















































TOOL BOX TALKS			Abu Dhabi/ Dubai																																								
<b>Project Name:</b> @newtest <b>Location:</b> Dlh <b>Client:</b> <b>Supervisor :</b> sijina-test <b>Date:</b> 04-10-2023 <b>No.of manpower:</b> 55 <b>Time:</b> 10:33 <b>Job type:</b> g <b>Job Description:</b> hg <b>Tools and Equipment used:</b> gg <b>Job Start:</b> 10:31:00 <b>End Time:</b> 10:31:00 <b>Conducted By:</b> sijina-test  <b>Ray No. :</b> RU/603 <b>Signature:</b> 	<b>Life Saving Rules: Tick on the boxes which you being discuss during</b> <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 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 checked="" 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 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 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 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 checked="" 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 type="checkbox"/>		<b>Tick on the boxes which required your plan for the job</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Does everyone have correct PPE? <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Do you have all required tools, are they correct &amp; they are in good condition? <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Is every one aware of themselves and others activities happening on-site? <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Have you discussed Life Saving Rules? <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Have you agreed how to communicate with each other? <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Does everyone know that if there is a shift change then another TBT is required? <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Does appropriate posters and sign boards kept at site <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Are using tools being inspected &amp; calibration updated? <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Emergency switches properly function? <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Good housekeeping? <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Proper barricading? <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Check if isolation required and implement. <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Check job requirements &amp; timings <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Team aware of the emergency response. <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Check if permit to work is required <input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Job hazards identified &amp; controls inplace. <input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Does the sufficient number of supervisors present for the crews <input type="checkbox"/></td> </tr> </table>	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 checked="" type="checkbox"/>	Have you discussed Life Saving Rules? <input 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 checked="" type="checkbox"/>	Are using tools being inspected & calibration updated? <input type="checkbox"/>	Emergency switches properly function? <input checked="" type="checkbox"/>	Good housekeeping? <input type="checkbox"/>	Proper barricading? <input checked="" 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 checked="" type="checkbox"/>	Check if permit to work is required <input type="checkbox"/>	Job hazards identified & controls inplace. <input checked="" type="checkbox"/>	Does the sufficient number of supervisors present for the crews <input type="checkbox"/>
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 checked="" 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 type="checkbox"/>																																											
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 checked="" type="checkbox"/>																																											
Have you discussed Life Saving Rules? <input 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 checked="" type="checkbox"/>																																											
Are using tools being inspected & calibration updated? <input type="checkbox"/>																																											
Emergency switches properly function? <input checked="" type="checkbox"/>																																											
Good housekeeping? <input type="checkbox"/>																																											
Proper barricading? <input checked="" 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 checked="" type="checkbox"/>																																											
Check if permit to work is required <input 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/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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



TOOL BOX TALKS	Abu Dhabi/ Dubai
----------------	------------------

HAZARD CONTROL SHEET			
Task	Hazards	Controls	Responsibilities
t h	t	y	y

ATTENDANCE SHEET					
S.No	Emp.No.	Name	Company	Designation	Signature
1	RU/603	sijina-test	Company1		