



## WHS REPORT FORM

Please email this form marked as urgent to [operations@rarekind.com.au](mailto:operations@rarekind.com.au) with WHS Report Form in the subject line.

To: Work Health & Safety Coordinator

Employee Name: \_\_\_\_\_

Client Site / Division: \_\_\_\_\_

Date: \_\_\_\_\_

Reason for Report:	Safety Concern	<input type="checkbox"/>	Near Miss	<input type="checkbox"/>
	Injury	<input type="checkbox"/>	Incident	<input type="checkbox"/>
	Other	<input type="checkbox"/>		

Please provide a brief description of your concern:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you reported the concern to your Consultant / Supervisor / Manager? Yes  No

If yes, please complete the following: Who did you report it to?

How did you report it?	Email	<input type="checkbox"/>	Telephone	<input type="checkbox"/>
	Verbally	<input type="checkbox"/>	This form	<input type="checkbox"/>
	Other	<input type="checkbox"/>		

### Newcastle

02 4935 3500  
14 Honeysuckle Dr  
Newcastle NSW 2300

### Western Sydney

02 4725 6800  
The Henry, Shop 1/91  
Lord Sheffield Cct  
Penrith NSW 2750

### Central Coast

02 4356 4300  
Unit 5A/2A Bounty Cl  
Tuggerah Business Park  
Tuggerah NSW 2259

### Hunter Valley

02 6572 6700  
2/162 John St  
Singleton NSW 2330

### Brisbane

07 3607 2700  
5/482 Kingsford Smith Dr  
Hamilton QLD 4007

Date Reported:

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Outcome:

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Do you have any recommendations on how this should be actioned?

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*Thank you for this information.*

*Rarekind is committed to your safety and will assess the concern you have identified. A Work Health & Safety Coordinator will contact you throughout the resolution process.*