

T-Ross Brothers Safety Report

A → Adequate	X → Inadequate (List Why)	N/A → Not Applicable
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Jobsite Name Click or tap here to enter text.	Project Manager: Click or tap here to enter text.
Site Leader: Click or tap here to enter text.	Auditor: Click or tap here to enter text.
Date: Click or tap to enter a date.	

A. Administrative:	A	X	N/A	Comment
1. Employment Posters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Weekly Safety Topics – Ask employees for topic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Site specific safety plan with emergency contacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. First Aid Kits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. Job Site Managers Weekly Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
6. Subcontractor Weekly Safety Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
7. Signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
B. Fire Safety:	A	X	N/A	Comment
1. Fire Extinguishers present and inspected monthly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Proper Storage of combustible material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Flammable liquid storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
C. Housekeeping:	A	X	N/A	Comment
1. Work area free from debris.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Nails or other fasteners removed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Trash Containers available and emptied.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Adequate toilet facilities on site and maintained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
D. Personal Attire and PPE:	A	X	N/A	Comment
1. Hard Hats being worn correctly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Safety Glasses/Face Shields worn, as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Hearing protection when required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Appropriate footwear.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. Appropriate clothing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
6. Respirators used where defined.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
E. Fall Protection:	A	X	N/A	
1. In place when required (6ft ≤ or into dangerous equipment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Worn in aerial lifts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Temporary railing installed properly where needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Personal Fall Arrest (Anchor/Harness/Connector) a. Appropriate anchorage (5,000 #). b. Worn/used properly c. Swing fall minimized/fall distance adequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. All equipment inspected (qualified person each use/competent person, as required)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
6. Stored and maintained properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
7. Holes greater than 2 inched are labeled and covered for expected loads.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
8. Assisted Rescue/Self-Rescue plan in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
F. Scaffolds	A	X	N/A	Comments
1. Inspected daily or before use by competent person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.

2. Green tag installed on scaffold in use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. No damaged components in use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Adequately restrained from tipping and wind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. Walking/Working platform appropriate and secured ¹	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
6. System Scaffold base is anchored on adequate mud sills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
7. Rolling scaffold have wheels that are pinned can lock.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
8. Rolling scaffolds are not occupied when being moved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
9. All scaffold components 10 feet away from electrical lines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
10. Scaffolds surfaces clear of debris, tools, snow, or ice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
G. Ladders:	A	X	N/A	Comments
1. No broken rungs or cleats.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. No cracks in the ladder frame.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Anchored correctly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Rise/run ¼.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. Ladder extends 3 ft past top edge.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
6. Top of ladder is secured.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
7. Ladder labels are legible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
H. Electrical Safety:	A	X	N/A	Comments
1. Electrical cords protected from damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Damaged, frayed, exposed cords are removed from site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. GFCI are utilized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Temporary panels are adequate and protected. No openings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. Temporary lighting is properly installed and protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
I. Cranes:	A	X	N/A	Comments
1. Qualified rigger oversees all rigging.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Qualified signal person present/used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
J. Miscellaneous Provisions:	A	X	N/A	
1. Dust / Mud control is adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
2. Rebar/protruding metal protected from impalement/ scratch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
3. Mechanical guards are in place for all power tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
4. Broken or unserviceable hand tools properly tagged out.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
5. Respirable Crystalline Silica Protocols in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
6. Lead / asbestos controls in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.

Additional Comments:

Click or tap here to enter text.

Inadequate Areas

Click or tap here to enter text.

¹ Minimum 12" wide for ladder jacks, 18" wide for all others.