

Project:

Location:

Date:	Daily Job Description:
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	Yes	No	N/A
<b>Are all crew members familiar with:</b>			
Location of fire extinguishers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evacuation routes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site-specific chemical hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site-specific MSDS's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency contact numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Do any of the following hazards require safeguarding? If yes, discuss as a group.</b>			
Sharp objects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access or egress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot or cold surfaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation (inhalation of hazard)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heavy objects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical shock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Airborne contaminants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Excavation Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uneven surfaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other potential for slips, trips or falls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First opening of equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pinch points	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemicals (burns/eyes/skin)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flammable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ingestion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skin contamination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Are all tools in good working order?</b>			
Ratchets and sockets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hammer wrenches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lifting straps / belts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grinders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hammers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line up clamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Extension cords	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heavy Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Excavating equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air compressor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Access:</b>			
Has the scaffold been inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the ladder tied off?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the job require a man lift?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Hot Work Permit required?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Any other special provisions?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No	N/A
<b>Lock out tag out:</b>			
Is Lockout/Tagout required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness of LO/TO verified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you tried to activate the start/stop switch on auto equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a written procedure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everyone involved familiar with the procedure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Have the following safeguards been considered for overhead work, pedestrians or traffic?</b>			
Barricades/Cones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signs/Flaggers/Flags	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hole covers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handrails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Housekeeping:</b>			
Are all hoses and cords routed to prevent tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are hoses properly secured to pneumatic tools?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are tool buckets used to prevent tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the area been checked for slippery surfaces?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Attitude / Communication:</b>			
Is there something on your mind other than the tasks at hand?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you shared your ideas on how to perform the task?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you listened to everyone's ideas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you encouraged everyone to participate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the task process been explained to you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you understand how to perform the task?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>PPE Required:</b>			
Hardhat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety glasses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Face shield	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outer clothing (fire retardant clothing, reflective colored vest)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety toe shoes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gloves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Confined space permit required?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>One-call to be placed?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Contractor Signature:</b>	
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