



## UNSAFE CONDITION REPORT

To be completed by the person reporting an unsafe condition involving a boiler, pressure vessel, or pressure piping system. (Please Print).

Company Name:	
Name of owner/person in charge: (if known)	
Worksite/Plant Location:	
Type of Plant:	
Equipment Involved:	
Mailing Address:	
Telephone Number:	
Description of Unsafe Condition: Please describe in detail the Unsafe Condition. (attach extra sheet if necessary)	
Supporting Material: Please list all appropriate drawings, sketches, photos and signed statements that you have included with this report.	



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AB-139 2006-04

Recommendations: What action has been taken to correct the unsafe condition?	
Name of Person Making Report:	
Date:	
Job title:	
Employer:	
Signature:	
ABSA Contact:	
Date & Time:	

When completed, this form should be sent to:

Administrator (Chief Inspector) ABSA 9410 – 20<sup>th</sup> Avenue Edmonton, AB T6N 0A4