

Off-site Personnel/Visitor/External Worker Orientation

Property Owner:	
Company employees will be coming from (Workers):	
WorkSafeBC Account Number:	
Work Start Date:	
Anticipated Completion Date:	
Property Owner Supervisor:	
Company employees will be coming from (Supervisor):	
Property Owner On-site First Aid Personnel:	
Check Once Reviewed	✓
Workers will contact Owner prior to entering Owner's property	
Owner has reviewed on site safety expectations and oriented Workers	
Owner has reviewed site emergency procedures with Workers	
Workers will notify owner of any and all activity that will or may generate a hazard	
Owner, or designate will notify Workers of any and all known or potential site hazards	
Owner has reviewed first aid location	
Owner has reviewed who the first aid attendants are and how to contact them	
Workers have been notified of the muster point location(s)	
Workers have been shown and will follow agreed upon path to access their equipment	
Work Site Information	
First aid location:	
First aid attendants:	
First aid attendant contact information:	

Work Site Hazards

Blank area for recording Work Site Hazards.

Reason for Accessing Property and Path to Access Equipment

Blank area for recording Reason for Accessing Property and Path to Access Equipment.

Owner Representative:	Off site personnel/visitor/external worker Representative:
Signature:	Signature:
Date:	Date: