

Site Preparation Hazard Assessment Checklist

Date: _____ Project/Site: _____ Assessed By: _____

Checklist

Hazard	Description	Present?	Controlled?	Notes / Controls Implemented
Utilities Location	Have underground/overhead utilities (gas, water, electrical, etc.) been identified and marked?	<input type="checkbox"/>	<input type="checkbox"/>	
Site Access	Are safe entry, exit, and traffic control measures in place?	<input type="checkbox"/>	<input type="checkbox"/>	
Ground Conditions	Is the site surface stable and suitable for work and equipment?	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous Materials	Are there any chemicals, asbestos, or hazardous materials present?	<input type="checkbox"/>	<input type="checkbox"/>	
Environmental Conditions	Have weather, wildlife, water, or vegetation hazards been assessed?	<input type="checkbox"/>	<input type="checkbox"/>	
Overhead/Obstructions	Are there any low-clearance, power lines, or other overhead obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	
Noise and Dust	Could machinery or site prep generate excessive dust or noise?	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify)	_____	<input type="checkbox"/>	<input type="checkbox"/>	

Additional Notes

Assessor Signature

Supervisor Signature