

Company & Site Details: Company Name: _____ Job Site #: _____ Date: _____ Civic Address: _____ Start Time: _____ End Time: _____			Nature/Description of Work: _____ _____ _____					Weather Conditions: Temperature: _____ Sunny Rain Cloudy Snow Freezing Rain Wind: _____ (km/ Hr) Direction: _____ Wind Chill Factor: _____		
Applicable Health and Safety Regulations			Applicable CSA Standards					Primary Tools and Equipment to be Used:		
OHS Act	WHSR	OSGR	Z259.16 Design	Z797 Scaffolding	Z259.10 Harnesses	Z259.2.2 SRL	ANSI A10.11	_____		
LOTO Regulations	Fire Regulations	First Aid Regulations	Z259.13 HLL	Z271 Suspended Platforms	Z91 Suspended Operations	Z259.2.1 Lifelines	Z259.1 Body Belts	_____		
WHMIS	Confined Space			Z259.11 Absorbers	Z259.12 Connectors			_____		

Fall Hazards Anticipated					Hazardous Activities					
Uncovered Opening		3m or 10' above a safe surface			Welding		Grinding		Painting	
Surface or items that can cause injury		Exposed Hazardous Materials			Cleaning		Caulking		Pneumatic Tool Use	
Poor Housekeeping		Access & Egress			Cutting		Prodding		Burning	
Pit or Vat		Drowning			Abrasive Blasting		Electrical Tool Use			
Fall Protection System/ Control to be Used										
Guardrail		Temporary Flooring			Personnel Safety Net			Safe Work Procedures		
Travel Restraint System		Fall Arrest System			Safe Work Practices					
How is Fall Protection to be communicated?										
Tool Box Talk		Fall Protection Briefing		Site Safety Orientation			Site Staff meeting			
Identification of Personnel Qualified to Work										
Print	Signature	Trained	Briefed	Print	Signature	Trained	Briefed			
		Yes/No	Yes/No			Yes/No	Yes/No			
		Yes/No	Yes/No			Yes/No	Yes/No			
		Yes/No	Yes/No			Yes/No	Yes/No			
		Yes/No	Yes/No			Yes/No	Yes/No			
		Yes/No	Yes/No			Yes/No	Yes/No			
Responsible Site Supervisor				Signature of Responsible Site Supervisor						