

STRPRQ - 03

WORKING AT HEIGHTS RISK ASSESSMENT FORM

JOB TITLE

DATE ASSESSED

JOB DESCRIPTION

NATURE OF WORK:

Construction	Agriculture
Manufacturing	Material Handler
Utilities	
Other:	

WHO IS AT RISK? check all that apply

Employee		Contractor
Client / Customer		Members of Public
Other:		

HAZARD IDENTIFIED:

Yes	No	HAZARD	
		Fall from height	
		Fall through fragile roof	
		Objects falling on worker(s)	
		Objects falling on members of public	
		Objects falling on resources (e.g. machinery, equipment)	
		Equipment supporting worker at height collapsing or breaking loose	
		Equipment supporting worker at height slipping/shifting around	
		Personnel slipping or tripping at access way for elevated equipment	
		Other:	

Other:	
Other:	



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CONTROL MEASURES: Attach images for visual reference

HAZARD	CONTROL MEASURE	PERSON RESPONSIBLE



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OBSERVATIONS:

Yes	No	OBSERVATION	NOTES
		Have workers been safely trained in safe working methods?	
		Are items in the work area properly stored away to minimize tripping hazards?	
		Have all workers at height been determined to be competent, or supervised by someone who is?	
		Do contractors provide documentation to verify they have been screened and properly trained?	
		Are contractors supervised or monitored by a competent person?	
		Are safety harnesses, safety nets, and other safety equipment used provided and inspected on a regular basis?	
		Are ladders, lifts, and other elevated equipment used provided and inspected on a regular basis?	

RECOMMENDATIONS

INSPECTOR NAME

SIGNATURE

DATE INSPECTED