



# WEEKLY JOBSITE SAFETY INSPECTION CHECKLIST

**JOBSITE:** \_\_\_\_\_  
**DATE OF INSPECTION:** \_\_\_\_\_  
**SUPERVISOR &/or FOREMAN ON JOBSITE:** \_\_\_\_\_ **WALK THRU CONDUCTED WITH:** \_\_\_\_\_  
**INSPECTION CONDUCTED BY:** \_\_\_\_\_ **AND** \_\_\_\_\_

**WHO IS THE CLIMATE ENGINEERS/CLIMATE RIVER VALLEY SAFETY CONTACT ONSITE?** \_\_\_\_\_

INSPECTION AREAS	OK	IN VIOLATION	N/A	COMMENTS CORRECTIVE ACTION THAT MUST BE TAKEN	ACTION TAKEN TO CORRECT FOREMAN STATE ACTION TAKEN; DATE DONE & INITIAL
<b>PPE</b>					
Hard Hats					
Safety Glasses					
Ear Plugs					
Steel Toed Boots (if required at jobsite)					
Gloves for Mat'l Handling					
<b>HOUSEKEEPING</b>					
General Floor Conditions					
Material Storage Areas					
Gang Box					
Equipment Appearances Is it In good shape?					
<b>OSHA POSTER/OSHA 300 LOG</b>					
Is the OSHA Poster posted?					
Is the OSHA Poster current?					
Is the OSHA 300 log posted in the Safety Handbook front flap or somewhere else on jobsite?					
Is the OSHA 300 log the correct date? S/B signed at the bottom and dated with the previous year				(i.e: YE 2008 log S/B posted from Feb 1, 2009 – April 30, 2009)	
<b>LADDERS</b>					
Any loose rungs, if not mark OK?					
Any broken pieces/parts, if not mark OK?					
<b>GRINDERS</b>					
Are guards being used?					
Are face shields being used when grinding/or cutting?					
<b>ROPES</b>					
Any frayed?					
Any that needs to be tossed?					
<b>MANHOLES</b>					
If any are they covered?					
Are they marked?					

OUR GOAL IS **ZERO** INJURIES IN THE WORKPLACE

INSPECTION AREAS	OK	IN VIOLATION	N/A	COMMENTS CORRECTIVE ACTION THAT MUST BE TAKEN	ACTION TAKEN TO CORRECT: FOREMAN STATE ACTION TAKEN; DATE DONE & INITIAL
<b>POWER TOOLS</b>					
Using GFI & Circuit tester in the field?					
Using color coding on shop equipment?					
Which quarter are you checking and is the color correct following the chart below?					
1 <sup>st</sup> Quarter : RED					
2 <sup>nd</sup> Quarter : WHITE					
3 <sup>rd</sup> Quarter : ORANGE					
4 <sup>th</sup> Quarter : GREEN					
<b>FIRE EXTINGUISHERS</b>					
Where is extinguisher located?					
Has it been inspected recently?					
What is expiration date on it?					
<b>FALL PROTECTION SAFETY HARNESSSES</b>					
Are heights tied off correctly?					
Which quarter are you checking and is the color correct following the chart below?					
1 <sup>st</sup> Quarter : RED					
2 <sup>nd</sup> Quarter : WHITE					
3 <sup>rd</sup> Quarter : ORANGE					
4 <sup>th</sup> Quarter : GREEN					
<b>JLG OR SCISSOR LIFTS</b>					
Do those operating have proper training? Should have a card signifying that.					
Where are the inspection stickers on the equipment?					
<b>FORKLIFT</b>					
Do those operating have proper training?					
<b>CABLE &amp; CHAIN COM-A-LONGS</b>					
Are they being used this jobsite?					
Have the inspection stickers been checked recently for problems?					
<b>RIGGING/HOSITING EQUIP</b>					
Are you inspecting before use?					
Have you checked the inspection sticker for capacity?					
Is the cable in good condition and not showing any fray marks?					
Have you inspected the chain spreaders and latches?					
Have you checked the HASP?					
Have you done a visual inspection of nylon chokers?					
Are you completing your Purple Rigging and Hoisting forms and turning in weekly?					

OUR GOAL IS **ZERO** INJURIES IN THE WORKPLACE

INSPECTION AREAS	OK	IN VIOLATION	N/A	COMMENTS CORRECTIVE ACTION THAT MUST BE TAKEN	ACTION TAKEN TO CORRECT: FOREMAN STATE ACTION TAKEN; DATE DONE & INITIAL
<b>DUCT JACKS</b>					
Have you inspected for proper lifting weight as well as overall inspection of the equipment?					
Do you know the capacity?					
Do you know the limits?					
<b>WELDERS</b>					
Is the condition of the welder good?					
Is there a fire extinguisher nearby?					
<b>LOCKOUT/TAGOUT</b>					
Is there a kit on site that is being used?					
Verification of Lockout?					
Have you turned in LO/TO Forms?					
<b>CONFINED SPACE</b>					
Does this job involve confined space?					
If so, do you have the proper forms available?					
Are you filling out the forms & turning into Karen if confined space job?					
<b>TOOL BOX TALKS</b>					
Are these being read to all employees at this jobsite at the beginning of the week?					
What was the last tool box talk topic?					
<b>WEEKLY SITE INSPECTION CHECKLIST</b>					
Do you have these forms onsite?					
Are you completing and turning into office weekly?					
<b>FIRST AID/CPR</b>					
Where is your First Aid Station?					
Check First Aid Kit for opened or outdated items?					
Who is trained at this jobsite in First Aid?					
Who is trained at this jobsite on CPR?					
<b>MSDS BOOKS</b>					
Do you have one on this jobsite?					
Do you know where it is located?					
Can you find caulk in the book?					
How many different kinds are listed?					
Did you know you can find anything in this book using the Table of Contents or Index?					
Where is the Index located?					
<b>SAFETY HANDBOOKS</b>					
Do you have one on this jobsite?					
Do you know where it is located?					
How many items are listed in the Table of Contents?					
Do you have the revised Roof Safety Policy dated 10/15/09 in your book?					
Did you know that this is a reference book for you to go to when asked questions about our Safety Policies and Procedures?					

OUR GOAL IS **ZERO** INJURIES IN THE WORKPLACE

## Thought Provoking Questions to Answer W.H.A.T. Mental Checklist:

Will you be working in a "confined space"?

Will you be working on equipment that could accidentally start?

Are all potential energy sources controlled and verified?

Is there a LOTO procedure?

Have you applied your LOTO padlocks? Remove & control key

Will you be working in a hazardous atmosphere?

Will you be exposed to hazardous materials?

Have you read the M.S.D.S. for these materials?

Where is the nearest safety shower/eye wash station? Has it been flushed?

Will there be temperature extremes?

Will outside weather be a factor?

Will you be working in a Restricted Area? Review Restricted Area Regulations

What housekeeping concerns are present at the work site?

Describe/Identify the PPE needed to do this job safely.

Identify any permit required to perform this job.

Has the permit been properly filled out, signed and revalidated?

Has your foreman discussed the job with you?

What techniques will you use to prevent pulls, strains, line of fire, pinches, cuts and abrasions?

How will you prevent an injury to your hands?

How many people will it take to perform this job safely?

Will this job affect any other people?

Have these people been informed?

REMEMBER - routine tasks are statistically higher in injury rates than non-routine tasks.

Are you focused on your job task at hand?

**We are responsible for our OWN safety. STOP & CORRECT any unsafe behavior or conditions.**

PRE JOB HAZARD ASSESSMENT

OUR GOAL IS ZERO INJURIES IN THE WORKPLACE



SPECIAL EMPHASIS: PROPER GLOVES & PINCH POINTS

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Area: \_\_\_\_\_

Work Order Number & Job Description: \_\_\_\_\_

WHAT ARE THE THREE MAIN TASKS ASSOCIATED WITH THIS JOB?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

IS A PROCEDURE AVAILABLE FOR THIS TASK? YES NO

\_\_\_\_\_  
 \_\_\_\_\_

PPE REQUIRED

PPE for this task: Hardhat and safety glasses with side shields, proper gloves and work boots required for each worker on each job.

PPE needed for this task:

- Hearing Protection
- Respiratory Protection
- Dust mask
- Cartridge
- PAPR
- Supplied air
- SCBA
- Safety Harness
- Lanyard & Anchor
- Retractable Lifeline
- Face Shield
- Chemical Suit / Gloves / Boots
- Monogoggles
- Rubber Boots

FALL PROTECTION

What is the WORST case scenario that could occur while performing this task?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What are the HAZARDS associated with doing this task?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What are the TOOLS I need to complete this task safely?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I understand the hazards that I've listed for this job. (Please sign your name).

\_\_\_\_\_  
 \_\_\_\_\_

Supervisor: \_\_\_\_\_

Audited by: \_\_\_\_\_

Date: \_\_\_\_\_

Updated: 8/30/2010

EMERGENCY ACTION PLAN

Do you know where the nearest eyewash / shower station is?

Do you know where the nearest PEA/PEO phone is?

Do you know where the nearest weather shelter is?

LOCK OUT / TAG OUT & ENERGY SYSTEM ISOLATION VERIFIED

- Equipment Tested to Verify the Effectiveness of LOTO
- LOTO Walked Down with the Coordinator
- LOTO procedure obtained and utilized

Locks and Tags installed  
 Lock Box/Equip # \_\_\_\_\_

SAFE WORK PERMIT

- Hot Work
- Line Break
- Hazardous Chemical
- Flammable and Combustible Exposure
- Ignition Source Control
- Elevated Work

SAFE EQUIPMENT PERMIT

- Critical Safety Device By-Pass
- Lock-Out Removal
- Fire System Impairment / Usage:
- Elevated Work

STAND ALONE PERMITS

- Permit Required Confined Space
- Electrical Work
- Trenching and Excavation
- Crane Personnel Platform

BARRICADE CONSIDERATIONS

- Fire extinguisher
- Long Sleeves/Welding Jacket
- Fire Blanket
- Heat Stress Prevention
- Pinch Point Awareness

OTHER SAFETY CONSIDERATIONS

- Cones/posts/cable guardrail
- Danger Tape OR Caution Tape
- Hole cover marked & secured

What are the ACTIONS I need to take to do this task safely?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What are the HAZARDS associated with doing this task?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What are the TOOLS I need to complete this task safely?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I understand the hazards that I've listed for this job. (Please sign your name).

\_\_\_\_\_  
 \_\_\_\_\_

Supervisor: \_\_\_\_\_

Audited by: \_\_\_\_\_

Date: \_\_\_\_\_

Updated: 8/30/2010



# SURPRISE JOBSITE SAFETY INSPECTION CHECKLIST

JOBSITE: \_\_\_\_\_  
 DATE OF INSPECTION: \_\_\_\_\_  
 SUPERVISOR &/or FOREMAN ON JOBSITE: \_\_\_\_\_ WALK THRU CONDUCTED WITH: \_\_\_\_\_  
 INSPECTION CONDUCTED BY: \_\_\_\_\_ AND \_\_\_\_\_

WHO IS THE CLIMATE ENGINEERS/CLIMATE RIVER VALLEY SAFETY CONTACT ONSITE? \_\_\_\_\_

INSPECTION AREAS	OK	IN VIOLATION	N/A	COMMENTS CORRECTIVE ACTION THAT MUST BE TAKEN	ACTION TAKEN TO CORRECT FOREMAN STATE ACTION TAKEN; DATE DONE & INITIAL
<b>PPE</b>					
Hard Hats					
Safety Glasses					
Ear Plugs					
Steel Toed Boots (if required at jobsite)					
Gloves for Mat'l Handling					
<b>HOUSEKEEPING</b>					
General Floor Conditions					
Material Storage Areas					
Gang Box					
Equipment Appearances Is it In good shape?					
<b>OSHA POSTER/OSHA 300 LOG</b>					
Is the OSHA Poster posted?					
Is the OSHA Poster current?					
Is the OSHA 300 log posted in the Safety Handbook front flap or somewhere else on jobsite?					
Is the OSHA 300 log the correct date? S/B signed at the bottom and dated with the previous year				(i.e: YE 2008 log S/B posted from Feb 1, 2009 – April 30, 2009)	
<b>LADDERS</b>					
Any loose rungs, if not mark OK?					
Any broken pieces/parts, if not mark OK?					
<b>GRINDERS</b>					
Are guards being used?					
Are face shields being used when grinding/or cutting?					
<b>ROPES</b>					
Any frayed?					
Any that needs to be tossed?					
<b>MANHOLES</b>					
If any are they covered?					
Are they marked?					

OUR GOAL IS **ZERO** INJURIES IN THE WORKPLACE

INSPECTION AREAS	OK	IN VIOLATION	N/A	COMMENTS CORRECTIVE ACTION THAT MUST BE TAKEN	ACTION TAKEN TO CORRECT: FOREMAN STATE ACTION TAKEN; DATE DONE & INITIAL
<b>POWER TOOLS</b>					
Using GFI & Circuit tester in the field?					
Using color coding on shop equipment?					
Which quarter are you checking and is the color correct following the chart below?					
1 <sup>st</sup> Quarter : RED					
2 <sup>nd</sup> Quarter : WHITE					
3 <sup>rd</sup> Quarter : ORANGE					
4 <sup>th</sup> Quarter : GREEN					
<b>FIRE EXTINGUISHERS</b>					
Where is extinguisher located?					
Has it been inspected recently?					
What is expiration date on it?					
<b>FALL PROTECTION SAFETY HARNESSSES</b>					
Are heights tied off correctly?					
Which quarter are you checking and is the color correct following the chart below?					
1 <sup>st</sup> Quarter : RED					
2 <sup>nd</sup> Quarter : WHITE					
3 <sup>rd</sup> Quarter : ORANGE					
4 <sup>th</sup> Quarter : GREEN					
<b>JLG OR SCISSOR LIFTS</b>					
Do those operating have proper training? Should have a card signifying that.					
Where are the inspection stickers on the equipment?					
<b>FORKLIFT</b>					
Do those operating have proper training?					
<b>CABLE &amp; CHAIN COM-A-LONGS</b>					
Are they being used this jobsite?					
Have the inspection stickers been checked recently for problems?					
<b>RIGGING/HOSITING EQUIP</b>					
Are you inspecting before use?					
Have you checked the inspection sticker for capacity?					
Is the cable in good condition and not showing any fray marks?					
Have you inspected the chain spreaders and latches?					
Have you checked the HASP?					
Have you done a visual inspection of nylon chokers?					
Are you completing your Purple Rigging and Hoisting forms and turning in weekly?					

OUR GOAL IS **ZERO** INJURIES IN THE WORKPLACE

INSPECTION AREAS	OK	IN VIOLATION	N/A	COMMENTS CORRECTIVE ACTION THAT MUST BE TAKEN	ACTION TAKEN TO CORRECT: FOREMAN STATE ACTION TAKEN; DATE DONE & INITIAL
<b>DUCT JACKS</b>					
Have you inspected for proper lifting weight as well as overall inspection of the equipment?					
Do you know the capacity?					
Do you know the limits?					
<b>WELDERS</b>					
Is the condition of the welder good?					
Is there a fire extinguisher nearby?					
<b>LOCKOUT/TAGOUT</b>					
Is there a kit on site that is being used?					
Verification of Lockout?					
Have you turned in LO/TO Forms?					
<b>CONFINED SPACE</b>					
Does this job involve confined space?					
If so, do you have the proper forms available?					
Are you filling out the forms & turning into Karen if confined space job?					
<b>TOOL BOX TALKS</b>					
Are these being read to all employees at this jobsite at the beginning of the week?					
What was the last tool box talk topic?					
<b>WEEKLY SITE INSPECTION CHECKLIST</b>					
Do you have these forms onsite?					
Are you completing and turning into office weekly?					
<b>FIRST AID/CPR</b>					
Where is your First Aid Station?					
Check First Aid Kit for opened or outdated items?					
Who is trained at this jobsite in First Aid?					
Who is trained at this jobsite on CPR?					
<b>MSDS BOOKS</b>					
Do you have one on this jobsite?					
Do you know where it is located?					
Can you find caulk in the book?					
How many different kinds are listed?					
Did you know you can find anything in this book using the Table of Contents or Index?					
Where is the Index located?					
<b>SAFETY HANDBOOKS</b>					
Do you have one on this jobsite?					
Do you know where it is located?					
How many items are listed in the Table of Contents?					
Do you have the revised Roof Safety Policy dated 10/15/09 in your book?					
Did you know that this is a reference book for you to go to when asked questions about our Safety Policies and Procedures?					

OUR GOAL IS **ZERO** INJURIES IN THE WORKPLACE