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Project Name: RU/021/22/PRJ Location: lk Client: AADC Supervisor : Gugan Kannan Date: 17-09-2024 No.of manpower: 6 Time: 11:32 Job type: h Job Description: h Tools and Equipment used: h Job Start: 11:30:00 End Time: 11:30:00 Conducted By: Hamza Raees	Life Saving Rules: Tick on the boxes which you being discuss during <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Don't walk under a suspended load <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Don't smoke outside designed smoking areas <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Conduct gas test when required <input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Work with a valid work permit when required <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">No drugs or alcohol while working or driving <input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">While driving don't use the mobile phone and exceed speed limit <input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Obtain permit for working in confined Space <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Verify isolation before work begins and use the specified life protection <input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Wear your seat belt <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Obtain authorization before overriding <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Follow prescribed journey <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">Protect yourself against a fall when working at height <input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 5px;"></td> </tr> </table>	Don't walk under a suspended load <input checked="" type="checkbox"/>		Don't smoke outside designed smoking areas <input checked="" type="checkbox"/>		Conduct gas test when required <input type="checkbox"/>		Work with a valid work permit when required <input checked="" type="checkbox"/>		No drugs or alcohol while working or driving <input type="checkbox"/>		While driving don't use the mobile phone and exceed speed limit <input type="checkbox"/>		Obtain permit for working in confined Space <input checked="" type="checkbox"/>		Verify isolation before work begins and use the specified life protection <input type="checkbox"/>		Wear your seat belt <input checked="" type="checkbox"/>		Obtain authorization before overriding <input checked="" type="checkbox"/>		Follow prescribed journey <input checked="" type="checkbox"/>		Protect yourself against a fall when working at height <input checked="" type="checkbox"/>		Tick on the boxes which required your plan for the job <div>Does everyone have correct PPE? <input checked="" type="checkbox"/></div> <div>Do you have all required tools, are they correct & they are in good condition? <input checked="" type="checkbox"/></div> <div>Is every one aware of themselves and others activities happening on-site? <input checked="" type="checkbox"/></div> <div>Have you discussed Life Saving Rules? <input type="checkbox"/></div> <div>Have you agreed how to communicate with each other? <input checked="" type="checkbox"/></div> <div>Does everyone know that if there is a shift change then another TBT is required? <input checked="" type="checkbox"/></div> <div>Does appropriate posters and sign boards kept at site <input checked="" type="checkbox"/></div> <div>Are using tools being inspected & calibration updated? <input type="checkbox"/></div> <div>Emergency switches properly function? <input type="checkbox"/></div> <div>Good housekeeping? <input checked="" type="checkbox"/></div> <div>Proper barricading? <input checked="" type="checkbox"/></div> <div>Check if isolation required and implement. <input checked="" type="checkbox"/></div> <div>Check job requirements & timings <input checked="" type="checkbox"/></div> <div>Team aware of the emergency response. <input type="checkbox"/></div> <div>Check if permit to work is required <input checked="" type="checkbox"/></div> <div>Job hazards identified &controls inplace. <input checked="" type="checkbox"/></div> <div>Does the sufficient number of supervisors present for the crews <input checked="" type="checkbox"/></div>
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Ray No. : RU/167 Signature: 																										

Use hazards warning signs as remainders and tick the signs being discussed during TBT

								
Flammable	Lifting in progress	Moving Equipment/vehicles	Falling objects	Slippery	Toxic	Electruction hazard	High pressure cylinders	Entaglemen t hazard
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>



TOOL BOX TALKS	Abu Dhabi/ Dubai
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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
gbb	bhb	hyh	gthh

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
1	RU/022	Sudheer Thirumalmel Kalarickal	Ray Abu Dhabi		