Daily Pre-Task Plan

Project Name: _____
Foreman Name: _____
Date: _____

Weather Conditions: _____
Task Description: _____
_____

	List Assigned Task or Tasks		Identify All Specific Hazards Found		How Will You Control the Hazards?

Hazard Indentification Tips

What permits are required for this task?
☐ Confinded Space ☐ Hot Work ☐ Lockout/Tagout
☐ Other: _____

Will the removal of an existing guardrail or means of fall protection be required for this work?
◯ Yes ◯ No

Is there a potential fire, explosion, toxic hazard?
◯ Yes ◯ No

Are there any SDSs that might need reviewed for hazardous substances that might be present on the job site?
◯ Yes ◯ No

Hazard Evaluation Tips

Use the following categories to assist you in a proper evatluation of all the hazards that have been indentified. Can any of the followng conditions occur with the hazards that have been indentified?

- ☐ Contacting Temperature Extremes
- ☐ Contacting Electrical Current
- ☐ Environmental/Airborne Release
- ☐ Moving Object/Equipment
- ☐ Hazardous Substance
- ☐ Obstruction/Interference
- ☐ Struck By
- ☐ Struck Against
- ☐ Fall/Slip/Trip
- ☐ Caught In/Between
- ☐ Material Handling
- ☐ Other

Hazard Control Tips

Use the following categories to assist you in determining the proper control methods for all the hazards that have been identified and evaluated.

- ☐ Ventilation of exposure area
- ☐ Isolation of hazard from worker
- ☐ Elimination of hazard
- ☐ Substitution of hazard with less severe one
- ☐ Change of work methods
- ☐ Good work practices
- ☐ Personal protective equipment
- ☐ Other

Housekeeping

Was site cleaned up and secured after work?
◯ YES ◯ NO

Employee Signature — Initials

_____ ____
_____ ____
_____ ____
_____ ____
_____ ____
_____ ____
_____ ____

By initaling this document you are stating you have completed this work day with no illness or injury.

Testing In Progress

☐ Hydrostatic Test Testing Pressure _____ Test Duration _____

☐ Pneumatic Test Testing Pressure _____ Test Duration _____

☐ Lockout/Tagout (if required) Explain _____

Type of system under test: _____

_____

Method of marking system under test: _____

_____