To be used by any person including (but not limited to) employee, subcontractor, worker, personnel, visitor to report and resolve any safety and environmental hazards, unsafe methods of work or general Improvements.

DATE:

SECTION 1 (to be completed by the person raising the request)		
Issue Request Details		
Details of the Issue:		

Once the above is complete forward to Bartsch Builders representative.

SECTION 2 to be completed by [Company Name] representative			
Immediate actions to address the Issue: (If unable to complete forward to [Company Name] for input):			
Issue addressed \ completed on : Date:			
Issue addressed \ completed on :			
Person Initiating Request:	Name:		
Verification of any improvement actions:			
Operations Director:	Signature:	Date:	
SECTION 3 to be completed by [Company Name] representative			
Follow up details to be completed by the Office Manager			
Details of Further Actions – Site Supervisor (if unresolved)			
Details of Further Actions – Office Manager (if unresolved)			
Completion of Issue Request:			
Manager:	Signature:	Date:	
Close-out of Issue Request:			
Director	Signature:	Date:	