

# Hazard Identification Checklist

Project Name:  
Project Location:  
Date:  
Inspected By:  
Job/Task:

## Checklist

No.	Hazard Category	Description of Hazard	Yes	No	Corrective Action Required
1	Physical Hazards				
2	Chemical Hazards				
3	Biological Hazards				
4	Ergonomic Hazards				
5	Electrical Hazards				
6	Fire & Explosion Hazards				
7	Environmental Hazards				
8	Others				

## Observations / Additional Notes

Inspected By

Date