## PPE HAZARD ASSESSMENT FORM

I am	A worksite	Specify location:			
reviewing	A single employee's job description	Name of employee:			
(check the		Position Title:			
appropriate	A job description for a	Position Titles:			
box):	class of employees	Location:			
Your Name:		Department/Division:	Date:		
	EYE HAZARDS: Tasks that can cause eye injury include: working with chemicals or acids; UV lights; chipping, sanding, or grinding; welding; furnace operations; and metal and				
	wood working.  Check the appropriate box for each ha	zard: Description of hazard(s):	Required PPE		
	Chemical Exposure	Description of nazaralsy.	neganearr		
	High Heat/Cold	一			
	Dust/Flying Debris	<del>                                      </del>			
		<del>                                      </del>			
	Impact				
	UV/IR Radiation				
	Other:				
	HEAD/NECK/FACE HAZARDS: Tasks that can cause head/neck/face injury include: working below other workers who are using tools or materials that could fall, working on energized electrical equipment or utilities, and working in trenches or confined spaces.				
	Check the appropriate box for each ha		Required PPE		
	Chemical Exposure				
	Dust/Flying Debris				
	Impact				
	UV/IR Radiation				
	Electrical Shock				
	Other:				
	FOOT HAZARDS: Tasks that can cause foot injury include: exposure to chemicals or acids, welding or cutting, materials handling, renovation or construction, and electrical				
	work.				
	Check the appropriate box for each ho	zard: Description of hazard(s):	Required PPE		
	Chemical Exposure	<u> </u>			
	High Heat/Cold				
	Impact/Compression				
	Electrical				
	Puncture	<u> </u>			
	Slippery/Wet Surfaces				
	Other:				

## PPE HAZARD ASSESSMENT CERTIFICATE

	<b>HAND HAZARDS:</b> Hand injury can be caused by: work with chemicals or acids, exposure to cut or abrasion hazards (for example, during demolition, renovation, woodworking, or food service preparation), work with very hot or cold objects or materials, and exposure to sharps.					
THE PARTY OF THE P	Check the appropriate box for each hazard:	Description of hazard(s):	Required PPE			
	Chemical Exposure					
	High Heat/Cold					
	UV/IR Radiation					
	Electrical Shock					
	Puncture					
	Cuts/Abrasion					
	Other:					
	<b>BODY HAZARDS:</b> Injury of the body (torso, arms, or legs) can occur during: exposure to chemicals, acids, or other hazardous materials; abrasive blasting; welding, cutting, or brazing; chipping, sanding, or grinding; use of chainsaws or similar equipment; and work around electrical arcs.					
	Check the appropriate box for each hazard:	ding; use or chainsaws or similar equipment; and work around electric  Description of hazard(s):	al arcs.  Required PPE			
	Chemical Exposure	Description of naturalism	Regulier 17 E			
	High Heat/Cold	1				
	Impact/Compression					
	Electrical Arc					
	Cuts/Abrasion					
	Other:					
	<b>FALL HAZARDS:</b> Personnel may be exposed to fall hazards when performing work on a surface with an unprotected side or edge that is 4 feet or more above a lower level, or 10 feet or more on scaffolds. Fall protection may also be required when using vehicle man lifts, elevated platforms, tree trimming, performing work on poles, roofs, or fixed ladders.					
	Check the appropriate box for each hazard:	Description of hazard(s):	Required PPE			
	Fall hazard					
	NOISE HAZARDS: Personnel may be exposed to noise hazards when working in mechanical rooms; machining; grinding; sanding; cage washing; dish washing; working					
		oment, generators, chillers, motors, saws, jackhammers, or similar equ	· ·			
	Check the appropriate box for each hazard:  Noise hazard	Description of hazard(s):	Required PPE			
	Noise Nazara					
	<b>RESPIRATORY HAZARDS:</b> Personnel may be exposed to respiratory hazards that require the use of respirators: during emergency response, when using certain chemicals outside of a chemical fume hood; when working with hazardous powders; when entering fume hood plenums, when working with animals; when applying paints or chemicals in confined spaces; when welding, cutting, or brazing on certain metals; and when disturbing asbestos, lead, silica, or other particulate hazards.					
	Check the appropriate box for each hazard:	Description of hazard(s):	Required PPE			
	Chemical exposure					
	Particulate exposure					
	Other:					
I certify that the above hazard assessment was performed to the best of my knowledge and ability, based on the hazards present on this date.						
	( signature)(date)					