



Lusail Real Estate Development Company

Health, Safety, Security, Environment, Logistics & Quality Department

Lusail Operation Safety Procedural Forms/Checklists – Job Hazard Analysis Evaluation Checklist

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COMPANY PROPRIETARY INFORMATION

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Job Hazard Analysis Form

JOB HAZARD ANALYSIS EVALUATION CHECKLIST	
Reviewed By:	Date:
Contractor:	Activity/Task:
Submittal Status:	
<p>Instructions: This evaluation checklist is to be used when evaluating the Content of the contractors Risk assessments. Notes should be made at the bottom of the document; it should then be filled as a reference with the risk assessments. All comments to contractors shall be made on the usual submittal form.</p>	

SI	Description	Yes	No	N/A
1	Dated and signed			
2	Location and task identified			
3	Identify associated hazards with task and location.			
3.1	Health			
A	Noise			
B	Vibration			
C	Exposure to Hazardous materials, solvents, paints			
D	Dust			
E	Fumes			
F	Vibration			
G	Manual handling			
3.2	Safety			
A	Working at height			
B	Confined space			

SI	Description	Yes	No	N/A
C	Collision with moving vehicles			
D	Falling materials			
E	Working on or near water			
F	Electrical hazards			
G	Lifting operations and associated hazards			
H	Loading unloading of materials ,plant or equipment			
I	Hot works/Fire risks			
J	Pressure testing or commissioning works			
K	Slips trips and falls			
L	Use of power tools , (electrical, hydraulic, pneumatic)			
M	Striking buried services			
N	Use of Flammable material			
O	Issues relating to storage of material, stacking, access etc.			
P	Adverse weather, heat stroke etc			
Q	Safe access and egress			
R	3rd party safety , cordon off dangerous areas			
S	Edge protection, floors, holes, excavations			
T	Transport plant and vehicle movement			
3.3	Environment			
A	Accidental spillage, burst hose, rupture of container			
B	Spill kits provided			
C	Bunds in place			
D	Drip trays			
E	Refuelling procedure in place			

SI	Description	Yes	No	N/A
F	Housekeeping/waste management			
4	Identify persons exposed remember personal who are not directly involved, security delivery drivers etc.			
5	Calculate severity and likelihood			
6	Relevant control measures			
7	Training and competency requirements.			
8	Communication to all involved.			
9	Other			

COMMENTS	

Signature:.....

Date:.....

Appointment:.....