



# Jobsite Safety & Compliance Checklist: Construction Site Assessment

## Site Access & Security

Verification of perimeter fencing, gates, visitor logging, and authorized personnel access.

### Visitor Log Count

### Last Perimeter Fence Inspection Date

### Gate Lock Status

- Locked
- Unlocked
- Malfunctioning

### Access Control Measures in Place

- Security Cameras
- Fencing
- Keypad Entry
- Guard Presence

## Location of Emergency Access Point

 [Set My Current Location](#)



## Notes on Security Concerns

Write something...

# Personal Protective Equipment (PPE)

Assessment of required PPE availability, usage, and condition for all workers.

## Number of Hard Hats Available

Enter a number...

## Number of Safety Glasses/Goggles Available

Enter a number...

### Number of High-Visibility Vests/Clothing Available

Enter a number...

### PPE Inspection Status (Gloves)

- Good
- Fair
- Damaged
- N/A

### Last PPE Training Date

Enter date...

### Condition of Respirators (if applicable)

- Clean & Functional
- Needs Cleaning
- Damaged/Needs Replacement
- N/A

### Notes on PPE Condition/Observations

Write something...

## Hazard Identification & Control

Review of identified hazards (falls, electrical, confined spaces, etc.) and implemented control measures.

**Describe any identified fall hazards (e.g., unprotected edges, scaffolding issues)**

Write something...

**Which of the following potential electrical hazards are present?**

- Exposed Wiring
- Overhead Power Lines
- Damaged Equipment
- Inadequate Grounding
- None

**Detail control measures implemented for identified noise hazards (e.g., hearing protection, barriers)**

Write something...

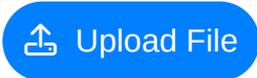
**Distance maintained from overhead power lines (in feet)**

Enter a number...

**Confined space entry permit required? (If yes, permit number)**

- Yes
- No

**Upload photos of any identified hazards**

 Upload File

**Describe measures taken to prevent dust exposure.**

Write something...

## Equipment & Machinery

Inspection of equipment functionality, maintenance records, and operator certifications.

**Equipment ID Number**

Enter a number...

**Last Inspection Date**

Enter date...

**Operating Hours (since last service)**

Enter a number...

**Operational Status (Pre-Use)**

- Functional
- Needs Repair
- Out of Service

**Notes/Observations (Mechanical Condition)**

Write something...

### Operator Certification Valid?

- Yes
- No
- N/A

### Upload Maintenance Records (optional)

 Upload File

### Fluid Levels (e.g., Oil, Coolant)

Enter a number...

## Excavation & Trenching Safety

Verification of shoring, sloping, benching, and atmospheric testing procedures.

### Excavation Depth (feet)

Enter a number...

### Trenching Method

- Shoring
- Sloping
- Benching
- Underslung
- Shielding

### Soil Classification (OSHA)

- Type A
- Type B
- Type C
- Type D

### Shoring Spacing (feet)

Enter a number...

### Atmospheric Testing Date

Enter date...

### Atmospheric Testing Results (O2, CO, H2S)

Write something...

### Competent Person Verification

- Yes
- No

### Photographic Evidence (Shoring/Sloping)

 Upload File

## Electrical Safety

Evaluation of grounding, lockout/tagout procedures, and overhead power line clearance.

### **Voltage Level (kV)**

Enter a number...

### **Grounding Method Verified?**

- Rod Grounding
- Plate Grounding
- Grid System
- Other

### **Last Lockout/Tagout Training Date**

Enter date...

### **Lockout/Tagout Procedures Followed?**

- Yes
- No
- N/A

### **Distance from Overhead Power Lines (feet)**

Enter a number...

### **Any Electrical Hazards Observed? (Describe)**

Write something...

### GFCI Protection Available and Functioning?

- Yes
- No
- N/A

### Upload Electrical Inspection Report (if applicable)

 Upload File

## Fall Protection

Assessment of guardrails, safety nets, personal fall arrest systems, and training.

### Guardrail Height (Feet)

Enter a number...

### Safety Net Distance Below Work Surface (Feet)

Enter a number...

### Type of Fall Arrest System in Use

- Personal Fall Arrest (Harness & Lanyard)
- Safety Net
- Controlled Access Zone
- Guardrail System

### Date of Last Fall Protection Training

Enter date...

### **Harness Condition (Visual Inspection)**

- Excellent
- Good
- Fair
- Poor - Requires Replacement

### **Areas Requiring Fall Protection**

- Roofing
- Scaffolding
- Trenches
- Edge Protection
- Mezzanines

### **Inspector Signature**

## **Housekeeping & Sanitation**

Review of site cleanliness, waste disposal, and restroom facilities.

### **Waste Container Count**

### **Restroom Soap/Sanitizer Levels (Scale of 1-5)**

### Areas needing sweeping/cleaning?

- Entrance
- Break Room
- Restrooms
- Work Areas
- Perimeter

### Specific Cleaning Notes/Issues

Write something...

### Last Sanitation Service Date

Enter date...

### Overall Cleanliness Rating (Poor, Fair, Good, Excellent)

- Poor
- Fair
- Good
- Excellent

## Emergency Preparedness

Confirmation of emergency contact information, first aid supplies, and evacuation plan.

### Emergency Contact List

Write something...

### First Aid Kit Expiration Date (MM/DD/YYYY)

Enter a number...

### Last Fire Drill Date

Enter date...

### Scheduled Time for Next Fire Drill

### Location of Fire Extinguishers

 [Set My Current Location](#)



### Evacuation Routes Verified?

Yes

No

Partial

## Evacuation Plan Map (Optional)

 Upload File

## Emergency Response Team Identified?

Yes

No

# Regulatory Compliance

Verification of adherence to OSHA regulations, permits, and environmental compliance.

## OSHA Permit Number (if applicable)

Enter a number...

## Relevant Environmental Permits Obtained?

Yes

No

Pending

## Last OSHA Inspection Date

Enter date...

## Summary of any Compliance Issues Found & Corrective Actions Planned

Write something...

### Stormwater Pollution Prevention Plan (SWPPP) Current?

- Yes
- No
- N/A

### Relevant Permits & Documentation (Upload)

 Upload File

### Air Quality Permit Number (If Applicable)

Enter a number...