

NOTICE OF HAZARD		Date:
** MUST REMAIN POSTED UNTIL CONDITION IS ABATED **		
Region	IA-FMS Site ID	Building #
Agency	FMIS ID	Building Description:
HAZARDOUS CONDITION		Risk Assessment Code: RAC-1 RAC-2
INTERIM CONTROL MEASURES		
PERMANENT CORRECTIVE ACTION		Expected Completion Date:
CONTACT INFORMATION		
Name:	Email:	Phone Number: