**Site Hazard Assessment**

Aerial Lift Site/Operation Hazard Assessment for Department

Location(s):

Type of Work to be conducted:

**Instructions:** An Operator must conduct a Site Hazard Assessment for Industrial Lift Equipment owned/operated by each department to identify all hazards in the area of intended work, and to select appropriate equipment for the work-task. Unlike other Industrial Equipment, each time an Aerial Lift or Elevating Work Platform unit is used, the site must be reassessed and documented on this form.

|  |  |  |  |
| --- | --- | --- | --- |
| **Site Evaluation** | **YES** | **NO** | **N/A** |
| Is the work surface structurally strong enough to handle the lift, and free of drop-offs? |  |  |  |
| Are surface conditions where the lift is used free of obstructions and on level surface? |  |  |  |
| Are there proper barricades to control pedestrian and vehicle traffic in work zone? |  |  |  |
| Are there overhead obstructions or restricted places where the lift will be operated? |  |  |  |
| Will the basket handle the loads to be carried without exceeding the rated capacity? |  |  |  |
| Are there ramps and other sloped surfaces that could affect the vehicle's stability? |  |  |  |
| Will the lift be used for electrical work or near high voltage lines? |  |  |  |
| Are there Hazardous locations where the vehicle will be operated? |  |  |  |
| Is there an enclosed environment(s) or other areas where insufficient ventilation or poor vehicle maintenance could cause a build-up of carbon monoxide or diesel exhaust buildup for combustion motors, or hydrogen gas buildup at electric vehicle recharging stations? |  |  |  |
| Is wind or other weather a concern? Are there sustained winds or gusts stronger than the manufacturer’s rated design allowance? |  |  |  |
| List below other potentially hazardous site-conditions that could affect safe operation: |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Process/Use of Lift Truck** | **YES** | **NO** | **N/A** |
| Has the proper Lift been chosen for the type of work being conducted? |  |  |  |
| Does the Lift have the proper lift height and capacity for the job? |  |  |  |
| Are proper PPE (hardhats, etc.) and full body harnesses w/SRL’s available and used? |  |  |  |
| Is the basket free of trip hazards and proper housekeeping maintained? |  |  |  |
| Are there designated parking areas for Lift(s)? (Clear of exits, fire extinguishers, hydrants, pedestrian-aisles, doorways, footpaths, or electrical panels.) |  |  |  |
| Is the fueling and/or charging area well ventilated? |  |  |  |
| Is there proper lighting in the areas the Lift is being used? |  |  |  |
| Are Propane bottles being kept in a secure area, and are they tagged “Full” or “Empty”? |  |  |  |
| List below other potentially hazardous process-conditions that could affect safe operation: |  |  |  |
|  |  |  |  |

Operator/Evaluator: Date evaluated: / / \_\_