C/M or P/M Reviewed:			CONSTRU	ICTION JOB HAZARDS ANALYSIS	N N N		
Building & Room(s): Contrac			Contractor/S	Subcontractor Name:	Rev: 2015 1/2013		
Project:				Date:			
Scop	e of Work: Please	list the scope	of work in this area.	(list areas and equipment to be demoed) (and remove these	e directions).		
Tasks being Performed Potential Safe		fety Risks/Hazards	Safety Controls / Mitiga	ions			
This is a TEMPLATE Please identify your scope of work along with your means & methods to complete such work.		Risk of bodily injuries.		 Proper PPE shall be worn by adjacent personnel, as required by their proximity to the work task. Be aware of your surroundings at all times. Maintain proper body positioning so that the tools used are below shoulder height. Use constant, moderate pressure at point of operation. 			
				Limit excessive pressure and stress when using tools.			
		Risk of release or discharge of hazardous energies.		Follow LOTO permit			
		Risk of hitting a utilities		Penetration permit maybe required Ensure all areas to be penetrated have been scanned prior to the start of work. Follow Penetration Permit			
		Risk of exposure to contaminates or Environmental hazards		Ensure all areas have been abated and or swiped for contaminates.			
House Keeping	g & Clean-up	Risk of injuries & Falls	s due to Slips, Trips	Housekeeping shall be maintained but not limited to hourly/daily, as site conditions change or as needed.			

Employee Signatures:	Date:	Employee Signatures:	Date:	Employee Signatures:	Date:

A signed copy of this JHA <u>must</u> be posted while the applicable subcontractor is working on-site and be available to any employee upon request.