Prime Contractor's Hazard Identification Form

Prime Contractor Information

Prime Contractor (Firm Name): _____

Prime Contractor's Designate (i.e. Designated Person in Charge of Project):

_____ _____
(Please print first and last name) (Phone #)

Prime Contractor's Person Responsible for Coordinating Health and Safety Activities (i.e. Qualified Coordinator):

_____ _____
(Please print first and last name) (Phone #)

Description of work:		
City File #:	**Consultant:**	**Identified by:** **Date:**
Developer:	**Location:**	

This form identifies the known hazards on the worksite. If the prime or any subcontractor becomes aware of hazards which are not mentioned below the City must be informed **immediately**. If the prime contractor does not do so the City will not be held responsible for any incident arising from the unlisted hazard.

KNOWN HAZARDS

Please identify known hazards specific to the workplace where the Prime Contractor will be performing the work by placing an "x" in the related boxes. Other hazards not included in this list may exist, so please identify any other known hazards specific to this workplace by writing them in the "Comments" section provided below. Some hazards you may identify may be related to the work activities.

WORK ACTIVITIES

- ❑ Existing structures
- ❑ Excavation and/or Underground Utilities (i.e. the need to locate underground utilities before digging)
  Date Authorities Contacted: _____
- ❑ Working on or over water
- ❑ Demolition
- ❑ Traffic Control
- ❑ Public Access
- ❑ Vehicles, Safe Operation

HAZARDS

- ❑ Rotating/Moving Equipment or Machinery
- ❑ Overhead hazards /falling materials
- ❑ Confined Space
- ❑ Electrical Potential Difference
- ❑ Electrical energy (Lockout)
- ❑ Indoor Air Quality
- ❑ Domestic animal attack (i.e. Animal shelter)
- ❑ Falls from Height (Fall Protection)
- ❑ Release of Hazardous Materials/ Possible Chemical Exposures:
- ❑ Liquid Chlorine (Sodium Hypochlorite)
- ❑ Muriatic Acid (Hydrochloric Acid)
- ❑ Ammonia
- ❑ Asbestos
- ❑ Lead
- ❑ Silica (i.e. grinding, cutting, chipping, drilling or sanding concrete)
- ❑ Contaminated soil including natural methane
- ❑ PCBs
- ❑ Biological Exposures (bloodborne pathogens, hanavirus, molds, etc)
- ❑ Radiation (ionizing, nonionizing)
- ❑ Add Other Hazards Specific to Your Workplace (List)
  _____
  _____
  _____

Comments (Other Owner Known Hazards – Use Separate Page if Necessary):

Action required to eliminate or control workplace hazards:

Follow the OHS Regulation and *Workers' Compensation Act* requirements.

If the work involves excavation Work/Underground Digging:

It is essential to determine the location of all existing utilities by obtaining plans and proving the exact location before excavating. In general, contractors must comply with all Regulations. When excavating, refer to OHS Regulations 20.78 to 20.95. In particular, OHS Regulation 20.79 deals with Underground Utilities which states:

(1) Before excavating or drilling with powered tools and equipment, the location of all underground utility services in the area must be accurately determined, and any danger to workers from the services must be controlled.

(2) Excavation or drilling work in proximity to an underground service must be undertaken in conformity with the requirements of the owner of the service.

(3) Pointed tools must not be used to probe for underground gas and electrical services.

(4) Powered equipment used for excavating must be operated so as to avoid damage to underground utility services, or danger to workers.

Contact Us

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