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Project Name: SangNew Location: dlh Client: Supervisor Date: 17-10-2023 No.of manpower: 6 Time: 10:27 Job type: g Job Description: g Tools and Equipment used: h Job Start: 10:26:00 End Time: 10:26:00 Conducted By: sijina Ray No. : RU/603 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 type="checkbox"/></td><td></td></tr> <tr><td>Work with a valid work permit when required</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>No drugs or alcohol while working or driving</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>While driving don't use the mobile phone and exceed speed limit</td><td><input checked="" 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 type="checkbox"/></td><td></td></tr> <tr><td>Obtain authorization before overriding</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td>Follow prescribed journey</td><td><input type="checkbox"/></td><td></td></tr> <tr><td>Protect yourself against a fall when working at height</td><td><input checked="" 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 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 checked="" 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 type="checkbox"/>		Obtain authorization before overriding	<input checked="" type="checkbox"/>		Follow prescribed journey	<input 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 <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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
123456789012345678901234567890	123456789012345678901234567890	123456789012345678901234567890	123456789012345678901234567890
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123456789012345678901234567890	123456789012345678901234567890	123456789012345678901234567890	123456789012345678901234567890
123456789012345678901234567890	123456789012345678901234567890	123456789012345678901234567890	123456789012345678901234567890
12345678901234	12345678901234	12345678901234	12345678901234

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
1	2,541	Nimisha	Company2	Lineman	
2	2,602	sijina	Company1		