



Subcontractor Warning/Corrective Action Plan (CAP)

Revised 3-7-22

Wright Brother's Superintendent: _____ Project Name: _____
 Subcontractors Name: _____ Date: _____
 Contact: _____ Cell Phone: _____

The purpose of this warning letter/corrective action plan is to advise the subcontractor of unsafe work behavior/and or unsafe conditions that have been observed by the WBTC staff.

- NOTICE OF UNSAFE BEHAVIOR NOTICE OF UNSAFE WORK CONDITIONS

As an employer, it is your responsibility to comply with the following OSHA standard:

OSHA General Duty Clause - Sec. 5 Duties (a)(1)

"Each employer shall furnish to each of his employees' employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees."

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| Date of observation: |
| Location of observation on the project: |
| Description of observation: |
| Name of worker(s) observed: |
| What is your Corrective Action Plan (CAP) to prevent this from reoccurring? |
| What changes were made to prevent this from happening again? <input type="checkbox"/> Train the employee(s) <input type="checkbox"/> Train the supervisor(s) <input type="checkbox"/> Disciplinary Action for employee <input type="checkbox"/> Write a new policy/rule <input type="checkbox"/> Enforce existing policy <input type="checkbox"/> Routinely inspect for the hazard <input type="checkbox"/> Provide Personal Protective Equipment <input type="checkbox"/> Other: _____ |

PLEASE COMPLETE AND RETURN THIS FORM TO THE WRIGHT BROTHERS SUPERINTENDENT WITHIN 3 DAYS OF RECEIPT.