



# Pre-Project Safety Assessment Form

## Pre-Project Hazard Assessment

**Project:** \_\_\_\_\_

**Project Manager (PM):** \_\_\_\_\_

**Building:** \_\_\_\_\_

**General Contractor (GC):** \_\_\_\_\_

Contractor responsible to communicate all hazard information to all workers at all sub-contract tiers.

No project work shall start without each of the permit items in hand.

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### Permitting

- |  |   |
|--|---|
| <input type="checkbox"/> Building permit ( <i>attach to notes</i> )                              | <input type="checkbox"/> DEP demolition permit (AQ06) ( <i>attach to notes</i> )                                  |
| <input type="checkbox"/> Owner hazardous materials (hazmat) survey<br>( <i>attach to notes</i> ) | <input type="checkbox"/> Cambridge/Boston Fire Department (C/BFD)<br>demolition permit ( <i>attach to notes</i> ) |

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### Fall Protection

- |                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> Ladders     | <input type="checkbox"/> Roof Work                             |
| <input type="checkbox"/> Scaffolding | <input type="checkbox"/> Other ( <i>add details to notes</i> ) |

### Notes:



## Hot Work

- Permits - C/BFD Hot Work letter       Fire Watch (C/BFD/Contractor) *(as required by C/BFD, contractor minimum)*

**Notes:**

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## Hazardous Materials

Hazardous Materials Identified?     Yes     No

Check all that apply:

- Asbestos                                       Presumed-PCBs                                       Soil
- Lead     Universal Waste
- Laboratory space clean (chemical/radiation)
- Report any new findings to Project Manager and EH&S

**Notes:**

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## Cranes

- Fill out/receive inspection reports, etc.
- Other: Personal Lifts
- Police Detail (C/BPD/HUPD)
- C/BPD by contractor, HUPD by E&C

**Notes:**

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## Housekeeping

- Dust Control HEPA Filters
- Mopping
- Lab Sink Protection
- Fans
- Noise Control Odor Control
- Trash Removal/Pest Mitigation

**Notes:**

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## Electrical Safety

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Lockout Tagout | <input type="checkbox"/> Temp Lighting | <input type="checkbox"/> No Live Work |
| <input type="checkbox"/> GFCI           | <input type="checkbox"/> Cord Caps     |                                       |

**Notes:**

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## Other

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Fire Alarm Shutdowns                            | <input type="checkbox"/> Proper Penetration Sealing                   | <input type="checkbox"/> Structural Modification ( <i>add details to notes/PE review</i> ) |
| <input type="checkbox"/> Other Shutdowns                                 | <input type="checkbox"/> Sprinkler Shutdowns                          | <input type="checkbox"/> Injury/Incident Notification                                      |
| <input type="checkbox"/> Confined Spaces ( <i>add details to notes</i> ) | <input type="checkbox"/> Personal Protective Equipment (PPE) required | <input type="checkbox"/> Other ( <i>add details to notes</i> )                             |
| <input type="checkbox"/> Excavation Safety                               |   |  |

**Notes:**



## Pre-Project Review Meeting Attendees and Distribution

**Meeting Date:** \_\_\_\_\_

Name	Signature	Date
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		

- Please circle attendee number to identify Competent Person.
- Hazard Note should include reference to hazard specific Competent Person.
- Contractor to manage ongoing safety communication as project conditions develop or change.