

# Personal Protective Equipment Hazard Assessment

Check (✓) what is required:

<u>EQUIPMENT</u>	<u>LOADER</u>	<u>SKIDDER/ BUNCHER</u>	<u>SAWHAND</u>	<u>TRUCK DRIVER</u>
Hard Hat	_____	_____	_____	_____
Face Screen	_____	_____	_____	_____
Eye Protection	_____	_____	_____	_____
Hearing Protection	_____	_____	_____	_____
Safety Shoes	_____	_____	_____	_____
Saw Chaps	_____	_____	_____	_____
Gloves	_____	_____	_____	_____
Seatbelt	_____	_____	_____	_____
Other:	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I understand the above company requirements for proper use of personal protective equipment.

**EMPLOYEE SIGNATURE:**

**DATE:**

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