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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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