JOINT HEALTH AND SAFETY COMMITTEE MEETING MINUTES

EMPLOYER INFORMATION

Employer's name (legal or trade name) For project sites, provide the name of the contractor responsible and consider the project site as the workplace.

WORKPLACE ADDRESS						
Street number	Street	Town/City				

MEETING INFORMATION						
Date	Start time	End time	Location		·	Previous meeting date
Co-chair's name (employer rep)			Co-chair's name (employee rep)			
Members present						
Members absent						
Guests					Recorder's name	

STANDING ITEMS / REPORTS (items discussed at every meeting)				
Торіс	Discussion (If actions are identified, add to the New Business section.)			

BUSINESS C	ARRIED FORWARD) (tasks/safety	concerns that	were not completed or resolved by	the original target of	date)
Date reported to JHSC	Topic/concern	Dept/location	Target date	Recommendation	JHSC member responsible	Status

NEW BUSINESS (new health and safety concerns that have not been reviewed by committee members)						
Date reported to JHSC	Topic/concern	Dept/location	Target date	Recommendation	JHSC member responsible	Status

NEXT MEETING		
Date	Time	Location

SIGNATURES			
Co-chair signature (employer rep)	Phone number	Email address	Date
Co-chair signature (employee rep)	Phone number	Email address	Date

Committees must retain minutes for a minimum of <u>three years</u> and have them available to WorkSafeNB on request.

For WorkSafeNB submission (on request only):

- Email: jhsc-cmhs@ws-ts.nb.ca
- Fax: Toll-free 1 888 629-4722