PACIFIC
FACILITY SOLUTIONS INC

Date:_____ Location:_____ JSA Lead:_____

Description of work:_____ Contact:

Job Checklist

	Y	N	N/A
Job scope understood			
Proper safety equipment on site?			
Communicated work with others in immediate area?			
Do you have proper/necessary tools for the job?			
Are your tools in proper working order?			
Have you completed a pre-job eqipment inspection?			
Vehicle inspection complete?			
Reviewed MSDS for any hazardous materials that might be ?			
Do ALL workers understand the job?			
Fire extinguisher present?			
Are ALL workers wearing proper PPE?			
Was pre-job stretching completed?			

Crew: Print your name and initial next to your name. Your name and initials indicate that you participated in this JSA and understand the potential hazards associated with this task. If you have not been trained, do not understand, or feel you cannot complete this job safely, STOP and speak to your supervisor or lead.

1 _____ _____

2 _____ _____

3 _____ _____

4 _____ _____

Post Job Comments:

Potential Hazards

- ___ Burn
- ___ Particles in eyes
- ___ Elevated work
- ___ Overhead work
- ___ Dropping materials
- ___ Cuts
- ___ Line of Fire
- ___ Loud noises
- ___ Pinch points
- ___ Overexertion
- ___ Slips, trips, falls
- ___ Sprains, strains
- ___ Electrical shock
- ___ Abrasions
- ___ Spills
- ___ Heat stress
- ___ Awkward positions
- ___ Other

Hazard Elimination

- ___ Proper gloves
- ___ Safety glasses
- ___ GFI cord
- ___ Proper tools
- ___ Fire extinguisher
- ___ Proper positions
- ___ Other
- ___ Proper PPE
- ___ Hearing protection
- ___ Housekeeping
- ___ Barricade
- ___ Proper lifting techniques
- ___ Stop work authority

Fire extinguisher location

Eye wash/shower location

Evacuation location (primary)

Evacuation location (secondary)

Wind speed/direction

Emergency pull box location

Job Steps	Potential Hazard	Elimination/Safeguards
1	>	>
2	>	>
3	>	>
4	>	>
5	>	>
6	>	>
7	>	>
8	>	>
9	>	>

Potential Stop Work Authority: