



# Construction Job site SAFETY CHECKLIST

Location Name Signature Date

Contractor Site Supervisor Contractor Employees at Site General Contractor Total Employees at Site

## Program Administration

DESCRIPTION	YES	NO
Posting in place		
OSHA		
Emergency phone numbers		
Haul Routes		
HAZCOM		
SDS		
Restricted areas		
Last safety meeting held on: _____		
Topic discussed:		

## Housekeeping and Sanitation

DESCRIPTION	YES	NO	N/A
Work areas orderly?			
Adequate lighting?			
Sanitary facilities clean & adequate?			
Passageways and walkways clear?			
Waste containers provided & used?			
Adequate eating and drinking area?			