

<h2 style="margin: 0;">P&amp;W Employee Job Safety Assessment</h2>	<b>Date:</b> .....
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It can be filled up by several employees (everyone have to sign it ) if they perform the same scope of activities

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**Order/notification number** .....

First & last name

Signatures

**Attention!!!** If there is a condition that can affect the health and safety of employees or the environment, each employee has the right and obligation to stop work and inform the supervisor.

Notes:.....  
 Select answers - X

<b>Potential Hazards</b>		Yes	N/A	Yes	N/A
Slipping /tripping				Burn / Frostbite	
Squeezing / crushing				Explosion / fire hazard	
Sharp edges				Falling objects	
Strike				Substances / gases under pressure	
Fall				Chemical substances	
Electric shock				Burdensome noise	
Collision with vehicles, elements in motion				Other.....	

If X at "YES" is selected, fill in the table.

If X at "not applicable" is selected, do not fill this table

<b>INDIVIDUAL AND COLLECTIVE PROTECTION EQUIPMENT</b>	YES	N/A	<b>WORKING AT HEIGHT</b>	YES	N/A
<input type="checkbox"/> Clothing <input type="checkbox"/> Gloves <input type="checkbox"/> Shoes <input type="checkbox"/> Helmet			<input type="checkbox"/> Visually check the technical condition of the equipment for work at heights <input type="checkbox"/> Secure the work area <input type="checkbox"/> Use the required personal and collective protection equipment		
<input type="checkbox"/> Protective goggles <input type="checkbox"/> Face protection <input type="checkbox"/> Hearing protection <input type="checkbox"/> Other .....					
<b>FIRE AND FIRST AID EQUIPMENT</b>	YES	N/A	<b>HAZARD CONTROL FROM THE POWER SOURCES</b>	YES	N/A
<input type="checkbox"/> I know the location of the fire protection cut-off switches <input type="checkbox"/> I know the location of the manual fire alarm buttons			<input type="checkbox"/> Implement the Lockout / Tagout procedure <input type="checkbox"/> Check residual energy and lead to zero energy <input type="checkbox"/> An exception from the Lockout procedure in accordance with Instruction No. 106		
<input type="checkbox"/> I know the location of fire extinguishers <input type="checkbox"/> I know the location of an eyewash station <input type="checkbox"/> I know the location of the shower <input type="checkbox"/> I know the location of the first aid kit					
<b>CLOSED SPACES</b>	YES	N/A	<b>LIFTING AND MOUNTING</b>	YES	N/A
<input type="checkbox"/> Implement the procedure of entering closed spaces <input type="checkbox"/> Use the required personal and collective protection equipment			<input type="checkbox"/> Check the good technical condition of the lifting equipment and the current inspection <input type="checkbox"/> Check if the load is secured correctly		
<b>ELECTRICAL SAFETY</b>	YES	N/A	<b>TRANSPORT HANDWORK</b>	YES	N/A
<input type="checkbox"/> Check that the power tools are in good condition and have a current technical inspection <input type="checkbox"/> Use current circuit breakers In = 10mA			<input type="checkbox"/> Select the right number of people to do the work <input type="checkbox"/> Secure the work area and load		
<b>HAND TOOLS</b>	YES	N/A	<b>CHEMICAL SUBSTANCES</b>	YES	N/A
<input type="checkbox"/> Check if the tools are in good condition <input type="checkbox"/> Check if the tools are used in right way			<input type="checkbox"/> Take into account the hazards of chemical substances based on the safety data sheets <input type="checkbox"/> Use required personal protective equipment		
<b>DANGEROUS FIRE WORK</b>	YES	N/A	<b>WORKING WITH ASSURANCE</b>	YES	N/A
<input type="checkbox"/> Implement the fire hazard procedure <input type="checkbox"/> Secure the area <input type="checkbox"/> Use the required personal and collective protection equipment			<input type="checkbox"/> Work under electric voltage <input type="checkbox"/> Work at height <input type="checkbox"/> Work in closed spaces <input type="checkbox"/> Other.....		

	<b>STAGES OF WORK PERFORMED BY A FEW EMPLOYEES</b>	
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<b>COVID-19 REQUIREMENTS</b>	YES	N/A	
<input type="checkbox"/> protective mask <input type="checkbox"/> Additionally - a protective cover always when working at a social distance of less than 2 m (minimum one person in the pair)			

**It should be filled in when the task is performed by more than one employee, and it's not completed at the same day.**

The description should contain specific hazards and its controls, confirmed by the current date.

Job Steps	Potential Hazards	Hazard Controls	Date
Step 1			
Step 2 (If Applicable)			
Step 3 (If Applicable)			
Step 4 (If Applicable)			
Step 5 (If Applicable)			
Step 6 (If Applicable)			
Step 7 (If Applicable)			

- **In case of doubts in the work safety assesement, please contact your supervisor.**
- **In case of changing hazards during task execution, the work should be stopped and the evaluation carried out again.**
- **When work is done by PWR Contracotrs, it is necessary do discuss the threats and confirm it by PWR Coordinator <sup>i</sup>**

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PWR Coordinator sign. and date

<sup>i</sup> **Confirmation by the PWR Coordinator is not necessary for Contractors that have signed Permanent Agreements**