

SAMPLE

NAVOSH DEFICIENCY NOTICE			
SECTION A - DEFICIENCY INFORMATION (To be completed by the OSH inspector.)			
ORGANIZATION: <i>U.S. Naval Academy</i>	LOCATION: <i>Specific location and/or operation</i>	TYPE INSP:	NDN #:
DESCRIPTION: <i>Safety Hazard is described here</i>			
STANDARD VIOLATED: <i>Applicable Regulation</i>			
RISK ASSESSMENT CODE: SEVERITY/PROBABILITY:		ANNUAL EXPOSURE: ABATEMENT PRIORITY:	
OSH OFFICIAL: <i>Name of Inspector(s)</i>		INSPECTION DATE: <i>Date of Inspection</i>	
SECTION B - ABATEMENT STATUS (Complete <i>ONE</i> of the following.)			
DEFICIENCY CORRECTED - (Complete this part <i>ONLY</i> if the deficiency has been <i>FULLY CORRECTED</i> . Labor cost is based on \$16.00 per hour, per person.)			
CORRECTION MADE: <i>When item is complete describe corrective action in this block.</i>	DATE: <i>Completion Date</i>	INITIALS: _____ SUPV/BLDG	
	LABOR \$: <i>Based on \$16.00 per hour</i>	MATERIAL \$: <i>Actual Cost</i>	TOTAL \$:
DEFICIENCY NOT CORRECTED - (Completed if deficiency is <i>NOT FULLY CORRECTED</i> . If the Risk Assessment Code (RAC) is 1, 2, or 3, post a copy of this notice at the hazard location.)			
PROJECT DESCRIPTION - J.O./P.O. TITLE: <i>If item cannot be completed within thirty (30) days, describe action to be taken in this block.</i>	ACTION TAKEN (Include Work Order/Purchase Request Numbers and Date as appropriate): <i>Work Order #, Purchase Order #, etc. If self-help, so state.</i>		
	COST ESTIMATE: <i>Based on \$16.00 per hour</i>	ESTIMATED COMPL. DATE: <i>To the best of your knowledge.</i>	
INTERIM CONTROLS - (Must be initiated <i>IF CORRECTIVE ACTION IS NOT FULLY COMPLETED</i> . SAFETY DEPARTMENT APPROVAL REQUIRED AFTER 60 DAYS.)			
<i>Important!! Temporary protective measures must be initiated until corrective action is complete. Briefly describe temporary action here.</i>			
SECTION C - COMMENTS (Use to enter a continuation of any section above.)			
<i>This section completed by Safety Office.</i>			
RE-INSP. INIT: _____		DATE: _____	
RETURN THIS FORM TO THE SAFETY DEPARTMENT (Stop 18B) WITHIN 30 DAYS OF THE INSPECTION DATE.			