

Job/Task:	Date:	<input type="checkbox"/> New	will be contacted:
Work Location:		<input type="checkbox"/> Revised	Supervisor: Safety: Other:
Employee(s):			
<ul style="list-style-type: none"> <li>What is the most hazardous part of this job and what are you going to do to control the hazard?</li> <li>Are you properly trained to complete these tasks?</li> <li>What do you need to ensure this job is completed incident and injury free?</li> <li>What conditions, job changes or distractions could call for the need to use Stop Work Authority?</li> </ul>			
Sequence of Job Steps	Potential Hazard(s)	Recommended Action Procedure	
		Examine each step carefully and identify hazards or potential dangers that could include injury, illness or damage. Consider the following: <b>Chemical Hazards</b> Inhalation, Skin Contact, Absorption, Injection, Ingestion <b>Biological Hazards</b> Bloodborne Pathogens, Mold, Valley Fever, Bioterrorism, Animal <b>Physical Hazards</b> Dust/dust, Fire/Eruption, Noise, Radiation, Thermal, Chemical, Proximity/Line of Fire, Sharp/Blunt, Strike against/Strike by <b>Personal Hazards</b> Repetition, Fatigue, exertion, Musculoskeletal, Contact Stress, Vibration, Work Area Design	
Additional Personal Protective Equipment Req'd	<input type="checkbox"/> Non metal Chemical gages: Chemical protective clothing: Rubber boots: Chemical resistant gloves: Cloth work wear: Respiratory protection: Other protection: Other protection: Other		
Required Permits/Gate Work Plans:	General Site: Drill Rock Point: Confined Space Entry: Excavation and Trenching: OSHA Plan/Conf Spec: Other: In proximity to: Steelhead Conductors: Simultaneous Operators:		
Gas Detection Equipment Needed:	<input type="checkbox"/> Gas monitor (LEL, O <sub>2</sub> , H <sub>2</sub> S, SO <sub>2</sub> ) Monitor: Other:		
List hazardous substances MSDS reviewed? Ques. Only			
Site Control	Gated/locked: Door signs: Distress tape: Designated area/vehicles: Heavy equipment under: Disseminated analysis process		
Environmental Conditions	Weather:	Toxic:	Middle:
Hazardous Energy Control	<input type="checkbox"/> PTO switch complete: <input type="checkbox"/> PTO device in place: Energy isolation method: Electrical: Hydraulic: Pneumatic: Mechanics: Thermal: Chemical		
Tools and Equipment	Equipment inspection complete: Checked in use of tool/equipment: List tool/equipment being used:		