

Spot Check Safety

Company name: test

Date: 2022-02-13

Employee/Consultant name: Brock Clayton

Location: test

Evaluator: Form Loco

WORKSITE SAFETY MANAGEMENT REVIEW	Not Applicable (/N/A) Unsatisfactory (U) Satisfactory (S)
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Hazard Identification and Control	N/A	U	S
Are equipment and vehicles inspected, and at what frequency? (Examples and documentation)			
Are there written emergency plans available and communicated to personnel on the work site?			
Comments undefined			

Rules and Work Procedure	N/A	U	S
Are there procedures for high risk or critical work? Are they available and used?			
Are there written emergency plans available and communicated to personnel on the work site?			
Comments undefined			

Incident Reporting	N/A	U	S
Is there an Incident reporting process in place? (Briefly explain)			
Is there a near miss/incident reporting form which includes follow-up?			
Are incidents reported and was the problem fixed the last time there was a near miss or incident?			
Are management and workers involved in solving the issues?			
Comments undefined			

Communication/Training	N/A	U	S
Have you received a safety orientation (When and what)			
How often are safety meetings held (Show examples and documentation)			
Is the appropriate training in place			
First aid training			
H2S training			

WHMIS training			
TDG training			
Ground disturbance training			
eGSO/ CSO training			
Job Specific training (List any that apply)			
Comments undefined			

Is the appropriate PPE available and being used	N/A	U	S
appropriate PPE available			
Hard Hat			
Safety Glasses			
Footwear			
Protective clothing (FR coveralls, gloves, etc)			
Hearing protection			
Respiratory protection (Appropriate for the hazard)			
Personal gas monitor			
Communication equipment			
Job Specific training (Other equipment (please specify)			
Comments undefined			

Safety Equipment	N/A	U	S
Is the appropriate safety equipment available and being used			
Fire Fighting equipment (inspected, tagged, accessible, good condition)			
Rotating equipment guards			
First aid kit			
Fall Arrest equipment (Ladders, steps, harness, lanyards, etc.)			
Emergency Shut down and Alarm Systems (positive air shutoffs, backup alarms, etc.)			
Other (Specify)			
Comments undefined			

Conducted by Signature: Form Loco

Date: To be determined

Messages

message: Created by brock@formloco.com

