



Safety Violation Notice



IMPORTANT

This form can be used if PolyNet (use QR code) is unavailable or the Contractor is not on the Trades List for the Project.

Prepared by _____ Project _____
Date of Violation _____

Contractor _____
(see Trade List for Project or Purchase Order)

Employer _____
(if different than Contractor – i.e. a subcontractor)

Supervisor _____

Worker(s) Involved

Description

(describe the violation and identify the section(s) of any applicable H&S Program, Act, Regulation, or other legislation)

Repeat Violation

This is repeat violation by Worker(s), Employer, or Contractor at this Project

Disciplinary Action (Select one of the following for this violation)

Written Warning

Fine

Temporary Suspension.....worker(s) may return to project on _____

Permanent Suspension

Date

PCML Site Superintendent Signature
Once signed and dated by Site Superintendent, forward copy to Head Office

Date