

Hazard Identification						
	Area Hazards		Individual Hazards		Task Hazards	Comments:
	Sharp / Hot / Abrasive surfaces or edges	<input type="checkbox"/>	Buddy Check		Work at Height	
	Weather / Extreme Temps	<input type="checkbox"/>	Fatigue / Stress		Any safety suggestions from the team	
	Environmental Impact / Spill Potential		Fit for Work		Lifting/Lowering w Rope Access equipment	
	Restricted Access / Egress		Working Alone		Lifting 50+ Lbs	
	Poor Housekeeping		Adequate Time		LOTO – Lock Out Tag Out	
	Poor Lighting		Additional Training Required		Using Hand Tools	
	Working Over Water		Ergonomics/Body Position		Electrical / GFCI Tested	
	Wet / Slick / Uneven Surfaces		Lifting heavy/awkward load		Noise +/- 85dBA	
	Others Below or Down Wind		Environmental Impact/ Spill Protection		Airborne Debris/ Fumes	
	Moving Vehicles / Equipment		Working Over Head		Other-	
	Confined Space		Low Light			
	Sensitive Site Equipment to Avoid	Note-				

Tasks	Hazards	Control Measures

JOB COMPLETION		
All Permits Closed Out: <input type="checkbox"/> Yes <input type="checkbox"/> No	Are any Hazards Remaining: <input type="checkbox"/> Yes <input type="checkbox"/> No	Explain if Yes-
Area Cleaned at Job / Shift End: <input type="checkbox"/> Yes <input type="checkbox"/> No	Any Incidents / Injuries: <input type="checkbox"/> Yes <input type="checkbox"/> No	Explain if Yes-