

Take 5 Safety Checklist

Company Name: Date: Ref No:

Site Name:

Job/Task:

Contractor:

Take 5 Safety Checklist

Have you received induction training?

Do you know the companys health & safety rules?

Are you familiar with how to report hazards & incidents?

Are there emergency facilities and an evacuation procedure/route for the site?

Do you have access to appropriate emergency and first aid equipment?

Have you asked the person in charge about all relevant hazards?

Do you have the correct procedures and equipment to do the work safely?

Is there appropriate separation of vehicles and people during the proposed work?

Is all required electrical/mechanical equipment in a safe condition?

Please Select

Are hazardous/dangerous substances used and stored according to their safety data sheets?

Please Select

Have you consulted with workers about the task and the safe way to do it?

Please Select

Do you have all necessary PPE?

Please Select

Have you got a safe way of getting in and out of your work area?

Please Select

Have any manual handling risks been identified and assessed?

Please Select

Any other observations or comments?