



## GENERATION CONTRACTOR'S JOB SAFETY ANALYSIS (JSA)

CONTRACTOR: \_\_\_\_\_ SUPERVISOR/FOREMAN: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ PROJECT: \_\_\_\_\_ LOCATION: \_\_\_\_\_

JOB DESCRIPTION (DETAILED): \_\_\_\_\_

WEATHER CONDITIONS: \_\_\_\_\_ Have you visited your jobsite today to identify hazards?  Yes  No

Review the following information carefully and check all items that apply to your work activity and review with your work crew.

**Permits**

- Confined Space
- Hot Work
- Open Hole
- Excavation
- Lift Plan
- Hold/LOTO Required
- Hold/LOTO # \_\_\_\_\_

**Fall Protection**

- Safety Harness Protection
- Proper Anchorage Point
- Lifeline
- Man Basket
- Daily Inspections
- Other \_\_\_\_\_

**General**

- Flammables-Gases/Liquids
- Combustibles
- Chemical
- Explosive
- Radiation/Nuclear Source
- Struck By
- Pinch Points
- Snagging
- Ergonomics
- Heat Stress
- Signs
- Hole Covers
- Slip/Trip Hazards
- Line of Fire
- Lifting Heavy or Awkward
- Visibility
- Other \_\_\_\_\_

**Scaffold and Ladder**

- Ladder Tied Off
- Inspected by Competent Person
- Tagged
- Special Provisions
- Access
- Proper Ladder/Inspected Daily
- Railings/Toe Boards
- Other \_\_\_\_\_

**Excavations**

- Properly Barricaded
- Shoring/Sloping/Benching required
- Proper Access
- Inspected by Competent Person
- Other \_\_\_\_\_

**Human Hazards**

- Confusion/Mix-Up Potentials - (labeling,look-alike,equip,etc)
- Distractions
- First Time Evolution
- Work after Long Breaks
- Lack of Experience (Apprentice)
- Nearby Work Activities

**PPE**

- Normal PPE
  - Hard Hat
  - Safety Glasses
  - Gloves
- Fire Retardant Clothing
- Gloves \_\_\_\_\_ Type
- Add. Foot Prot: \_\_\_\_\_
- Face Shield: \_\_\_\_\_
- Respirator (No facial hair in seal area)
- Hearing Protection
- Fall Protection
- Seat Belts
- Burning Goggles
- Welding Shield
- Welding Sleeves
- Monogoggles
- Other \_\_\_\_\_

**Welding**

- Condition of Welding Leads
- Combustibles
- Welding Screens
- Grounding
- Fire Blanket
- Fire Extinguisher/inspected
- Proper Clothing
- Welding Hood
- Welding Gloves/Sleeves/Jacket
- Sleeves/Jackets
- Fire Watch
- Other \_\_\_\_\_

**Crane/Lifting Equipment**

- Crawler Crane
- Hydraulic Crane
- Inspected
- Proper Maintenance
- Operator/Oiler in Place
- Communications
- Outriggers Extended
- JLG
- Manual Lifting Equip
- Proper Rigging Practice
- Personnel Platform Prelift Form
- Proper Barricades
- Other \_\_\_\_\_

**Tools**

- Daily inspection
- Proper tools for the job
- Other \_\_\_\_\_

**Industrial Hygiene**

- Asbestos-gaskets, insulation, expansion joints, floor tile, etc.
- Lead-paint/coatings/metal tested
- Arsenic
- Hexavalent Chromium
- Silica
- Other \_\_\_\_\_

**Electrical**

- GFCI Test
- Extension Cord Inspections
- Electrical Tool Inspected
- Lighting
- Other \_\_\_\_\_

**Emergency Info/Equipment Location**

- Fire Hose
- Fire Extinguishers
- Safety Shower/Eye Wash Station
- Evacuation Route
- Reporting Area
- MSDS Review
- Emergency Phone Location
- Emergency Phone # \_\_\_\_\_
- Portable Radio Required
- Other \_\_\_\_\_

**Environmental**

- Air Emission - Dust, Toxic, etc.
- Waster Generation – Storage, Label
- Disposal
- Spill Prevention Measures
- Storm Drains/Discharges Inspected
- Clean Up Materials
- Other \_\_\_\_\_

**Life Saving Rules**

- Seat Belts
- Mobile Devices
- Suspended Load and Moving Equipment
- Work Zone & Traffic Control
- Excavation
- Working at Heights
- Confined Space
- Energy Control
- Safe Work Permits
- Gas Testing and Production
- Minimum Approach Distance
- Electrical Protections

## GENERATION CONTRACTORS JOB SAFETY ANALYSIS (JSA)

Step 2: Job Hazard Analysis	Identify Risks	Eliminate/Manage Risks
Sequence of Basic Job Steps	Potential Risks	Preventative Measures

<b>Step 3: Reviewed by Next Level (PRIOR to beginning the work.)</b>	
Supervisor/Superintendent (if on site): _____	Date: _____
Foreman Signature (after supervisor review): _____	Date: _____

<b>Step 4: Work Crew:</b> (Your signature means that you have participated in and understand the JSA.)			
PLEASE PRINT NAME	SIGNATURE	PLEASE PRINT NAME	SIGNATURE

<b>Step 5: Reviewed by NIPSCO Project Representative (NPR) and/or Safety Coordinator</b> (Prior to or During the Work Shift)	
NPR/Safety Coordinator: _____	Date: _____

**Supervisor/Foreman End of Work Review:**

1. How was the Housekeeping at the end of the shift?     Acceptable     Unacceptable    Please explain below:

\_\_\_\_\_

\_\_\_\_\_

2. Potential Safety Hazards in the Work Area     Corrected     Uncorrected    Please list potential hazards below:

\_\_\_\_\_

\_\_\_\_\_

Supervisor/Foreman Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_