



# CONTRACTOR WEEKLY SAFETY INSPECTION REPORT

Job No. \_\_\_\_\_ Job Name \_\_\_\_\_

Superintendent \_\_\_\_\_ Date \_\_\_\_\_

Person(S) Making Inspection: \_\_\_\_\_

Suncontractors Onsite (List Name and Trade)


COLUMN A = Adequate at time of inspection  
B = Needs consideration

C = Needs immediate attention  
N/A= Not applicable

	A	B	C	N/A	Action Taken
<b>1. Job Information</b>					
• OSHA 300 forms posted and complete?					
• OSHA poster posted?					
• Phone no. for the nearest medical center posted?					
• Toolbox talks up to date?					
• Work areas properly signed and barricaded?					
<b>2. Housekeeping</b>					
• General neatness of work area?					
• Projecting nails removed or bent over?					
• Waste containers provided and used?					
• Passageways and walkways clear?					
• Cords and leads off of the floor?					
<b>3. Fire Prevention</b>					
• Adequate fire extinguishers, checked and accessible?					
• Phone no. of fire department posted?					
• "No Smoking" posted and enforced near flammables?					
<b>4. Electrical</b>					
• Extension cords with bare wires or missing ground prongs taken out of service?					
• Ground fault circuit interrupters being used?					
• Terminal boxes equipped with required covers?					
<b>5. Hand, Power &amp; Powder Actuated Tools</b>					
• Hand tools inspected regularly?					
• Guards in place on machines?					
• Right tool being used for job at hand?					
• Operators of powder actuated tools are licensed?					



	A	B	C	N/A	Action Taken
<b>6. Fall Protection</b>					
• Safety rails and cables are secured properly?					
• Employees have D-ring of belts in center of back?					
• Employees exposed to fall hazards are tied off?					
• Employees below protected from falling objects?					
<b>7. Ladders</b>					
• Ladders extend at least 36" above the landing?					
• Ladders are secured to prevent slipping, sliding or falling?					
• Ladders with split or missing rungs taken out of service?					
• Stepladders used in fully open position?					
• No step at top two rungs of stepladder?					
<b>8. Scaffolding</b>					
• All scaffolding inspected daily?					
• Erected on sound rigid footing?					
• Tied to structure as required?					
• Guardrails, intermediate rails, toeboards and screens in place?					
• Planking is sound and sturdy?					
• Proper access provided?					
• Employees below protected from falling objects?					
<b>9. Floor &amp; Wall Openings</b>					
• All floor or deck openings are planked over or barricaded?					
• Perimeter protection is in place?					
• Deck planks are secured?					
• Materials stored away from edge?					
<b>10. Trenches, Excavation &amp; Shoring</b>					
• Competent person on hand?					
• Excavations are shored or sloped back?					
• Materials are stored at least two feet from trench?					
• Ladders provided every 25 feet in trench?					
• Equipment is a safe distance from edge of trench or excavation?					
<b>11. Material Handling</b>					
• Materials are properly stored or stacked?					
• Employees are using proper lifting methods					
• Tag lines are used to guide loads?					
• Proper number of workers for each operation?					

	A	B	C	N/A	Action Taken
<b>12. Welding &amp; Burning</b>					
• Gas cylinders stored upright?					
• Proper separating distance between fuels and oxygen?					
• Burning/welding goggles or shields are used?					
• Fire extinguishers are nearby?					
• Hoses are in good condition?					
<b>13. Cranes</b>					
• Outriggers are extended and swing radius barricade in place?					
• Operator is familiar with load charts?					
• Hand signal charts are on crane?					
• Crane operators logs are up-to-date?					
• Employees kept from under suspended loads?					
• Chains and slings inspected and tagged as required?					
<b>14. Concrete Construction</b>					
• Employees are protected from cement dust?					
• Exposed skin is covered?					
• Runways are adequate?					
<b>15. Personal Protective Equipment</b>					
• Hard hats are being worn?					
• Safety glasses are being worn?					
• Respirators are used when required?					
• Hearing protection being worn when required?					
• Traffic vests being worn?					
<b>16. Unsafe Acts or Practices Observed (List):</b> _____					
_____					
_____					
_____					

Comments \_\_\_\_\_  
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 \_\_\_\_\_  
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Signature \_\_\_\_\_ Date \_\_\_\_\_