



Safety and Health Violation Notice

Contractor Name: _____

Date of Notice: _____

Safety Violation Notice: **First Written Notice**

Job Number: _____

Second Written Notice

Job Name: _____

Third Written Notice

This is a written notice that your company was observed not following safe work practices as follows;

Safety Violation Description:

Safety Violation Policy

Lester Buildings requires that all Contractors performing work for Lester Buildings comply with all Occupational Safety and Health Administration (OSHA) regulations, and to eliminate worker exposure to unsafe conditions on all Lester Buildings jobsites. Repeated failure of a Contractor to cooperate fully may result in termination of any future contracts and potential opportunities to perform work for Lester Buildings.

This notice shall be permanently placed in the Lester Building Project records.

Lester Buildings Representative / Date

Contractor Representative / Date