

**SAFETY SURVEYS AND INSPECTIONS**

**SIGNATURE CLIENTS' WORK SITE HAZARD POTENTIAL/EXPOSURE FORM**

**Exposed = Will employees be exposed to this hazard?**

**Controlled = Is the hazard to employees adequately controlled?**

HAZARD	Exposed		Controlled		COMMENTS
	Y	N	Y	N	
Slips/Falls	ρ	ρ	ρ	ρ	_____
Chemical Exposure	ρ	ρ	ρ	ρ	_____
Skin	ρ	ρ	ρ	ρ	_____
Inhalation	ρ	ρ	ρ	ρ	_____
Ergonomic	ρ	ρ	ρ	ρ	_____
Lifting	ρ	ρ	ρ	ρ	_____
Push/pull	ρ	ρ	ρ	ρ	_____
Carrying	ρ	ρ	ρ	ρ	_____
Repetitive tasks	ρ	ρ	ρ	ρ	_____
Mobile Equipment Operation	ρ	ρ	ρ	ρ	_____
Forklifts	ρ	ρ	ρ	ρ	_____
Loaders	ρ	ρ	ρ	ρ	_____
Order picker/lifts	ρ	ρ	ρ	ρ	_____
Other:_____	ρ	ρ	ρ	ρ	_____
Motor Vehicles (Ride/drive)	ρ	ρ	ρ	ρ	_____
Machinery (List Types)	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
Electrical	ρ	ρ	ρ	ρ	_____
Hand Tools (List Types)	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
Power Tools (List Types)	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
Falling Objects	ρ	ρ	ρ	ρ	_____
Airborne Particles/Dust/Debris	ρ	ρ	ρ	ρ	_____
Confined Spaces	ρ	ρ	ρ	ρ	_____
Fire Hazards	ρ	ρ	ρ	ρ	_____
Excavations	ρ	ρ	ρ	ρ	_____
Drowning	ρ	ρ	ρ	ρ	_____
Violence/Crime Area	ρ	ρ	ρ	ρ	_____
Emergency Evacuation Plan	ρ	ρ	ρ	ρ	_____

Signature: \_\_\_\_\_

Date: \_\_\_\_\_