



TOOL BOX TALKS

Abu Dhabi/ Dubai

Project Name: @newtest

Location: dlh

Client:

Supervisor Date: 12-10-2023

No. of manpower: 6

Time: 17:07

Job type: j

Job Description: g

Tools and Equipment used:

g

Job Start: 17:06:00

End Time: 17:06:00

Conducted By: sijina-test

Ray No. : RU/012

Signature:

Life Saving Rules: Tick on the boxes which you being discuss during

Don't walk under a suspended load ☒Don't smoke outside ☐

designed smoking areas

Conduct gas test when required ☒Work with a valid work permit when required ☐No drugs or alcohol while working or driving ☒While driving don't use the mobile phone and exceed speed limit ☐Obtain permit for working in confined Space ☒Verify isolation before work begins and use the specified life protection ☐Wear your seat belt ☒Obtain authorization before overriding ☐Follow prescribed journey ☒Protect yourself against a fall when working at height ☐

Tick on the boxes which required your plan for the job

Does everyone have correct PPE? ☒Do you have all required tools, are they ☐correct & they are in good condition? ☐Is every one aware of themselves and ☐others activities happening on-site? ☐Have you discussed Life Saving Rules? ☒Have you agreed how to communicate with ☐each other? ☐Does everyone know that if there is a shift ☒change then another TBT is required? ☐Does appropriate posters and sign boards ☐kept at site ☐Are using tools being inspected & ☒calibration updated? ☐Emergency switches properly function? ☐Good housekeeping? ☐Proper barricading? ☐Check if isolation required and implement. ☒Check job requirements & timings ☐Team aware of the emergency response. ☐Check if permit to work is required ☒Job hazards identified & controls in place. ☒Does the sufficient number of supervisors ☐present for the crews ☐

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



Flammable



Lifting in progress



Moving Equipment/hazards



Falling objects



Slippery



Toxic



Electrification hazard



High pressure cylinders



Entanglement hazard



HAZARD CONTROL SHEET

Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET

S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

HAZARD CONTROL SHEET

Task	Hazards	Controls	Responsibilities
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
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Signature: 


Life Saving Rules: Tick on the boxes which you being discuss during


Don't walk under a suspended load	<input checked="" type="checkbox"/>	
Don't smoke outside designed smoking areas	<input type="checkbox"/>	
Conduct gas test when required	<input checked="" type="checkbox"/>	
Work with a valid work permit when required	<input type="checkbox"/>	
No drugs or alcohol while working or driving	<input checked="" 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 type="checkbox"/>	
Follow prescribed journey	<input checked="" type="checkbox"/>	
Protect yourself against a fall when working at height	<input type="checkbox"/>	


Tick on the boxes which required your plan for the job


Does everyone have correct PPE?	<input checked="" 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 checked="" type="checkbox"/>
Have you agreed how to communicate with each other?	<input type="checkbox"/>
Does everyone know that if there is a shift change then another TBT is required?	<input checked="" type="checkbox"/>
Does appropriate posters and sign boards kept at site	<input type="checkbox"/>
Are using tools being inspected & calibration updated?	<input checked="" 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 checked="" 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 checked="" type="checkbox"/>
Job hazards identified &controls inplace.	<input checked="" type="checkbox"/>
Does the sufficient number of supervisors present for the crews	<input type="checkbox"/>


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























Flammable

Lifting in progress

Moving Equipment/v ehicles

Falling objects

Slippery

Toxic

Electruction hazard

High pressure cylinders

Entaglement hazard

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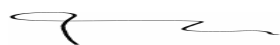
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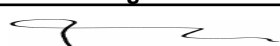
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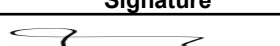
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Location: dlh

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Job type: j

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Tools and Equipment used: g

Job Start: 17:06:00













End Time: 17:06:00

Conducted By: sijina-test

Ray No. : RU/012

Signature: 










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Don't smoke outside designed smoking areas	<input type="checkbox"/>	
Conduct gas test when required	<input checked="" type="checkbox"/>	
Work with a valid work permit when required	<input type="checkbox"/>	
No drugs or alcohol while working or driving	<input checked="" 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 type="checkbox"/>	
Follow prescribed journey	<input checked="" type="checkbox"/>	
Protect yourself against a fall when working at height	<input type="checkbox"/>	


Tick on the boxes which required your plan for the job

Does everyone have correct PPE?	<input checked="" 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 checked="" type="checkbox"/>
Have you agreed how to communicate with each other?	<input type="checkbox"/>
Does everyone know that if there is a shift change then another TBT is required?	<input checked="" type="checkbox"/>
Does appropriate posters and sign boards kept at site	<input type="checkbox"/>
Are using tools being inspected & calibration updated?	<input checked="" 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 checked="" 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 checked="" type="checkbox"/>
Job hazards identified &controls inplace.	<input checked="" type="checkbox"/>
Does the sufficient number of supervisors present for the crews	<input type="checkbox"/>

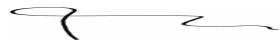
Use hazards warning signs as remainders and tick the signs being discussed during TBT

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

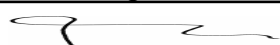
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
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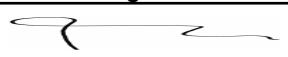
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Don't smoke outside designed smoking areas	<input type="checkbox"/>		Do you have all required tools, are they correct & they are in good condition?	<input type="checkbox"/>
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Work with a valid work permit when required	<input type="checkbox"/>		Have you discussed Life Saving Rules?	<input checked="" type="checkbox"/>
No drugs or alcohol while working or driving	<input checked="" type="checkbox"/>		Have you agreed how to communicate with each other?	<input type="checkbox"/>
While driving don't use the mobile phone and exceed speed limit	<input type="checkbox"/>		Does everyone know that if there is a shift change then another TBT is required?	<input checked="" type="checkbox"/>
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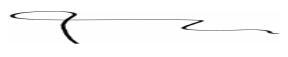
								
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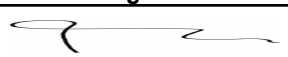
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Tools and Equipment used: g

Job Start: 17:06:00













End Time: 17:06:00

Conducted By: sijina-test

Ray No. : RU/012

Signature: 










Life Saving Rules: Tick on the boxes which you being discuss during

Don't walk under a suspended load	<input checked="" type="checkbox"/>	
Don't smoke outside designed smoking areas	<input type="checkbox"/>	
Conduct gas test when required	<input checked="" type="checkbox"/>	
Work with a valid work permit when required	<input type="checkbox"/>	
No drugs or alcohol while working or driving	<input checked="" 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 type="checkbox"/>	
Follow prescribed journey	<input checked="" type="checkbox"/>	
Protect yourself against a fall when working at height	<input type="checkbox"/>	

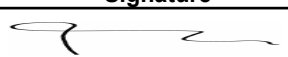
Tick on the boxes which required your plan for the job

Does everyone have correct PPE?	<input checked="" 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 checked="" type="checkbox"/>
Have you agreed how to communicate with each other?	<input type="checkbox"/>
Does everyone know that if there is a shift change then another TBT is required?	<input checked="" type="checkbox"/>
Does appropriate posters and sign boards kept at site	<input type="checkbox"/>
Are using tools being inspected & calibration updated?	<input checked="" 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 checked="" 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 checked="" type="checkbox"/>
Job hazards identified &controls inplace.	<input checked="" type="checkbox"/>
Does the sufficient number of supervisors present for the crews	<input type="checkbox"/>

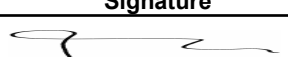
Use hazards warning signs as remainders and tick the signs being discussed during TBT

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


HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

Project Name: @newtest

Location: dlh

Client:

Supervisor Date: 12-10-2023

No.of manpower: 6

Time: 17:07

Job type: j

Job Description: g

Tools and Equipment used: g













Job Start: 17:06:00

End Time: 17:06:00










Conducted By: sijina-test

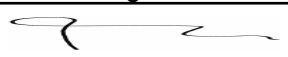
Ray No. : RU/012

Signature: 


Life Saving Rules: Tick on the boxes which you being discuss during		Tick on the boxes which required your plan for the job		
Don't walk under a suspended load	<input checked="" type="checkbox"/>		Does everyone have correct PPE?	<input checked="" type="checkbox"/>
Don't smoke outside designed smoking areas	<input type="checkbox"/>		Do you have all required tools, are they correct & they are in good condition?	<input type="checkbox"/>
Conduct gas test when required	<input checked="" type="checkbox"/>		Is every one aware of themselves and others activities happening on-site?	<input type="checkbox"/>
Work with a valid work permit when required	<input type="checkbox"/>		Have you discussed Life Saving Rules?	<input checked="" type="checkbox"/>
No drugs or alcohol while working or driving	<input checked="" type="checkbox"/>		Have you agreed how to communicate with each other?	<input type="checkbox"/>
While driving don't use the mobile phone and exceed speed limit	<input type="checkbox"/>		Does everyone know that if there is a shift change then another TBT is required?	<input checked="" type="checkbox"/>
Obtain permit for working in confined Space	<input checked="" type="checkbox"/>		Does appropriate posters and sign boards kept at site	<input type="checkbox"/>
Verify isolation before work begins and use the specified life protection	<input type="checkbox"/>		Are using tools being inspected & calibration updated?	<input checked="" type="checkbox"/>
Wear your seat belt	<input checked="" type="checkbox"/>		Emergency switches properly function?	<input type="checkbox"/>
Obtain authorization before overriding	<input type="checkbox"/>		Good housekeeping?	<input type="checkbox"/>
Follow prescribed journey	<input checked="" type="checkbox"/>		Proper barricading?	<input type="checkbox"/>
Protect yourself against a fall when working at height	<input type="checkbox"/>		Check if isolation required and implement.	<input checked="" 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 checked="" type="checkbox"/>
			Job hazards identified &controls inplace.	<input checked="" type="checkbox"/>
			Does the sufficient number of supervisors present for the crews	<input type="checkbox"/>

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

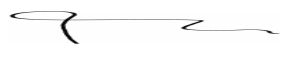
								
Flammable	Lifting in progress	Moving Equipment/v ehicles	Falling objects	Slippery	Toxic	Electruction hazard	High pressure cylinders	Entanglement hazard
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>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

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

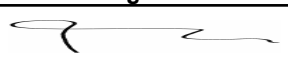
HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
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	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

Project Name: @newtest Location: dlh Client: Supervisor Date: 12-10-2023 No.of manpower: 6 Time: 17:07 Job type: j Job Description: g Tools and Equipment used: g Job Start: 17:06:00 End Time: 17:06:00 Conducted By: sijina-test Ray No. : RU/012 Signature:	Life Saving Rules: Tick on the boxes which you being discuss during <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>Don't walk under a suspended load</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>Don't smoke outside designed smoking areas</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>Conduct gas test when required</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>Work with a valid work permit when required</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>No drugs or alcohol while working or driving</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>While driving don't use the mobile phone and exceed speed limit</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>Obtain permit for working in confined Space</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>Verify isolation before work begins and use the specified life protection</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>Wear your seat belt</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>Obtain authorization before overriding</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>Follow prescribed journey</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>Protect yourself against a fall when working at height</td><td><input type="checkbox"/></td><td></td></tr> </table>	Don't walk under a suspended load	<input checked="" type="checkbox"/>		Don't smoke outside designed smoking areas	<input type="checkbox"/>		Conduct gas test when required	<input checked="" type="checkbox"/>		Work with a valid work permit when required	<input type="checkbox"/>		No drugs or alcohol while working or driving	<input checked="" 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 type="checkbox"/>		Follow prescribed journey	<input checked="" type="checkbox"/>		Protect yourself against a fall when working at height	<input type="checkbox"/>		Tick on the boxes which required your plan for the job <table border="1" style="width:100%; 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Use hazards warning signs as remainders and tick the signs being discussed during TBT

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

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

Project Name: @newtest
Location: dlh
Client:
Supervisor Date: 12-10-2023
No.of manpower: 6
Time: 17:07
Job type: j
Job Description: g
Tools and Equipment used: g
Job Start: 17:06:00
End Time: 17:06:00
Conducted By: sijina-test
Ray No. : RU/012
Signature:

Life Saving Rules: Tick on the boxes which you being discuss during

Don't walk under a suspended load

☒


Don't smoke outside designed smoking areas

☐


Conduct gas test when required

☒


Work with a valid work permit when required

☐


No drugs or alcohol while working or driving

☒


While driving don't use the mobile phone and exceed speed limit

☐


Obtain permit for working in confined Space

☒


Verify isolation before work begins and use the specified life protection

☐


Wear your seat belt

☒


Obtain authorization before overriding

☐


Follow prescribed journey

☒


Protect yourself against a fall when working at height

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Tick on the boxes which required your plan for the job

Does everyone have correct PPE?

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Is every one aware of themselves and others activities happening on-site?

☐

Have you discussed Life Saving Rules?

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Have you agreed how to communicate with each other?

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Does everyone know that if there is a shift change then another TBT is required?

☒

Does appropriate posters and sign boards kept at site

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Are using tools being inspected & calibration updated?

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Emergency switches properly function?

☐

Good housekeeping?

☐

Proper barricading?

☐

Check if isolation required and implement.

☒

Check job requirements & timings

☐

Team aware of the emergency response.

☐

Check if permit to work is required

☒

Job hazards identified &controls inplace.

☒

Does the sufficient number of supervisors present for the crews

☐

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











Flammable

Lifting in progress

Moving Equipment/v ehicles

Falling objects

Slippery

Toxic

Electruction hazard

High pressure cylinders

Entaglement hazard

☒

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HAZARD CONTROL SHEET				
Task	Hazards	Controls	Responsibilities	
hhh	hhh	hhh	ggg	

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
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HAZARD CONTROL SHEET				
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hhh	hhh	hhh	ggg	

ATTENDANCE SHEET					
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HAZARD CONTROL SHEET				
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hhh	hhh	hhh	ggg	

ATTENDANCE SHEET					
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HAZARD CONTROL SHEET				
Task	Hazards	Controls	Responsibilities	
hhh	hhh	hhh	ggg	

Ref No: FR-646

Version. No 01

Issued Date : 08.09.2016

Page 9 of 11

Project Name: @newtest

Location: dlh

Client:

Supervisor Date: 12-10-2023

No.of manpower: 6

Time: 17:07

Job type: j

Job Description: g

Tools and Equipment used: g













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Conducted By: sijina-test

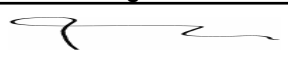
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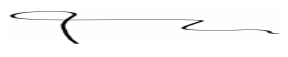
								
Flammable	Lifting in progress	Moving Equipment/v ehicles	Falling objects	Slippery	Toxic	Electruction hazard	High pressure cylinders	Entanglement hazard
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ATTENDANCE SHEET					
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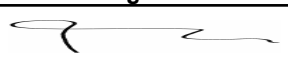
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Task	Hazards	Controls	Responsibilities
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ATTENDANCE SHEET					
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HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
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ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

Project Name: @newtest

Location: dlh

Client:

Supervisor Date: 12-10-2023

No.of manpower: 6

Time: 17:07

Job type: j

Job Description: g

Tools and Equipment used: g













Job Start: 17:06:00

End Time: 17:06:00










Conducted By: sijina-test

Ray No. : RU/012

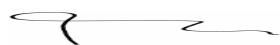
Signature: 

Life Saving Rules: Tick on the boxes which you being discuss during		Tick on the boxes which required your plan for the job		
Don't walk under a suspended load	<input checked="" type="checkbox"/>		Does everyone have correct PPE?	<input checked="" type="checkbox"/>
Don't smoke outside designed smoking areas	<input type="checkbox"/>		Do you have all required tools, are they correct & they are in good condition?	<input type="checkbox"/>
Conduct gas test when required	<input checked="" type="checkbox"/>		Is every one aware of themselves and others activities happening on-site?	<input type="checkbox"/>
Work with a valid work permit when required	<input type="checkbox"/>		Have you discussed Life Saving Rules?	<input checked="" type="checkbox"/>
No drugs or alcohol while working or driving	<input checked="" type="checkbox"/>		Have you agreed how to communicate with each other?	<input type="checkbox"/>
While driving don't use the mobile phone and exceed speed limit	<input type="checkbox"/>		Does everyone know that if there is a shift change then another TBT is required?	<input checked="" type="checkbox"/>
Obtain permit for working in confined Space	<input checked="" type="checkbox"/>		Does appropriate posters and sign boards kept at site	<input type="checkbox"/>
Verify isolation before work begins and use the specified life protection	<input type="checkbox"/>		Are using tools being inspected & calibration updated?	<input checked="" type="checkbox"/>
Wear your seat belt	<input checked="" type="checkbox"/>		Emergency switches properly function?	<input type="checkbox"/>
Obtain authorization before overriding	<input type="checkbox"/>		Good housekeeping?	<input type="checkbox"/>
Follow prescribed journey	<input checked="" type="checkbox"/>		Proper barricading?	<input type="checkbox"/>
Protect yourself against a fall when working at height	<input type="checkbox"/>		Check if isolation required and implement.	<input checked="" 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 checked="" type="checkbox"/>
			Job hazards identified &controls inplace.	<input checked="" type="checkbox"/>
			Does the sufficient number of supervisors present for the crews	<input type="checkbox"/>

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

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

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
hhh	hhh	hhh	ggg

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	

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Task	Hazards	Controls	Responsibilities
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	8	Sudheer Thirumalmel Kalarickal	Company2	Accounts Manager	