



DAILY PRE-JOB SAFETY MEETING

KRAWFORD CONSTRUCTION (2011) INC

Completed by: _____

Date: _____

Job # _____

Location: _____

Number In Crew: _____

Hours of work, from _____ to _____

Site Superintendent or Foreman: _____

First Aid trained personnel on site: _____

Describe general scope of work:

CHECK OFF THE TOPICS COVERED IN THE PRE-JOB PLANNING MEETING TODAY

- Ensure all workers are present and fit to do work
- Confirm workers have received a site safety orientation
- Review previous day's work completion/concerns
- Safety related items discussed such as SWP's and SJP's
- Review scope of work today (including set up)
- Assign tasks and the need for a FLHA
- Review any expected changes to the site today
- Review any changes to Emergency Response Plan
- Working Alone — communications and check-in
- General scope of today's work by sub-trades
- Required communication with other workers
- Other: _____

EACH WORKER MUST COMPLETE A SEPARATE FIELD LEVEL HAZARD ASSESSMENT PRIOR TO START OF WORK ACTIVITIES

Name/Crew	# of Workers	Work Activities	FLHA Check
1.			<input type="checkbox"/>
2.			<input type="checkbox"/>
3.			<input type="checkbox"/>
4.			<input type="checkbox"/>
5.			<input type="checkbox"/>
6.			<input type="checkbox"/>

The FLHA's must be reviewed by the Supervisor when they are completed

TOPICS OR SUGGESTIONS FROM MEETING

LIST GENERAL SITE HAZARDS AND THE CONTROLS FOR THE SPECIFIC WORK AREAS

ALL ATTENDEES MUST SIGN BELOW. USE REVERSE IF ADDITIONAL SPACE IS NEEDED.

Print Name	Signature	Print Name	Signature
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Supervisor/Foreman Signature: _____

Date: _____

Management Review: _____

Date: _____