



A Division of CCS Income Trust

# JOB SAFETY ANALYSIS ( JSA ) FORM

<b>WORK-SITE / PROJECT NAME :</b>		<b>PROJECT # :</b>
<b>DATE :</b>	<b>WEATHER CONDITIONS :</b>	
<b>NAME OF PRIME CONTRACTOR : HAZCO ENVIRONMENTAL SERVICES, A DIVISION OF CCS INC.</b>		
<b>NAME OF SUB-CONTRACTOR(S) :</b>		
<b>TASK / ACTIVITY :</b>		

**Check all applicable anticipated or potential hazards :**

<input type="checkbox"/> Work affecting integrity of Critical Control Systems <input type="checkbox"/> Electrical ( Live ) <input type="checkbox"/> Electrical ( Isolation ) <input type="checkbox"/> Hot Work <input type="checkbox"/> Confined Space Entry <input type="checkbox"/> Equipment Handling & Dismantling <input type="checkbox"/> Excavation <input type="checkbox"/> Stored Pressure Systems ( e.g. - Propane, NH <sub>3</sub> ) <input type="checkbox"/> Radiography / X-ray Testing	<input type="checkbox"/> Heavy Equipment Lifting <input type="checkbox"/> Traffic Patterns ( Mobile Equipment / Pedestrian ) <input type="checkbox"/> Temporary Pumping & Transfer Facilities <input type="checkbox"/> Extreme Weather <input type="checkbox"/> Pile Driving / Drilling Equipment <input type="checkbox"/> Bore-hole Drilling / Test Pit Excavation <input type="checkbox"/> Pressure Testing <input type="checkbox"/> Overhead Power-lines <input type="checkbox"/> Hydro-blasting / Sand-blasting	<input type="checkbox"/> Work At Height (Scaffolds, ladders, roofs, etc...) <input type="checkbox"/> Underground Tank Removal / Disposal <input type="checkbox"/> Demolition <input type="checkbox"/> Exposed Handling of Petroleum Products <input type="checkbox"/> Mobile Equipment <input type="checkbox"/> Drilling, Grinding, Cutting <input type="checkbox"/> Work in Hazardous Areas ( e.g. – Designated Substances ) <input type="checkbox"/> Other :
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**Ensure that all hazards identified – are addressed in the JSA below ( refer to Safety Method Statements as required )**

Sequence of Basic Job Steps	Potential Hazards	Safety Controls to Reduce or Eliminate Hazard
1.		
2.		
3.		

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Sequence of Basic Job Steps	Potential Hazards	Safety Controls to Reduce or Eliminate Hazard
4.		
5.		
6.		
7.		
8.		
9.		
10.		

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**Tools / Equipment** : *( List of tools / equipment to be used & their storage on the work-site, if relevant to safety at the site )*

**Personal Protective Equipment:** *( Minimum requirement: safety shoes / hard hat / visi-vest / gloves on person and used as required )*

**PPE Specifics :**

<input type="checkbox"/> Hard-hat ( CSA side-protection )	<input type="checkbox"/> Eye Protection ( CSA safety glasses )	<input type="checkbox"/> Safety Boots ( Steel-toed CSA approved )
<input type="checkbox"/> Hearing Protection ( Class A )	<input type="checkbox"/> Gloves ( puncture / cut resistant )	<input type="checkbox"/> Coveralls ( Reflective – Non-Fire-rated )
<input type="checkbox"/> Other		

**Outside Authorities** : *( Any authorities who need to be advised including site operator )*

N/A

**Disposal of Surplus or Contaminated Materials** : *( Disposal details, e.g. when, where to, how, etc.)*

N/A

**SAFETY PROCESS INFORMATION REGARDING THIS JSA**

<b>Prepared By :</b>	<b>Position :</b>	<b>Date :</b>
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**Person(s) Carrying Out This Process On The Actual Work-Site**

<b>Name(s) :</b>	<b>Signed :</b>	<b>Date :</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<b>Verified By :</b>	<b>Position :</b>	<b>Date :</b>
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**\* Note \*** For Tasks / activities that extend beyond a single day, use the attached “ DAILY RENEWAL ” form for the review of JSA with current Crew & weather



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# JOB SAFETY ANALYSIS ( JSA ) FORM

<b>JSA – DAILY RENEWAL FORM</b>	<b>DATE :</b>	<b>WEATHER CONDITIONS :</b>
<b>CHANGE NOTES :</b>		<b>NAME OF PARTICIPANTS ( PRINT &amp; SIGN – <u>CIRCLE SUPERVISOR'S NAME</u> ) :</b> _____ _____ _____
<b>JSA – DAILY RENEWAL FORM</b>	<b>DATE :</b>	<b>WEATHER CONDITIONS :</b>
<b>CHANGE NOTES :</b>		<b>NAME OF PARTICIPANTS ( PRINT &amp; SIGN – <u>CIRCLE SUPERVISOR'S NAME</u> ) :</b> _____ _____ _____
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