Logo	Site Safety Observation Form	Doc Ref #: XYZ/IMS/QHSE/F/00 Issue Date: DD-MM-YYYY
	QHSE Forms	Rev #: 00
	Organization Name	Page <b>1</b> of <b>2</b>

Obs	ervation #		Issue Date			
1.	General Infor	mation				
Proj	ect Name		Work Location			
Proj	ect Ref #	Ref # Work Site Name				
Obs	served By Next Review					
2.	Work Descrip	otion – Explain the ongoing activity.				
3.	Points that a	re to be verified				
		te to be verified				
3.1.	Employees					
1	Worker is found doing an "Unsafe Act"?  Yes  No			No 🗆		
2	Worker is found working in an "Unsafe Condition"?  Yes  No			No 🗆		
3	Worker is found working in "Unsafe Position/ posture"?  Yes \[ \bigcup_{No} \[ [ \]			No 🗆		
4	Worker is found "working at Unsafe Speed/ doing horse work/ adopting shortcuts"?  Yes No			No 🗆		
5	Worker is found working "Without Permission/ PTW/ Authorization/ Supervision"?  Yes No					
3.2.	Handheld To	pols				
1	Damaged, poorly insulated or discarded tool is being used for work activity?  Yes No			No 🗆		
2	Wrong tool is found being used for activity or onsite?  Yes No			No $\square$		
3	Worker is found using unauthorized tool for activity?  Yes No			No 🗌		
4	Worker is found using personal tool instead of company provided tool for activity?  Yes No			No 🗆		
5	Tool was seen being used in an "Unsafe Manner"?  Yes No			No 🗌		
3.3.	3.3. Elevated Work Areas					
1	Means of access to elevated work areas are not suitable?  Yes No			No 🗆		
2	Elevated work	areas and platforms are not protected again	nst fall hazards?		Yes 🗌	No 🗆
3	Elevated work	c platforms are being used without inspection	n and authorization?	,	Yes 🗌	No 🗆
4	Work platforn	ns are provided without "TOE BOARDS" rollir	ng objects/ Tools can	fall down?	Yes 🗌	No 🗆
5	SWL of the elevated work platforms, height of platforms, and areas is not mentioned?  Yes No			No 🗆		
3.4.	Personal Protective Equipment					

Logo	Site Safety Observation Form	Doc Ref #: XYZ/IMS/QHSE/F/00 Issue Date: DD-MM-YYYY
	QHSE Forms	Rev #: 00
	Organization Name	Page <b>2</b> of <b>2</b>

1	Worker is seen working without PPEs/ not issued to the workers or not used by him?	Yes 🗌	No 🗆		
2	PPEs usage signs are not placed where risk can't be controlled thoroughly?	Yes 🗌	No 🗆		
3	Damaged PPEs were being used by the worker on site during work activity?	Yes 🗌	No 🗆		
4	Wrong/ not fit for job PPE is issued to the worker?	Yes 🗌	No $\square$		
5	PPEs are not mentioned in the permit while activity requires usage of PPEs?	Yes 🗌	No $\square$		
3.5.	3.5. Work Authorization/ Permit to Work				
1	Working without permit is observed onsite?	Yes 🗌	No 🗆		
2	Work activity is being carried out without permit/ with expired permit?	Yes 🗌	No $\square$		
3	Work permit is completed by incompetent person or insufficiently prepared?	Yes 🗌	No 🗌		
4	Work permit is not available onsite/ missing/ not prepared at all?	Yes 🗌	No $\square$		
3.6.	3.6. Work Method/ Work Procedure/ Documentation				
1	Work method/ work procedure/ method statement is not available?	Yes 🗌	No 🗆		
2	Workers are not aware of method statement/ work procedure?	Yes 🗌	No 🗆		
3	Documentation for work activities is not available, e.g., risk assessment, inspection form	Yes 🗌	No $\square$		
			140 🗀		
3.7.	Equipment				
3.7. 1	Equipment  All the work equipment and tools are without color coding?	Yes 🗌	No 🗆		
1	All the work equipment and tools are without color coding?	Yes 🗌	No 🗆		
1 2	All the work equipment and tools are without color coding?  Workers are seen using equipment without inspection confirmation/ sticker/ marking?	Yes T	No O		

Prepared By	Approved By