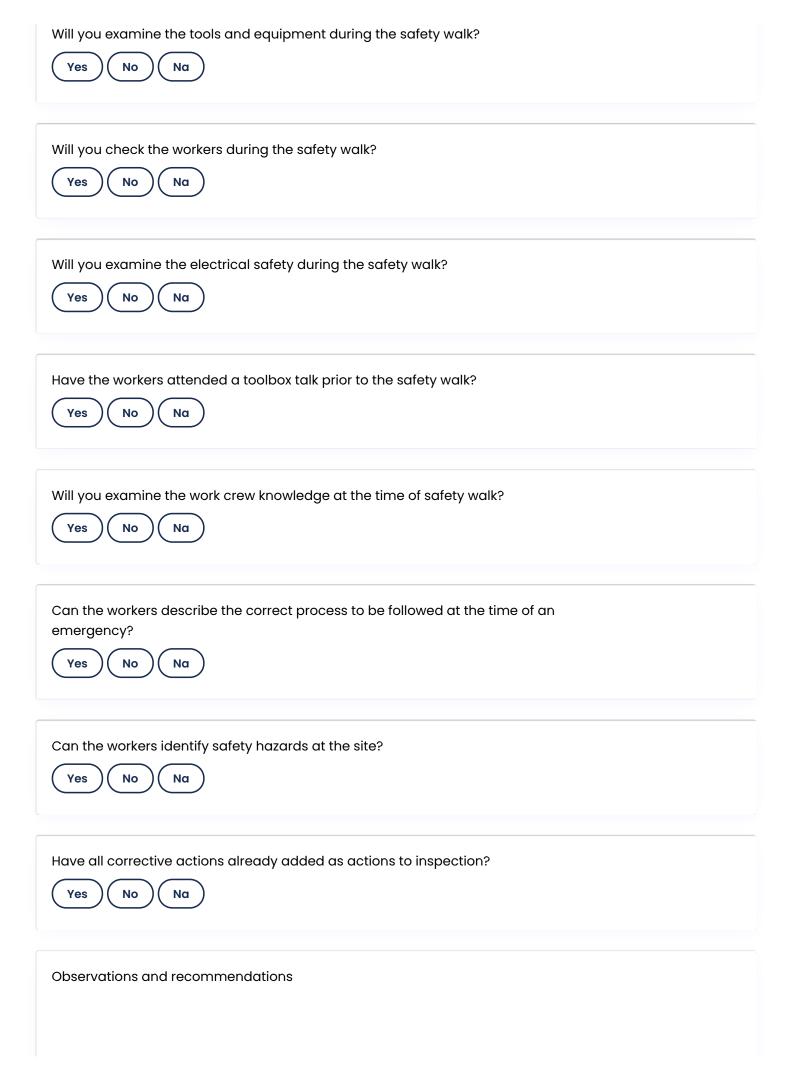
Safety Walk Checklist

Construction

SAFETY WALK
Project Title
Supervisor on duty
Do you wish to assess the working areas on the safety walk? (Yes) (No) (Na)
Will you examine the fall protection during inspection?
Yes No Na
Will you examine the PPE in safety? (Yes) (No) (Na)
Will you examine excavation during the safety walk?
Yes No Na
Do you wish to examine ladders during the safety walk? (Yes) No Na



textarea	
Photos if any,	UPLOAD
Signature of site inspector:	SIGNATURE
Signature of site supervisor:	SIGNATURE
Signature of work crew:	SIGNATURE