



TOOL BOX TALKS

Abu Dhabi/ Dubai

Project Name: SangProject2(name) Location: Dlh Client: No Client Supervisor Date: 31-08-2023 No.of manpower: 6 Time: 15:29 Job type: f Job Description: h Tools and Equipment used: h Job Start: 15:26:00 End Time: 15:26:00 Conducted By: sijina-test Ray No. : RU/603 Signature:	Life Saving Rules: Tick on the boxes which you being discuss during TBT		Tick on the boxes which required your plan for the
	Don't walk under a suspended load <input checked="" type="checkbox"/>		Does everyone have correct PPI <input type="checkbox"/>
	Don't smoke outside designed smoking areas <input checked="" type="checkbox"/>		Do you have all required tools, a <input checked="" type="checkbox"/>
	Conduct gas test when required <input type="checkbox"/>		Is every one aware of themself <input type="checkbox"/>
	Work with a valid work permit when required <input checked="" type="checkbox"/>		Have you discussed Life Saving <input checked="" type="checkbox"/>
	No drugs or alcohol while working or driving <input type="checkbox"/>		Have you agreed how to commu <input type="checkbox"/>
	While driving don't use the mobile phone and exceed speed limit <input checked="" type="checkbox"/>		Does everyone know that if there <input checked="" type="checkbox"/>
	Obtain permit for working in confined Space <input checked="" type="checkbox"/>		Does appropriate posters and si <input type="checkbox"/>
	Verify isolation before work begins and use the specified life protection <input type="checkbox"/>		Are using tools being inspected <input checked="" type="checkbox"/>
	Wear your seat belt <input checked="" type="checkbox"/>		Emergency switches properly fu <input checked="" type="checkbox"/>
Obtain authorization before overriding <input checked="" type="checkbox"/>		Good housekeeping? <input type="checkbox"/>	
Follow prescribed journey <input type="checkbox"/>		Proper barricading? <input type="checkbox"/>	
Protect yourself against a fall when working at height <input checked="" type="checkbox"/>		Check if isolation required and ir <input checked="" type="checkbox"/>	
		Check job requirements & timing <input type="checkbox"/>	
		Team aware of the emergency re <input type="checkbox"/>	
		Check if permit to work is require <input checked="" type="checkbox"/>	
		Job hazards identified &controls <input type="checkbox"/>	
		Does the sufficient number of su <input checked="" type="checkbox"/>	

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

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

HAZARD CONTROL SHEET

Task	Hazards	Controls	Responsibilities
jynn	jyh	ghb	htyh
vtb	bv	hhg	fthh

ATTENDANCE SHEET

S.No	Emp.No.	Name	Company	Designation	Signature
	2,544	Jishitha	Company2	Lineman	
	2,541	Nimisha	Company1	Lineman	
	2,603	sijina-test	Company1		