

Step #1 Hazard / Risk Assessment Checklist

Company Name:

Address:

Assessment Location:

Date/Time:

Conducted By: Name

Position

Item #	Status	Identified Hazards	Specific Location of Hazard
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Hazard Priority No. (Status)

- #1 Imminent Danger
- #2 Serious
- #3 Minor
- #4 O.K.
- #5 Not Applicable (N/A)

Note: For corrective action, transfer information by Hazard Priority Number to Step #2 "Work Place Hazard Assessment Corrective Action" form