

# The L.I.S.T.

Lets Instill Safety Together

Jobsite #: \_\_\_\_\_

Superintendent: \_\_\_\_\_

Date: \_\_\_\_\_

Completed By: \_\_\_\_\_

**\*Corrective  
Action Needed**

- |   |  |
|---|--|
| 1. Hard Hats (Subs, Suppliers, Electricians, etc.)<br>Comments: _____                                       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Personal Protection (safety glasses, ear plugs, gloves, vests, etc.)<br>Comments: _____                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. General Housekeeping<br>Comments: _____  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Ladders (tied off, top of ladder 42" above landing, no broken, bent or missing rungs)<br>Comments: _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Scaffolding (constructed with proper planking & blocking)<br>Comments: _____                             | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Handrails Around All Openings & Leading Edges (rail at 42" with intermediate rail)<br>Comments: _____    | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Harness & Life Line (used at all leading edge work)<br>Comments: _____                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Crane Safety (rigging, cables, straps, barricaded swing zone)<br>Comments: _____                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Air Monitoring & Respiratory Protection<br>Comments: _____   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. Designated Safety Coordinator / Competent Person (on site at all times)<br>Comments: _____              | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 11. Electrical Equipment, Components & Cords in Good Shape<br>Comments: _____                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 12. MSDS, Safety Manual and Emergency Plan Readily Available & Visible<br>Comments: _____                   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 13. Fire Extinguishers Readily Available & Serviced (labeled PKG)<br>Comments: _____                        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 14. Lock-out Tag-out and Machine Guarding<br>Comments: _____  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 15. Safe Excavation<br>Comments: _____  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 16. All employment/ Labor Law Posters Posted in Visible Location<br>Comments: _____                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Additional Comments:

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*\*Please use reverse side to describe any corrective actions that were taken.*

Management Signature

Date