|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | | | | Phone: | | | Job #: | | | | |
| Location: | | | | | | | Date: | | | | |
|  | | | | | | | | | | | |
| Item | Yes | No | N/A | | Date Fixed | Item | | Yes | No | N/A | Date Fixed |
| **House Keeping** |  |  |  | |  | **Excavations/Trenches** | |  |  |  |  |
| Garbage Contained |  |  |  | |  | Daily inspections | |  |  |  |  |
| Tools Stored |  |  |  | |  | Shoring in place | |  |  |  |  |
| Equipment Secured |  |  |  | |  | Barricaded | |  |  |  |  |
| **Electrical** |  |  |  | |  | Access every 50 ft. | |  |  |  |  |
| GFCI’s used |  |  |  | |  | Fall protection in use | |  |  |  |  |
| Ground prongs in use |  |  |  | |  | **Hot Work** | |  |  |  |  |
| Cords in good condition |  |  |  | |  | Ventilation in place | |  |  |  |  |
| Equip Lock/Tag/Try |  |  |  | |  | Hot work PPE in use | |  |  |  |  |
| **PPE** |  |  |  | |  | Combustibles protected | |  |  |  |  |
| Standard PPE in use |  |  |  | |  | Fire extinguisher close | |  |  |  |  |
| Face Shields being used |  |  |  | |  | Fire blankets in use | |  |  |  |  |
| Correct glove protection |  |  |  | |  | **Hazardous Materials** | |  |  |  |  |
| Respirators in use |  |  |  | |  | Properly Stored | |  |  |  |  |
| Hearing protection |  |  |  | |  | SDS’s available | |  |  |  |  |
| **Fall Protection** |  |  |  | |  | Clearly labeled | |  |  |  |  |
| Fall equip. inspected |  |  |  | |  | Clean Area | |  |  |  |  |
| Fall systems safe |  |  |  | |  | Flame cabinet if needed | |  |  |  |  |
| Fall equip. properly stored |  |  |  | |  | **Scaffolding** | |  |  |  |  |
| Guardrails in place |  |  |  | |  | Fully assembled | |  |  |  |  |
| Fall Plan developed |  |  |  | |  | Fully planked | |  |  |  |  |
| Fall Plan signed by emp. |  |  |  | |  | Guardrails in place | |  |  |  |  |
| **Walking Surfaces** |  |  |  | |  | Access ladder | |  |  |  |  |
| Holes covered |  |  |  | |  | Properly tagged | |  |  |  |  |
| Hole covers marked |  |  |  | |  | **Barricades/Signs** | |  |  |  |  |
| Tripping Hazard free |  |  |  | |  | Fueling areas | |  |  |  |  |
| No Impalement hazards |  |  |  | |  | Flammable storage | |  |  |  |  |
| **Tools/Equipment** |  |  |  | |  | Confined spaces | |  |  |  |  |
| Guards in place |  |  |  | |  | Danger tape has signage | |  |  |  |  |
| Tools properly stored |  |  |  | |  | **Fire Extinguishers** | |  |  |  |  |
| Tools in good condition |  |  |  | |  | Monthly inspection | |  |  |  |  |
| Right tool for job |  |  |  | |  | Yearly cert | |  |  |  |  |
| **Sanitation** |  |  |  | |  | Readily available | |  |  |  |  |
| Wash station available |  |  |  | |  | On equipment | |  |  |  |  |
| Drinkable water |  |  |  | |  | **Respirator Protection** | |  |  |  |  |
| Disposable cups |  |  |  | |  | Training complete | |  |  |  |  |
| Eyewash station |  |  |  | |  | Fit test complete | |  |  |  |  |
| Toilets available |  |  |  | |  | Medical eval complete | |  |  |  |  |
| **Cranes/Hoisting/Rigging** |  |  |  | |  | Stored in dry area | |  |  |  |  |
| Rigging in good condition |  |  |  | |  | Cleaned after use | |  |  |  |  |
| Rigging labels readable |  |  |  | |  | Employee clean shaven | |  |  |  |  |
| Rigging stored properly |  |  |  | |  | Correct filters for hazard | |  |  |  |  |
| Crane certs up to date |  |  |  | |  |  | | | | | |
| Qualified operator on site |  |  |  | |  | Comments: | | | | | |
| Qualified rigger on site |  |  |  | |  |  | | | | | |
|  | | | | | |  | | | | | |
| Worker Signature: Supervisor Signature: | | | | | | | | | | | |