

**EMERGENCY PHONE NUMBERS**

**FOR**

\_\_\_\_\_  
(Please Give **Exact Address** of This Worksite Location)

**PHYSICIANS:** \_\_\_\_\_

**HOSPITALS:** \_\_\_\_\_

**AMBULANCES: 911 OR** \_\_\_\_\_

**FIRE DEPARTMENT: 911 OR** \_\_\_\_\_

**POLICE: 911 OR** \_\_\_\_\_

**PLEASE POST IN A CONSPICUOUS LOCATION,  
IN ACCORDANCE WITH THE NEVADA OCCUPATIONAL SAFETY AND HEALTH ACT  
(Nevada Revised Statutes 618.295; 29 CFR 1926.50)**

Nevada OSHA Enforcement  
Division of Industrial Relations  
Nevada Department of Business and Industry