

Site Safety Audit Report

General Information

Project Name	
Location	
Date of Audit	
Auditor Name	
Site Supervisor	

Audit Checklist

Item	Status	Comments
Personal Protective Equipment (PPE)		
Site Housekeeping		
Equipment Condition		
Emergency Exits		
Electrical Safety		
Fire Safety		

Observations & Recommendations

Corrective Actions

Issue	Action Required	Person Responsible	Target Date

Sign-Off

Auditor Signature	
Date	

Site Supervisor Signature	
Date	
