



# Mariposa County Anonymous Safety Reporting Form

Date of Report: \_\_\_\_\_ Site Name or Facility Name: \_\_\_\_\_

Location of Hazard at Site:

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Why is this a hazard:

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Please list your suggestion or method to fix/abate this hazard:

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*This is an anonymous reporting form. DO NOT include any personal identifying information. You may drop this form in inter-office mail to the Risk Management Office in a plain envelope.*