



AWEP Safety Review

The safety and well-being of every participant is critically important. Complete this checklist with ALL participants and review any other relevant safety and emergency policies and procedures specific to your workplace.

| | | Yes | No | N/A |
|---|---|--------------------------|--------------------------|--------------------------|
| 1 | CLEANLINESS: Are work areas clean? Is trash removed regularly? Is combustible trash/material in approved containers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | FLOORS/AISLES: Are floors and other surfaces smooth? Are aisles clear of hazards that may cause falls? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | STAIRS/RAMPS: Is sufficient lighting present and functional? Are handrails installed and properly positioned? Are ramps/inclines equipped with non-slip surfaces? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | Are rungs free of cracks or breaks? Are hinges working properly? Are safety feet/braces in use? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | STORAGE: Is there sufficient space to minimize clutter? Do corners have unobstructed views? Are products stacked in an orderly and stable fashion? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | MACHINES/EQUIPMENT: Are standard safety guards or guides provided and in working order? Are machines/equipment in safe operating condition and maintained consistent with manufacturers requirements? Are warning signs regarding unauthorized uses attached to machines/equipment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | MATERIALS HANDLING: Is material handling equipment provided, used and maintained according to manufacturers' instruction? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | HAND TOOLS: Are hand tools in safe condition, free of excessive wear and tear, and well maintained? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 | ELECTRICAL: Are machines and power equipment properly grounded and using power cords in safe operating condition? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 | LIGHTING: Is there sufficient lighting present and functional in work areas? Is emergency lighting in place, functioning and regularly tested? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 | PERSONAL PROTECTIVE EQUIPMENT: Is "PPE" provided and used whenever and wherever necessary and appropriate? Is PPE in good working order? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 | FIRST AID: Are individuals trained in first aid techniques clearly identified and known by all? Are facilities/safe areas provided to enable effective rendering of first aid should it become necessary? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 | FIRE EXTINGUISHERS: Are extinguishers present, readily accessible and clearly marked? Are they in working order and carrying current services tags? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 | EXITS: Are exits clearly marked and accessible? Are evacuation routes posted for all to see/read? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 | BOILERS/PRESSURE VESSELS: Are certificates of inspection (as required) present and current? Are safety devices in working order and tested regularly? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 | EMPLOYEE TRAINING: Are all employees trained in proper lifting techniques, use of equipment, and how to deal with hazardous materials? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 | GENERAL: Are records kept on inspection reports by applicable regulatory agencies? Do files contain recommendations and implementation of corrective actions as ordered by such agencies? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <hr style="width: 30%; margin: 0 auto;"/> Signature – Worksite Supervisor | | | | |