



DASA

GENERAL SERVICE LLC

PRE-JOB SAFETY CHECK-OFF SHEET

YES	No	N/A	
()	()	()	Personal protective equipment
()	()	()	IS NEED ADDITIONAL EYE PROTECTION NEEDED (GOGGLES/FACE SHIELD)
()	()	()	DOES THIS JOB REQUIRE ADDITIONAL HAND, ARM, LEG OR FOOT PROTECTION?
()	()	()	DOES THIS JOB REQUIRE A SAFETY HARNES?
()	()	()	DOES THIS JOB REQUIRE HEARING PROTECTION?
()	()	()	DOES THIS JOB REQUIRE A RESPIRATOR (WITH PROPER CARTRIDGE)
()	()	()	DOES JOB THIS REQUIRE A LIFE JACKET/WORK VEST
			JOB SETUP AND ENVIRONMENT
()	()	()	IS THERE ANY POTENTIAL FOR INSECT /ANIMAL BITES?
()	()	()	IS THERE ANY POTENTIAL FOR CUT FROM SHARE EDGES?
()	()	()	IS THERE ANY POTENTIAL FOR STRAINS OR BACK INJURY?
()	()	()	ARE THERE ANY SLIP,TRIP,FALL HAZARD PRESENTS?
()	()	()	ARE THERE ELECTRICAL HAZARDS PRESENT?
()	()	()	ARE THERE CHIMICAL LEAD, ADBESTOS, ARSENIC PCB EXPOSURE HAZARDS?
()	()	()	ARE THERE OTHERS WORKING ABOVE OR BELOW THIS JOB
()	()	()	HAVE THEY BEEN INFORMED OF YOUR WORK AND PROXIMITY?
()	()	()	DID EVERYONE HAVE INPUT ON THE JOB CHECK OFF SHEET & AND SIGNED
()	()	()	WILL THIS WORK REQUIRE MANUAL LIFTING OVER 50 POUNDS?
			TOOLS AND EQUIPMENT
()	()	()	DO I NEED A LADDERS,SCAFFOLD, FORK LIFT, J.L.G OR MAN LITF ?
()	()	()	DO I NEED A LIFTING DEVICE, ROUSTABOUT OR CRANE?
()	()	()	DO I NEED LIFTING ANYTHING
()	()	()	DO I HAVE THE RIGHT TOOLS FOR THIS JOB
()	()	()	ARE THEY IN GOOD CONDITION?
()	()	()	HAVE TOOL INSPECTION/CALIBRATION DATES BEEN CHECKED?
()	()	()	AM I PROPERLY TRAINED/QUALIFIED TO USE TOOL /EQUIPMENT
()	()	()	DO I NEED POST WARNING SIGNS, BARRIERS, OR SAFETY FLAGS?
()	()	()	WILL THE JOB INVOLVE MORE THE ONE SUPERVISOR?
			PROCEDURE
()	()	()	DO I NEED A PERMIT (CONFINED SPACE,HOT WORK, ABESTOS)
()	()	()	DO I NEED A WRITTEN PROCEDURE?
()	()	()	DO I NEED TO DOCUMENT WORK DONE AND RESULTS?
			HOUSEKEEPING
()	()	()	HAVE ALL SLIP,TRIP FALL, HAZARDS BEEN REMOVED?
()	()	()	IS THE AREA LIGHT WELL ENOUGH TO WORK SAFELY?
()	()	()	DID EVERYONE ON THE JOB HABA INPUT FOT THIS CHECKED OFF SHEET?
()	()	()	ARE ALL ENVIRONMENTAL,CONCERNS ADDRESSED?
()	()	()	Under the faculty of my right mind, I read and understand this safety sheet, and by signing I committed and confirm that I make myself the only responsible for my work and Safety.

Job supervisor _____ Date _____

CREW MEMBERS (signature) _____

