

Department of Business and Industry/Division of Industrial Relations
Mine Safety and Training Section
400 W. King St., Ste 210, Carson City NV 89703
Phone (775) 684-7085
Email: mines@dir.nv.gov Web page: <http://dir.nv.gov/MSATS/Home/>

Safety or Health Hazard Complaint Form

Mine/Company Name		Date	
Address			
Company Phone			
Mailing Address			
Management Official		Telephone	
Type of Mine	<input type="checkbox"/> Surface <input type="checkbox"/> Underground		
HAZARD DESCRIPTION/LOCATION: Describe briefly the hazard(s) which you believe exist and on what date you last observed the hazard(s). Include the approximate number of employees exposed to or threatened by each hazard. Specify the particular building or worksite where the alleged violation exists.			
Has this condition been brought to the attention of:	<input type="checkbox"/> Employer	<input type="checkbox"/> Other Government Agency(specify): _____	
<i>The MINE Act gives employees and employee representatives the right to request that their names not be revealed to their employer. Providing your name and address will only allow MSATS staff to communicate with you regarding your complaint.</i>		<input type="checkbox"/> Do NOT reveal my name to my Employer <input type="checkbox"/> My name may be revealed to the Employer	
Please Indicate Your Desire:			
The Undersigned believes that a violation of a Mine Safety or Health standard exists which is a job safety or health hazard at the mine site named on this form. (Mark "X" in ONE box).		<input type="checkbox"/> Former Employee <input type="checkbox"/> Current Employee <input type="checkbox"/> Representative of Employees <input type="checkbox"/> Federal Safety and Health Committee <input type="checkbox"/> Other (specify) _____	
Complainant Name		Telephone	
Address(Street, City, State,Zip)			
Email Address			
Signature		Date	
If you are an authorized representative of employees affected by this complaint, please state the name of the organization that you represent and your title:			
Organization Name:		Your Title:	

You can return this form to us thru mail or email listed on top of this form.