- *\$180 limit (final total priceafter tax)
- *shoes must be laced/no polh
- *shoes must have safety toes
- *for employees performing electrical work, shoresst be "all" leather

Safety Shoe Authorization Form

Note: The Department of Environmental Health and Safety (EHS) must sign this a foot map prove the request Safety shoes should only be requested for employees who are exposed to foot injuries.

| Employee's Name | | Department | | |
|-------------------------------|---------------------------|-------------------------|---------------------------|--|
| Job Title | | Phone # | | |
| Supervisor's Name | | Phone# | | |
| | | | | |
| | | | | |
| | | | | |
| <u>Plea</u> | se indicate (below)why y | ou are authorizing safe | ty shoes | |
| ☐ This employee i s ew | or has not been issued | safety shoes. | | |
| ☐ This person need s p | olacementsafey shoes. | Refer to Safety Shoe F | Procedufærsdetails. | |
| I confirm that I have insp | pected the shoes to be re | eplaced and deem them | n in need of replacement. | |