

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
EMPLOYEE SERVICES DIVISION
SAFETY, HEALTH, AND EMPLOYEE WELLNESS BRANCH
INDIVIDUAL DISCOVERY REPORT

NAME OF FACILITY		CATEGORY
LOCATION OF FACILITY	NUMBER	BUILDING/ROOM NO.
DOES FINDING REQUIRE IMMEDIATE ACTION? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, REPORTED TO:	

DESCRIPTION OF DISCOVERY
REQUIREMENT

BASIS		
EXISTING NOV	RECURRING NOV	REPEAT NOV
REMARKS		