

SITE-SPECIFIC ORIENTATION CHECKLIST

Worker Information		
Name: <i>Brian Wilson</i>	Date of arrival: <i>November 22, 2013</i>	
Company: <i>Bubba's Mobile Tire Repair</i>	Position: <i>Tow truck driver</i>	
Tickets and Permits		
<input checked="" type="checkbox"/> Confirmed required tickets are up-to-date <input checked="" type="checkbox"/> Confirmed required Safe Work Permits are in order		
Current Site Conditions		
<input checked="" type="checkbox"/> Review Key Conditions	As appropriate: <input checked="" type="checkbox"/> Current contractors on-site including concurrent work activities <input type="checkbox"/> H ₂ S / hazardous materials <input type="checkbox"/> Recent wildlife reports <input type="checkbox"/> Current activities <input checked="" type="checkbox"/> Parking / staging area <input type="checkbox"/> Current local weather concerns	
Introductions and Tools		
<input checked="" type="checkbox"/> Give introductions to site management and other contractors if present.		
<input checked="" type="checkbox"/> Tour of location including:	<input type="checkbox"/> Bathrooms <input type="checkbox"/> Lunchroom <input type="checkbox"/> Safety bulletin board <input checked="" type="checkbox"/> First Aid Station/medic trailer <input type="checkbox"/> Air trailer <input checked="" type="checkbox"/> Site-Specific Rules	<input checked="" type="checkbox"/> Emergency exits and supplies <input checked="" type="checkbox"/> Emergency procedures <input checked="" type="checkbox"/> Fire protection equipment <input type="checkbox"/> SCBA equipment <input type="checkbox"/> Other _____

By signing below I acknowledge that I was provided with information necessary to operate on this site in a safe manner and will comply with <Company> Safety Program

<i>Brian Wilson</i>	<i>BWilson</i>	<i>November 22, 2013</i>
Worker Name	Signature	Date
<i>Ringo Starr</i>	<i>Ringo Starr</i>	<i>November 22/13</i>
Supervisor Name	Signature	Date