Enter All Applicable):</i>			
<u>Function</u> <u>Name</u>	<u>Phone</u>	<u>Fax</u>	<u>Internet E-mail</u>
a. NAVOSH _____	_____	_____	_____
b. Facilities: _____	_____	_____	_____
c. Claimant: _____	_____	_____	_____