HEALTH AND SAFETY PROPOSED CHANGE FORM ATTACHMENT 1

***SECTION 3*** *Framework for Health and Safety Management*

PART A: PROPOSED CHANGE/MODIFICATION DETAILS

Modification Title:..........................................................................................................................................................................................................

***ATTACHMENT***

Responsible Manager:.............................................................................................. Date: .............................................................................

Plant/Equipment Affected:...........................................................................................................................................................................................

Work Area (s): ..............................................................................................................................................................................................................

Modification Description (attach marked-up sketches and calculations, position descriptions, etc.):

Is the Change Temporary? Yes/No Reason for Change:

Alternatives Considered:

Estimated Cost $...................................................................... Estimated Completion Date:.........................................................