JOB HAZARD ASSESSMENT (JHA) ACTIVITY:				STATION: DATE PREPARED:
				PREPARED BY:
(CERTIFICATION OF HAZARD ASSESSMENT - 29 CF			32d)	CERTIFIED BY:
PERSONAL PROTECTIVE EQUIPMENT REQUIRE Electrical Eyes/Face Foot Hand Head Leg Body/Other	:D:	QUALIFICATIONS, EXPER	IENCE	, OR TRAINING REQUIRED:
BASIC JOB STEPS HAZARI		DS	SAFE JOB PROCEDURE	
Break work down to basic elements (such as remove, lift, carry, stop, start, apply, return, squeeze, weld, saw, walk, hold, grind, place, "Can the person fall; ov		determine this, ask yourself, xert; be exposed to burns, gainst; be struck by; in contact etween?"		e how each element of work should be performed to prevent the dent or avoid the hazard. What should the person do or not do? Be ific. What precautions should be taken? Ask yourself, "What can I be eliminate, modify, guard, identify, or protect against the potential rd or accident, including such things as how the worker stands, s, uses, carries, dresses, etc.?"

## JOB HAZARD ASSESSMENT (Continuation Sheet)

ACTIVITY: \_\_\_\_\_

DATE PREPARED: \_\_\_\_\_

BASIC JOB STEPS	HAZARDS	SAFE JOB PROCEDURE
	I	I