

CONSTRUCTION SAFETY INSPECTION/HAZARD SURVEY

Job Site: _____

Date: _____

Satisfactory = check mark

Unsatisfactory = X

1. Housekeeping: _____
2. Personal Protective Equipment: _____
(Hard Hats if necessary, eye, hearing, and respiratory protection)
3. Grading: _____
(Safe tractor/trencher operation, seat belts worn, ROP)
4. Excavations: _____
(Permit, Shoring, Guarding for trenches 5ft. and deeper, Competent Person)
5. Tool Use: _____
(Saws & nail guns guarded)
6. Code of Safe Work Practices on site: _____
7. 1st Aid Kit, water and 1st Aid certified personnel on site: _____
8. Chemical MSDS on site: _____
9. Electrical: _____
(All cords in good condition, Connections to GFCI outlets, tools grounded, high voltage lines & gas lines ID'd)
10. Ladders/Scaffolds: _____
(Good condition, proper use & set up, Competent Person)
11. Foreman conducting daily safety walk/inspection of the job? _____
12. OSHA, Pay Day, Discrimination, Comp Carrier, Permits, Warnings _____

Hazards needing Correction:

Hazard corrected or will be corrected

by: _____

Inspected by: _____

Job Foreman: _____

Company Owner/General

Superintendent: _____