## ENVIRONMENT HAZARD ASSESSMENT CHECKLIST

|  |  |  |  |
| --- | --- | --- | --- |
| **CHECK** | **Yes** | **No** | **Action Required** |
| Are there potential problems with housekeeping? |  |  |  |
| Are employees exposed to extreme cold, heat, or adverse weather conditions? |  |  |  |
| Is excessive vibration or noise a problem? |  |  |  |
| Is there sufficient lighting for the task? |  |  |  |
| Is exposure to harmful radiation possible? |  |  |  |
| Is there dust, vapours, fumes, or mist in the air? |  |  |  |
| Does the work environment pose harm to the public? |  |  |  |
| Could employees be caught in between, or on objects? |  |  |  |
| Could employees be struck by objects? |  |  |  |
| Could employees fall from heights, into openings or excavations, or slip or trip on objects or surfaces? |  |  |  |
| Could employees suffer sprain, strain, or injury from pushing, pulling, or lifting? |  |  |  |
| Could employees suffer illness or industrial disease from an unhealthy work environment? |  |  |  |
| Are there objects that could fall from above?  |  |  |  |
| Is there potential for exposure to blood or bodily fluids? |  |  |  |
| Are there energy sources that could cause harm if accidental release or startup occurs (electrical, pneumatic, hydraulic, thermal, mechanical, gravity)? |  |  |  |
| Are there hot or cold surfaces that could burn or freeze (welded parts, cryogenic materials, autoclaves, ovens/stoves, molten materials)? |  |  |  |
| Does the layout of the workplace create a hazard (falling hazards exceeding four feet, low clearances, confined spaces)? |  |  |  |
| Is there risk of harassment or violence from the public, supervisors, coworkers, or contractors?  |  |  |  |

Consider that the workplace environment must be clean and orderly, and may:

* be subject to extreme temperatures;
* include excessive noise or vibration;
* be subject to dust, fumes, and other hazards in the air; and
* be vulnerable to harassment or violence.