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| **Inspection: Construction Site** |
| **Inspected by:** | **Weather:** | **Date:** |
| **Inspected Item** | **Check if good** | **Corrective Action** | **Person responsible** | **Priority (A/B/C)** | **Action Date** |
|  | **General** |  |  |  |  |  |
|  | Prime contractor identified |  |  |  |  |  |
|  | Subcontractors identified |  |  |  |  |  |
|  | Subcontractors orientated  |  |  |  |  |  |
|  | Hazards identified |  |  |  |  |  |
|  | Hazards communicated to all workers |  |  |  |  |  |
|  | All workers wearing appropriate PPE |  |  |  |  |  |
|  | Workers using appropriate SWPs |  |  |  |  |  |
|  | First aid attendant available |  |  |  |  |  |
|  | First aid supplies available |  |  |  |  |  |
|  | Can workers identify hazards in their work area? |  |  |  |  |  |
|  | Job Observations |  |  |  |  |  |
|  | **Site specific** |  |  |  |  |  |
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| **Notes:** |

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