



Task: Grading	Project:	<i>Every Second Safely ... First Move Forward</i>
Date:	Task Location:	Supervisor:

PPE		Weather / Site Conditions		Inspections/Permits	
<input type="checkbox"/> Hard Hat <input type="checkbox"/> Safety Glasses <input type="checkbox"/> High Viz Vest/Shirt <input type="checkbox"/> Gloves <input type="checkbox"/> Safety Toe Boots <input type="checkbox"/> Hearing Protection <input type="checkbox"/> Respiratory Protection	<input type="checkbox"/> Face shield <input type="checkbox"/> Cold Weather Gear <input type="checkbox"/> Warm Weather Gear <input type="checkbox"/> Fall Protection <input type="checkbox"/> Welding Hood <input type="checkbox"/> FR Clothing/Apron <input type="checkbox"/> Other:	<input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Windy <input type="checkbox"/> Rain <input type="checkbox"/> Snow <input type="checkbox"/> Lightning <input type="checkbox"/> Other:	<input type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Muddy <input type="checkbox"/> Standing Water <input type="checkbox"/> Ice <input type="checkbox"/> Frost <input type="checkbox"/> Other:	<input type="checkbox"/> One Call Dig Ticket Ticket # _____ <input type="checkbox"/> Equipment Inspection (alarms, cameras, etc) <input type="checkbox"/> Truck/Trailer DVIR <input type="checkbox"/> Daily Crane Inspection <input type="checkbox"/> Rigging Inspection <input type="checkbox"/> Critical Lift Plan	<input type="checkbox"/> Bridge Deck Pre-Pour Checklist <input type="checkbox"/> Critical Lift Plan <input type="checkbox"/> Confined Space Entry Permit <input type="checkbox"/> Excavation Inspection <input type="checkbox"/> Fall Protection Systems <input type="checkbox"/> Work zone Inspection <input type="checkbox"/> Ladders <input type="checkbox"/> Other:

Task Steps:	Potential Hazards	Steps To Prevent Hazards/Injury/Incident
Equipment and Vehicle Inspections	Slip, trips and falls, damaged equipment/vehicles, inoperable safety devices	Ensure all safety are in place and operating properly, keep walkways and steps clean, use three points of contact when getting on/off equipment
Fuel/Grease Equipment	Slips, trips and falls, fire/explosion, spills,	Use three points of contact, wear proper PPE (gloves, high visibility vest/shirt), fire extinguisher and spill kit within close proximity of fueling areas
Gather tools and materials	Slip, trips and falls, sharp objects, damaged tools	Inspect tools prior to use, Wear required PPE, Be aware of ground conditions, good housekeeping in storage areas
Mobilize equipment/vehicles	Struck by, caught in between, overhead utilities, equipment/vehicle accident and rollover.	Be aware of surroundings, utilize spotters in congested areas and when working near/transiting under an overhead utility, communicate/establish eye contact with operators before entering work area(s), Wear high viz apparel

Transport and place material	Underground/overhead utilities, struck by, caught in between, pedestrians/visitors/third party motorists, equipment/vehicle accidents and rollover.	Be aware of surroundings, utilize spotters in congested areas and when working near/transiting under an overhead utility, communicate/establish eye contact with operators before entering work area(s), Wear high viz apparel, establish/follow designated haul routes, Abide by all local, state and federal regulations.
Leave work area clean and presentable at the end of shift	Uneven walking/working surface	Clean up all trash/debris and dispose of properly, be aware of walking/working surface conditions. (Treat your job site as if it was your own yard)

Crew Comments / Concerns

Signatures:		
1)	9)	
2)	10)	
3)	11)	
4)	12)	
5)	Supervisor:	
6)	BM/ABM:	
7)	PM/CM:	
8)	Safety:	

