

## DAILY SITE SAFETY INSPECTION

Project: \_\_\_\_\_  
 Site Supervisor: \_\_\_\_\_ Week Ending: \_\_\_\_\_

Item	M	T	W	T	F	S	S	Comments / Corrective Actions
<b>Inspected / Checked By:</b>	<b>Initial in day box who inspected</b>							
Access/Egress – paths clear, signage								
Electrical - equipment tested & tagged								
Electrical - adequate Lighting								
Excavations Barricaded / Covers Fixed								
Penetrations Cover & Fixed Down								
Hot works – fire equipment /permit								
First Aid/Emergency/Injury/evac plan								
Emergency Evacuation Drill carried out								
Manual Handling – tasks reviewed								
Hazardous Substances - Register								
SDS/ Spill Kit on site								
Height work – Permit / licences checked								
Perimeter protection / Handrails								
EWP/Scissor/ Boom Lift/s log books chk								
Fall restraint/arrest system in use								
Scaffold - Over 4m, erected by ticketed								
Mobile Scaffold checked, braced, ladder access,								
Housekeeping – site clean/stockpiles								
Noise – noisy works identified, site hours, PPE in use								
Personal Protective Equipment								
Plant & Equipment – maintenance records / daily log book complete What's on site:								List:
Operator ticketed/competency verified								
Public Protection – barricades, gates locked								
Training – Inductions complete / SWMS								
Environmental Inspections								
Dust/Air Quality – suppressed								
Vegetation – trees protected								
Storm water/run off - controlled								
Waste Management – bins in place								
Daily Site Security – lock up procedures								
Doors / hoardings locked and secured								
Equipment under lock – keys removed (Includes all power tools, ladders, fire extinguishers, plant, scaffold in site container etc								

**Weekly Site Safety Checks / Inspection**

Carried out by: \_\_\_\_\_

<b>Item</b>	<b>By / Initial</b>	<b>Comment</b>
WHS Site Specific Plan Reviewed		Version No:
Safe Work Method Statements Reviewed		No of SWMS on Site:
Construction Hazard Log Reviewed		Any additions required:
Accident Reports		Details:
Hours worked on site inc subbies		Hrs worked:
Site Inductions		No for week:
Site Subby Safety Walk carried out		No of Issues:
Toolbox Talk carried out		Date:
Visitors Log Complete		
Non conformances issued		No of:
Fire Extinguisher		Last Test Date:
Air Horn		Last Pumped Up:
Memo's / Toolbox talks posted up		
Quality ITP signed off		
Environmental Management Plan Complete		Date: