

Site Safety Plan Example Template

Date :				
Project Site Location				
Contractor's Name				
Contractor's Contact Information:				
Prepared By:				
Preparer Signature:				
PURPOSE OF SITE VISIT/TASK:				
PERSONNEL RESPONSI	BILITIES:			
Supervisor/Team Leader:				
Team Members:				
HAZARD EVALUATION:				
PERSONAL PROTECTIVE EQUIPMENT & CLOTHING REQUIRED:				

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Owner: RMS Director



EMERGENCY COMMUNICATION MEANS:				
EMERGENCY RESPONSE METHOD:				
ACCIDENT REPORTING:				
POTENTIAL HAZARDS AT WORKSITE OR DUE TO WORK:				
Biological	Eye Hazard	Overhead Hazard	Excavations	
Chemical Hazard	Fall Hazard	Slips/Trips/Falls	Noise	
Cold Stress	Heat Stress	Squatting/Bending		
Confined Space	Lifting	Tools		
Electrical/LOTO	Mechanical	Toxic Materials		
Environment	Motor Vehicle	Traffic Hazard		
CONTRACTOR DE	PARTMENT DIRECT	OR SIGNATURE		
Name:				
Signature:				
UNIVERSITY REPRESENTATIVE SIGNATURE				
Name:				
Signature:				

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