| 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: |              |                    |  |
|--|-------------|-----------|-------------|--------------------------------|--|-----------------|---------|-----------------------|---------------------|---------------------|-----------|--|--------------|--------------------|--|
|  |             |           |             |                                |  |                 |         |                       |                     |                     |           | Primary Tools and Equipment to be Used:  |              |                    |  |
| Applicable Health and Safety Regulations   |             |           |             |                                | Applicable CSA Standards Z259.16 Z797 Z259 |                 |         |                       |                     |                     |           |  | nd Equipment | to be Used:        |  |
| OHS Act  | WHSR        | OSGR      | USGR 2      |                                | Z797<br>Scaff                              | caffolding Harn |         |                       | Z259.2.2<br>SRL     | ANSI<br>A10.1       | 11        |  |              |                    |  |
| LOTO   | Fire        | First A   | id          | Z259.13                        | Z271                                       | 1 Z91           |         |                       | Z259.2.1            | Z259.               | 1         |  |              |                    |  |
| Regulations  | Regulations | Regula    | Regulations |                                | Susp                                       | ended<br>orms   |         |                       | Lifelines           | Body<br>Belts       |           |  |              |                    |  |
| WHMIS  | Confined    |           |             |                                | Z259                                       |                 | Z259.12 |                       |                     | Beits               |           |  |              |                    |  |
| VVIIIVIIS  | Space       |           |             |                                |  | rbers Conne     |         |                       |                     |                     |           |  |              |                    |  |
|  | op a co     |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
| Fall Hazards Anticipated   |             |           |             | Hazardou                       |  |                 |         |                       | lous Activ          | ities               |           |  |              |                    |  |
| · · · · · · · · · · · · · · · · · · ·  |             |           | 3m or       | 3m or 10' above a safe surface |  |                 |         | Welding               |                     |                     | Grinding  |  | Painting     | Painting           |  |
| Surface or items that can cause  |             |           | Expose      | xposed Hazardous Materials     |  |                 |         | Cleaning              |                     |                     | Caulking  |  | Pneumatio    | Pneumatic Tool Use |  |
| injury   |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
| Poor Housekeeping  |             |           |             | Access & Egress                |  |                 |         |                       |                     |                     | Prodding  |  | Burning      | Burning            |  |
| Pit or Vat   |             |           | Drown       | Drowning                       |  |                 |         | Abrasive Blasting     |                     | Electrical Tool Use |           |  |              |                    |  |
|  |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
| Fall Protection System/ Control to be Used   |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
|  |             |           |             | emporary Flooring              |  |                 |         | Personnel Safety Net  |                     |                     |           | Safe Work Procedures   |              |                    |  |
| Travel Restraint System  |             |           | Fall Ar     | Fall Arrest System             |  |                 |         |                       | Safe Work Practices |                     |           |  |              |                    |  |
|  |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
| How is Fall Protection to be communicated?   |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
| Tool Box Talk Fall Protection  |             |           |             | Briefing Site Safety Ori       |  |                 |         | entation Site Staff r |                     |                     | meeting   |  |              |                    |  |
| Identification of Personnel Qualified to Work  |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |
| Print  |             | Signature |             |                                | Trained Briefe                             |                 | ed      | Print                 |                     |                     | Signature |  | Trained      | Briefed            |  |
|  |             |           |             | Yes                            | Yes/No Yes/I                               |                 | ٧o      |                       |                     |                     |           |  | Yes/No       | Yes/No             |  |
|  |             |           |             | Yes,                           | /No  | Yes/N           | ١o      |                       |                     |                     |           |  | Yes/No       | Yes/No             |  |
|  |             |           |             | Yes                            | res/No Yes                                 |                 | ٧o      |                       |                     |                     |           |  | Yes/No       | Yes/No             |  |
|  |             |           |             | Yes                            | /No  | Yes/N           | No      |                       |                     |                     |           |  | Yes/No       | Yes/No             |  |
|  |             |           |             | Yes                            | /No  | Yes/N           | No      |                       |                     |                     |           |  | Yes/No       | Yes/No             |  |
| Responsible Site Supervisor Signature of Responsible Site Supervisor                             |             |           |             |                                |  |                 |         |                       |                     |                     |           |  |              |                    |  |