



Job Safety Work Plan

Project Name: _____

Date: _____

Anticipated Start Date: _____

Superintendent: _____

Superintendent Phone Number: _____

Competent Person: _____

Competent Person Phone Number: _____

Subcontractor: _____

Job Number: _____

Anticipated Completion Date: _____

Foreman: _____

Foreman Phone Number: _____

Scope of Work

Provide a concise overview of the scope of work associated with the operation.

Equipment and Safety

Equipment Needs:

Identify and list heavy/mobile equipment, machinery and tools that are anticipated to be utilized to perform operation/task)

Safety Equipment Needs:

Identify and list PPE and safety equipment required and will be provided to safely perform the operation/task

Equipment and Safety

Safety Programs:

Identify safety related programs that will be implemented to safely perform the operations/task, i.e., fall management, respiratory protection, LOTO, confined space etc.

Coordination Requirement with Other Trades:

Identify other trade contractors that may be directly impacted by operations and/or where coordination of work is necessary

Hazard Identification Awareness

Activity involves work at heights in excess of 6 feet Yes No

Activity involves hot work (i.e., welding, burning, or cutting) Yes No

Hazard Identification Awareness

Activity requires the use of crane(s) Yes No

Activity requires working in a confined space Yes No

Activity results in airborne exposures requiring respiratory protection Yes No

Activity requires the use of scaffolds Yes No

Activity requires the use of ladders Yes No

Hazard Identification Awareness

Activity requires the use of aerial or scissor lifts Yes No

Activity involves excavation of trenches Yes No

Activity results in potential exposure to the general public Yes No

All necessary permits have been procured Yes No N/A

All required and approved shop drawings/specifications have been issued Yes No N/A

Hazard Identification Awareness

Quality Control and Assurance and controlled inspections procedures in place Yes No N/A

Activity involves working on or near energized electrical systems Yes No

Activity Involves Overhead Operations Requiring Establishing Controlled Access Zone (CAZ) Yes No

Hazards and Solutions

List step by step sequence of each task associated with the operation/activity, anticipated hazards to be encountered for each and controls to be implemented to eliminate/mitigate the hazards

Task	Hazard	Solution/Controls

Hazards and Solutions

Task	Hazard	Solution/Controls

