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<b>SAF</b> Inspiring Safe Behavi	Ref #	Ref #				
DETAILS O	F SAFETY OB	SERVATION &				
Form completed by				Date Time		e
Employee name		3			10	
Location of Safety Ob	servation			R		
Please use the boxes below to indicate (P) what the Safety Observation related to						
Manual handling	Work equipment			Risk taking		
PPE	Material handling equipment			Procedures		
Work tools	Housekeeping			Environment		
Safe Behavior	(	Unsafe Bel	navior	or 🔅		
Brief description of what was observed:						
Has a Safety Engager	ment taken place	and what was d	iscusse	:		
Action required, by wh	o and when:	H			C	

## Safe Behavior Leads To Safe Colleagues