Short Line Safety Institute

# JOB HAZARD ANALYSIS

| PROCEDURES/PERMITS REQUIRED | YES | NO | PROTECTIVE EQUIPMENT REQUIRED | TYPE | YES | NO |
|---|---|---|---|---|---|---|
| Hot Work | | | Fall Protection | | | |
| Confined Space Entry | | | Eye / Face | | | |
| Excavation | | | Respiratory | | | |
| Lock Out / Tag Out | | | Foot / Toe | | | |
| Critical Lift Plan | | | Hand | | | |
| Close Proximity | | | Hearing | | | |
| Traffic Control / Barricades | | | Vest / Reflective Clothing | | | |
| Spotter Required | | | Head Protection | | | |
| General Permit | | | Other | | | |
| Fall Protection Plan | | | | | | |
| Other | | | Other | | | |

| STEP / WORK ACTIVITY | POTENTIAL HAZARD(S) | CONTROL MEASURES |
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