|  |  |  |
| --- | --- | --- |
| 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: |