Proline Building Commercial Pty Ltd

WEEKLY SUBBY SITE SAFETY INSPECTION

Project: _____ Date: _____

Inspect By: _____ Time: _____

(Proline Representative)

Inspect By: _____ Time: _____

(Subby Representative)

☐	Hazardous Substances Is SDS available	☐	Height Works – scaffold or EWP in use / logbook checked	☐	Amenities clean
				☐	Hotworks / Permit
☐	Leads on ground	☐	Ladders good working order	☐	Fire Hazards
☐	Traffic / Pedestrian Mgnt	☐	Heavy Equipment on site	☐	Manual Handling
☐	Housekeeping (Rubbish)	☐	Leads & Tools Tested & Tag	☐	PPE in use by all
☐	Excavations / Penetrations	☐	Access paths clear	☐	Dust and Noise
☐	SWMS checked/reviewed	☐	Safety Observations	☐	Client Site Rules

Location on Site	Unsafe Condition	Risk Rating / Due Date	Corrective Action	Action By	Signed Off / Date

Risk Rating Class:

1. Requires Immediate Rectification
2. Requires rectification within 48 hours
3. Requires rectification within 5 working days