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<b>Project Name:</b> AL AIN-COM-RESOURCES <b>Location:</b> yy <b>Client:</b> <b>Supervisor :</b> Arbind Prasad <b>Date:</b> 09-11-2024 <b>No.of manpower:</b> 5 <b>Time:</b> 11:10 <b>Job type:</b> t <b>Job Description:</b> t <b>Tools and Equipment used:</b> t <b>Job Start:</b> 11:05:00 <b>End Time:</b> 11:06:00 <b>Conducted By:</b> Arbind Prasad  <b>Ray No. :</b> RU/058 <b>Signature:</b> 	<b>Life Saving Rules: Tick on the boxes which you being discuss during</b> <div> Don't walk under a suspended load <input type="checkbox"/>  </div> <div> Don't smoke outside designed smoking areas <input type="checkbox"/>  </div> <div> Conduct gas test when required <input type="checkbox"/>  </div> <div> Work with a valid work permit when required <input type="checkbox"/>  </div> <div> No drugs or alcohol while working or driving <input type="checkbox"/>  </div> <div> While driving don't use the mobile phone and exceed speed limit <input type="checkbox"/>  </div> <div> Obtain permit for working in confined Space <input type="checkbox"/>  </div> <div> Verify isolation before work begins and use the specified life protection <input type="checkbox"/>  </div> <div> Wear your seat belt <input type="checkbox"/>  </div> <div> Obtain authorization before overriding <input type="checkbox"/>  </div> <div> Follow prescribed journey <input type="checkbox"/>  </div> <div> Protect yourself against a fall when working at height <input type="checkbox"/>  </div>	<b>Tick on the boxes which required your plan for the job</b> Does everyone have correct PPE? <input type="checkbox"/>  Do you have all required tools, are they correct & they are in good condition? <input type="checkbox"/>  Is every one aware of themselves and others activities happening on-site? <input type="checkbox"/>  Have you discussed Life Saving Rules? <input type="checkbox"/>  Have you agreed how to communicate with each other? <input type="checkbox"/>  no <input type="checkbox"/>  Does everyone know that if there is a shift change then another TBT is required? <input type="checkbox"/>  Does appropriate posters and sign boards kept at site <input type="checkbox"/>  Are using tools being inspected & calibration updated? <input type="checkbox"/>  Emergency switches properly function? <input type="checkbox"/>  Good housekeeping? <input type="checkbox"/>  Proper barricading? <input type="checkbox"/>  Check if isolation required and implement. <input type="checkbox"/>  Check job requirements & timings <input type="checkbox"/>  Team aware of the emergency response. <input type="checkbox"/>  Check if permit to work is required <input type="checkbox"/>  Job hazards identified &controls inplace. <input type="checkbox"/>  Does the sufficient number of supervisors present for the crews <input type="checkbox"/>
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**Use hazards warning signs as reminders and tick the signs being discussed during TBT**

TOOL BOX TALKS						Abu Dhabi/ Dubai		
								
Flammable	Lifting in progress	Moving Equipment/ vehicles	Falling objects	Slippery	Toxic	Electruction hazard	High pressure cylinders	Entaglemen t hazard
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
sda	asd	sad	ads

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
1	RU/058	Arbind Prasad	Ray Al Ain		