



Appendix B
Job Site Safety
Inspection Checklist (Example)

Date: _____ Department: _____

University Representative: _____

Contractor Representative: _____

Contractor Company Name: _____

Project Description:

Site/Work Evaluation

Yes/No/NA

- | | |
|--|--|
| 1. Is the site restricted to prevent unauthorized access? | |
| 2. Has notification of the work been provided to adjacent faculty, staff, students or departments? | |
| 3. Is (are) the contractor(s) using appropriate PPE (eye protection, gloves, shoes, etc.)? | |
| 4. Are appropriate permits completed and available (Hot Work, Confined Space Entry, etc.)? | |
| 5. If the contractor is performing service or maintenance on equipment is it de-energized and do all contractors have a personal lock on the energy point? | |
| 6. Are emergency exits clear and accessible? | |
| 7. Are contractor supplied fire extinguishers available for hot work activities? | |
| 8. Is housekeeping appropriate and acceptable? | |
| 9. If working indoors with hazardous materials, are chemical vapors, fumes, odors, etc., ventilated to the outside? | |
| 10. Are all chemical containers labeled with the name of the chemical and its hazards? | |
| 11. Are personnel working above 4 feet properly protected from falling? | |
| 12. If aerial lifts are being used are personnel using fall protection harnesses and lanyards? | |
| 13. Are all portable tools properly guarded? | |
| 14. Are measures taken to protect workers during extreme weather conditions (hot, cold, wind, etc.)? | |
| 15. Are all ladders used and stored properly and safely? | |
| 16. Are extension cords not daisy chained together and are ground fault circuit interrupters (GFCI) being used? | |

Action Items

List any question answered as NO, and the action taken to correct including notification to the University work originator.

Item Description

Responsible Person

Target Date