

PHYSICAL PLANT PRE-JOB HAZARD ASSESSMENT

Work Order #:	Planned Activity:
Supervisor:	Work Unit (Shop):

STEP 1: Check off all hazards that apply to the work task or area.

MSI Hazards	Equipment Use	Physical Hazards	Chemical/Biological	Environment Hazards	
<input type="checkbox"/> Repetitive motion	<input type="checkbox"/> Forklift/Skid steer	<input type="checkbox"/> Pinch/crush points	<input type="checkbox"/> Hazardous products	<input type="checkbox"/> Confined space	<input type="checkbox"/> Vehicle traffic
<input type="checkbox"/> Heavy lifting	<input type="checkbox"/> Scaffold	<input type="checkbox"/> Slip/trip/fall hazard	<input type="checkbox"/> Asbestos	<input type="checkbox"/> Lab entry	<input type="checkbox"/> Pedestrian traffic
<input type="checkbox"/> Awkward postures	<input type="checkbox"/> Man lift	<input type="checkbox"/> Noise levels	<input type="checkbox"/> Silica	<input type="checkbox"/> Work at heights	<input type="checkbox"/> Work alone/isolation
<input type="checkbox"/> Overexertion	<input type="checkbox"/> Ladder	<input type="checkbox"/> Electrical hazard	<input type="checkbox"/> Rodent nest/dropping	<input type="checkbox"/> Heat/Cold/Weather	<input type="checkbox"/> Falling objects
<input type="checkbox"/> Overhead work	<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Energized equipment	<input type="checkbox"/> Blood/bodily fluids	<input type="checkbox"/> Lighting levels	<input type="checkbox"/> Other (specify): _____
		<input type="checkbox"/> Hot work	<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Air quality	
				<input type="checkbox"/> Vehicle exhaust	

Comments/additional hazards identified:
STEP 2: Enter all hazards identified above into table. Assess Hazard Rating and identify controls for each hazard.
Hazard Rating Instructions: For each hazard, assign a number rating for Frequency, Severity, and Probability. The sum of these three numbers is the Hazard Rating. Enter all values into table, and identify control measures for each.

Frequency Rating (F)	Severity Rating (S)	Probability Rating (P)	Hazard Rating (HR = F+S+P)
1 = Under 10% of work day/week	1 = Minor first aid injury	1 = Remotely possible	3-4 = Low, requires monitoring
2 = 10-66% of work day/week	2 = Lost time injury	2 = Probable in time	5-6 = Moderate, requires attention
3 = Over 66% of work day/week	3 = Permanent disability or fatality	3 = Very likely to happen	7-9 = High, immediate attention needed

HAZARDS	HAZARD RATINGS				CONTROL MEASURES
	F	S	P	HR	

Permits/Documentation Required:	Safe Job Procedures To Be Reviewed (List below):
<input type="checkbox"/> Confined space <input type="checkbox"/> Hot Work <input type="checkbox"/> Asbestos Work Permit <input type="checkbox"/> Lab Hazard Clearance/Decommissioning <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

STEP 3: Review the hazard assessment with all employees who will be performing the work.

Date	Employee Names (Print and Initial)	Date	Employee Names (Print and Initial)

Supervisor Review:

Signature Date reviewed