

Contractor Safety Orientation Checklist

Contractor Information

| | | | |
|-----------------|----------------------|------------------|----------------------|
| Company Name | <input type="text"/> | Supervisor Name | <input type="text"/> |
| Contractor Name | <input type="text"/> | Date | <input type="text"/> |
| Contact Number | <input type="text"/> | Project/Location | <input type="text"/> |

Safety Orientation Topics

| Checklist Item | Completed | Comments |
|--|--------------------------|----------------------|
| Site-specific safety rules reviewed | <input type="checkbox"/> | <input type="text"/> |
| Personal Protective Equipment (PPE) requirements | <input type="checkbox"/> | <input type="text"/> |
| Emergency procedures & contacts | <input type="checkbox"/> | <input type="text"/> |
| Hazard Communication / SDS location | <input type="checkbox"/> | <input type="text"/> |
| Reporting incidents and near misses | <input type="checkbox"/> | <input type="text"/> |
| Access/egress & restricted areas explained | <input type="checkbox"/> | <input type="text"/> |
| Specific hazards reviewed (e.g., confined space, work at height, LOTO) | <input type="checkbox"/> | <input type="text"/> |
| Security and visitor policy | <input type="checkbox"/> | <input type="text"/> |
| Waste disposal and environmental practices | <input type="checkbox"/> | <input type="text"/> |

Additional Notes

Signatures

| | | | |
|-----------------------------|-------------|-------------|-------------|
| Contractor Signature | <div></div> | Date | <div></div> |
| Supervisor Signature | <div></div> | Date | <div></div> |