



## HAZARD IDENTIFICATION CHECKLIST

Date: \_\_\_\_\_ Job Site: \_\_\_\_\_ Client: \_\_\_\_\_

**Instructions:**

- 1 Check off all hazards observed
- 2 For items requiring action, transfer to "WORKSITE INSPECTION REPORT"
- 3 Follow up by confirmation that noted hazards have been addressed by signing off. If not completed, re-address and carry over to next inspection.

	Y	N	N/A		Y	N	N/A
<b>1) General</b>				<b>5) Scaffolding</b>			
1. First aid kit and eye wash station on site _____				1. Proper scaffolding for the job _____			
2. First aid attendant on site _____				2. Guardrails and toeboards in place _____			
3. Emergency procedures known and posted _____				3. Planks in good condition and cleated _____			
4. Posters _____				4. Proper access and egress _____			
i) Emergency phone numbers _____				5. Wheels locked when scaffold occupied _____			
ii) Safety policy _____				6. Kept clean and uncluttered _____			
5. Safety meetings held and records kept _____				<b>6) Site</b>			
6. Tool box minutes submitted from _____				1. Good housekeeping _____			
subtrades _____				2. Stairwells and aisles clean, safe and well lit _____			
7. Safety inspections held and records kept _____				3. Stairwell treads and landings safe and level _____			
8. Safety training current _____				4. Handrails strong _____			
9. Workers – orientations current _____				5. Nails removed from lumber _____			
10. WHIMIS – MSDS collected from _____				6. Secure site hoarding _____			
subtrades _____				7. Fire extinguishers on site _____			
<b>2) Floor and wall opening</b>				8. Orderly storage of materials _____			
1. Properly guarded with rails and toe boards _____				9. Proper storage of hazardous and flammable _____			
2. Properly marked _____				materials _____			
3. Guardrails (42") replaced if removed _____				10. Airborne dust levels at a safe level _____			
4. Workers protected from overhead hazards _____				11. No hazardous fumes present _____			
<b>3) Electrical</b>				12. Sound levels at a safe level _____			
1. All areas adequately lighted _____				13. Hearing cards current and test scheduled _____			
2. Temporary installations safe and dry _____				every 6 months _____			
3. Live equipment clearly marked and _____				<b>7) Personal Protective Equipment (PPE)</b>			
secured _____				1. Hard hat use _____			
4. Extension cords in good repair _____				2. Eye and face protection _____			
5. Lockout procedures are known, posted _____				3. Hand and arm protection _____			
and followed _____				4. Safety harness and line system – rigging _____			
6. Clearance from power lines _____				and use _____			
(as per local regulations) _____				5. Safety footwear _____			
7. Assured grounding _____				6. Hearing protection _____			
<b>4) Ladders</b>				7. Job specific PPE (i.e. respirators) _____			
1. In good condition _____				8. High-vision vests _____			
2. Secured top and bottom when in use _____				<b>8) Fire</b>			
3. Regularly inspected _____				1. Flammable liquids marked and stored in _____			
4. 4:1 ratio, 3 feet over lap, 3 feet above _____				safety cans _____			
access _____				2. Smoking / No smoking rules followed _____			
5. Workers off top two rungs / steps _____				3. Extinguishers – trained in use _____			

Y N N/A

Y N N/A

4. Fire alarm system \_\_\_\_\_

9) Housekeeping

- 1. Work areas kept clean \_\_\_\_\_
- 2. Aisle ways clear and maintained \_\_\_\_\_
- 3. Waste receptacles provided \_\_\_\_\_
- 4. Regular disposal of trash \_\_\_\_\_
- 5. Tripping hazards (i.e. cords on doorways) \_\_\_\_\_
- 6. Head or face level hazards clear or flagged (i.e. hanging cords, nails sticking out of walls, beams) \_\_\_\_\_

10) Tools

- 1. Safe and proper use \_\_\_\_\_
- 2. Guards in place \_\_\_\_\_
- 3. Powder actuated
  - Hearing protection \_\_\_\_\_
  - Safety glasses \_\_\_\_\_
  - Ticketed \_\_\_\_\_
- 4. Power tools
  - Cords ok \_\_\_\_\_
  - Maintained \_\_\_\_\_
  - Proper use \_\_\_\_\_
  - Unsafe tools flagged for repair \_\_\_\_\_
- 5. Air Tools
  - Hoses ok \_\_\_\_\_
  - Connections secure \_\_\_\_\_
  - Safe use \_\_\_\_\_

11) Fall protection

- 1. Guardrails 42" high (2x4) \_\_\_\_\_
- 2. Mid-rails (1x6 or 2x4) \_\_\_\_\_
- 3. Toe board (if required) \_\_\_\_\_
- 4. Posts no more than 8 feet apart \_\_\_\_\_
- 5. Fall restraint/arrest harness secured to anchor \_\_\_\_\_
- 6. Lifeline secure (no knots) and appropriate length \_\_\_\_\_

12) Mobile lifts

- 1. Daily inspections completed \_\_\_\_\_
- 2. Qualified operators \_\_\_\_\_
- 3. Fall protection (as required) \_\_\_\_\_
- 4. Operator Manual present \_\_\_\_\_

13) Confined Spaces

- 1. Identified \_\_\_\_\_
- 2. Work procedures \_\_\_\_\_
- 3. Monitored \_\_\_\_\_
- 4. Equipment in place \_\_\_\_\_

14) Protection of the Public

- 1. Fences and barricades secure \_\_\_\_\_
- 2. Hoarding and/or poly barriers in place \_\_\_\_\_
- 3. Negative air/dust control is adequate \_\_\_\_\_
- 4. Proper use of danger or caution tape and signage \_\_\_\_\_
- 5. Drilling and cutting done in accordance to local noise by-laws or building management requirements \_\_\_\_\_

15) Other (job specific)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_

Remarks:

---



---



---



---



---



---



---

Signatures:

\_\_\_\_\_  
Site Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
Safety Coordinator

\_\_\_\_\_  
Date