

Spot Check Safety

Company name: sdf Date: 2022-06-17

Employee/Consultant name: Brock Clayton Location: sdf

Evaluator: Form Loco

| WORKSITE SAFETY MANAGEMENT | Not Applicable (N/A) Unsatisfactory (U) |
|----------------------------|---|
| REVIEW | Satisfactory (S) |

| Hazard Identification and Control | N/A | U | S |
|---|-----|---|---|
| Are equipment and vehicles inspected, and at what frequency? (Examples and documentation) undefined | | | |
| Are there written emergency plans available and communicated to personnel on the work site? [object Object] | | | |
| Comments null | | | |

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

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

| Communication/Training | N/A | U | S |
|--|-----|---|---|
| Have you received a safety orientation (When and what) [object Object] | | | |
| How often are safety meetings held (Show examples and documentation) [object Object] | | | |

| Is the appropriate training in place [object Object] | | √ |
|---|--|---|
| First aid training [object Object] | | |
| H2S training [object Object] | | |
| WHMIS training [object Object] | | |
| TDG training [object Object] | | |
| Ground disturbance training [object Object] | | |
| eGSO/ CSO training [object Object] | | |
| Job Specific training (List any that apply) [object Object] | | |
| Comments null | | |

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

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

Conducted by Signature: Form Loco Date: To be determined

Messages

date: 6/17/2022 6: 18: 13 AM

message: Created by brock@formloco.com