|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project:** |  | **Contractor:** |  | **Date:** |  |
| **Location:** |  | **Name / Role:** |  | **PTP #:** |  |
| **Task:** |  | | | | |

|  |  |  |
| --- | --- | --- |
| **Steps** | **Hazards** | **Controls** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Staff responsible for implementing and checking controls:** |

# Crews working nearby:

|  |  |  |
| --- | --- | --- |
| **Crew / Activity** | **Hazards** | **Action Plan** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Staff responsible for coordinating with other crews:** |

# Have you provided the information below?

Site layout

Equipment

Specific types of PPE

Medical facility information

Materials

Tools

Work schedule

Permits

Evacuation and emergency plans

**Notes:**

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| --- |
|  |

