

SITE SAFETY INSPECTION & HAZARD ASSESSMENT FORM



Inspected By:
 Position:
 Job Location/No:
 Date/Time:

Hazard Priority (Status)
#1 Imminent Danger
#2 Serious
#3 Minor
#4 O.K.
#5 Not Applicable

WHIMIS & PRINT MATERIAL	✓	✗	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
MSDS' (WHIMIS) Warning Signs Emergency phone list Products properly labeled					
GUARDRAILS/BARRICADES	✓	✗	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Located where required Properly constructed Adequately secured					
HOUSEKEEPING	✓	✗	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Clear Walkways Organized Equipment Clear access & landing Debris & garbage cleared					
PROTECTIVE EQUIPMENT	✓	✗	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Hard hats	WORN				
Foot protection	WORN				
Fall protection	WORN				
Skin protection	WORN				
	AVAILABLE				
Eye & face protection	WORN				
	AVAILABLE				
Hearing protection	WORN				
	AVAILABLE				
Respiratory protection	WORN				

LADDERS	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Secured Proper angle (extension) Proper size & type Proper hand rail & landings Non- slip bases					
FIRE PROTECTION	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Fire Extinguishers Fully charged					
POWER TOOLS & EQUIPMENT	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
General Condition Proper guards, cords & PPE					
EXTENSION CORDS	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
General condition of casing, ends & connections					
FIRST AID REQUIREMENTS	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Adequate number of first aiders on site First aid kit available & with required contents					
MOBILE EQUIPMENT	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED
Clear and stable pathway(s) Operator(s) valid Certificate Valid load(s) Hi-visibility vests worn					
OTHER	✓	x	N/A	STATUS (1-5)/CORRECTIVE ACTION	DATE COMPLETED