

Step #1			Hazard / Risk Assessment Checklist		
Company:		Immediate Supervisor:		Date\Time:	
Location:		Type of Operation:		Crew Size:	
Assessment Team Names: _____ _____ _____					
Hazard Priority (Status) #1 Imminent Danger, #2 Serious #3 Minor #4 O.K. #5 Not Applicable (N/A)					
ITEM #	STATUS (1-2-3-4-5)	HAZARDOUS ITEMS			
1		Waste Disposal/Housekeeping			
2		Material Storage/Handling			
3		Protection to Public			
4		Shoring/Sloping/Excavation			
5		Water/Vibration/Erosion			
6		Confined Space Entry			
7		Traffic Control, Flashers, Barricades/Restrictions			
8		Overhead Hazards			
9		Power Pole Support			
10		Underground Hazards			
11		Flammables (Fire/Explosion)			
12		Hazardous Chemicals (WHMIS)			
13		Waste Disposal			
14		Dangerous Pressure			
15		Work at Heights			
16		High Risk Positioning			
17		Work Over Water			
18		Scaffolds			
19		Hoisting/Lifting			
20		Cables/Ropes/Chains/Slings			
21		Vehicle/Machine Condition			
22		Gas (Toxic or Non-Life Supporting)			
23		Electrical Wiring & Guards			
24		Weather Conditions			
25		Hot Work			
26		Cold Work			
27		Night Lighting			
28		Pipe Handling			
29		PPE: Basic/Specialized			
30		Tie-in/Test Purge			
31		Other:			
32					
33					
Assessment Team Comments on Priority Items:					
Item #		Priority			
Note: For corrective action, transfer information by Hazard Priority Number to Step #2 "Work Place Hazard Assessment Corrective Action" form					