

NOTIFICATION OF POSSIBLE CENSURABLE CONDITIONS FORM

This form shall be used to notify UNIS about possible censurable conditions at UNIS. The form must be delivered to the Notification group/person responsible for notifications. Please read through the company's notification routines before sending this notification to the notification group.

UNIS encourages all workers to be as accurate as possible. If there are any questions about the notification routines and/or filling in the form, please contact the Notification group.

Date:

Name:

Position:

Date/time of observation(s):

What has been observed (heard and/or seen)?

Where were the observation(s) done?

Are there others that have observed the same incident(s) (witnesses)?

Do you know whether there have been similar occurrences before?

Other comments?