

Site Access Control Procedures Sheet

Date: _____

Project Name: _____

Location / Zone: _____

Prepared By: _____

1. Site Entrance & Exit Points

Access Point	Type (Pedestrian/Vehicle)	Control Measures	Remarks
_____	_____	_____	_____
_____	_____	_____	_____

2. Site Induction & Registration

Induction Required: Yes

No

Registration Location: _____

3. Vehicle Access Procedures

Checkpoints: _____

Permit Required: Yes

No

Additional Comments: _____

4. Visitor & Contractor Log

Name	Company	ID Checked	Time In	Time Out
_____	_____	<input type="checkbox"/>	_____	_____
_____	_____	<input type="checkbox"/>	_____	_____

5. Personal Protective Equipment (PPE) Requirements

PPE List:

Additional Notes:

6. Authorization & Sign Off

Supervisor Name:

Signature:

Date: