

# JOB HAZARD ANALYSIS

JHA · Pre-Task Risk Assessment

## JOB INFORMATION

PROJECT / JOB NAME

PROJECT NUMBER

JOB LOCATION / ADDRESS

DATE

START TIME

EXPECTED DURATION

WEATHER CONDITIONS

SUPERINTENDENT / FOREMAN

TASK / SCOPE OF WORK DESCRIPTION

## TRADES & CREW INVOLVED

TRADES ON SITE (CHECK ALL THAT APPLY)

- General Labor
- Carpentry
- Concrete / Masonry
- Steel / Iron Work
- Electrical
- Plumbing
- HVAC / Mechanical
- Drywall / Finishes
- Roofing
- Painting
- Excavation / Earthwork
- Demolition
- Welding / Cutting
- Crane / Rigging
- Mold Remediation
- Water Damage Restoration
- Abatement

TOTAL CREW SIZE

## GENERAL HAZARDS PRESENT

IDENTIFY ALL HAZARDS PRESENT ON THE JOB SITE TODAY

- Falls from Height

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- Falling Objects
- Slips / Trips
- Electrical Shock
- Struck-By
- Caught-Between
- Hot Work / Fire
- Confined Space
- Excavation / Trench
- Hazardous Chemicals
- Silica Dust
- Lead / Asbestos
- Noise > 85dB
- Heat / Cold Stress
- Heavy Lifting
- Mobile Equipment
- Overhead Power Lines
- Pinch Points
- Mold / Mycotoxin Exposure
- Bioaerosols / Spores
- Sewage / Black Water (Cat 3)
- Wet / Slippery Surfaces
- Compromised Structure

## REQUIRED PPE

### PERSONAL PROTECTIVE EQUIPMENT REQUIRED FOR THIS TASK

- Hard Hat
- Safety Glasses
- Hi-Vis Vest
- Steel-Toe Boots
- Work Gloves
- Cut-Resistant Gloves
- Hearing Protection
- Dust Mask / N95
- Respirator
- Face Shield
- Welding Hood
- Fall Harness / Lanyard
- Arc-Flash PPE

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- Chemical Apron
- Tyvek / Disposable Coveralls
- P100 Respirator
- PAPR (Powered Air-Purifying)
- Nitrile Gloves
- Rubber Boots / Covers

## PERMITS & SPECIAL REQUIREMENTS

### REQUIRED PERMITS (CHECK ALL THAT APPLY)

- Hot Work Permit
- Confined Space Entry
- Excavation Permit
- LOTO (Lockout/Tagout)
- Energized Work Permit
- Crane Lift Plan
- Scaffold Inspection Tag
- Roof Access Permit
- Mold Containment Established
- Negative Air / HEPA Filtration
- Decon Chamber Setup
- IICRC S520 Protocol Followed

## B MOLD REMEDIATION DETAILS (IF APPLICABLE)

AFFECTED AREA (SQ FT)

WATER DAMAGE CATEGORY

MOLD CONDITION (IICRC S520)

REMEDICATION LEVEL

CONTAINMENT TYPE

MOLD SPECIES IDENTIFIED

AIR SCRUBBER / HEPA UNITS ON SITE

NEGATIVE PRESSURE DIFFERENTIAL

BIOCIDES / ANTIMICROBIALS IN USE (BRAND & SDS ON SITE)

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OCCUPANTS NOTIFIED / VACATED?

POST-REMEDIAION VERIFICATION PLAN

## EMERGENCY INFORMATION

NEAREST HOSPITAL

HOSPITAL ADDRESS

EMERGENCY CONTACT #

SITE FIRST AID LOCATION

MUSTER / ASSEMBLY POINT

SITE SAFETY OFFICER

EVACUATION ROUTE / SPECIAL INSTRUCTIONS

## CREW ACKNOWLEDGMENT & SIGN-OFF

PREPARED BY (FOREMAN/SUPER)

TITLE

**SIGNATURE** \_\_\_\_\_

SIGNATURE

*Type name to sign — or open in Adobe Fill & Sign and tap to draw signature*

DATE

## MID-SHIFT REVIEW & CHANGES

TIME / CHANGE / ACTION TAKEN...