



TOOL BOX TALKS

Abu Dhabi/ Dubai

Project Name:
SangProject2(name)

Location:
Dlh

Client: No Client

Supervisor

Date: 23-08-2023

No.of manpower: 1

Time: 14:41

Job type: a

Job Description:
a

Tools and Equipment used:
a

Job Start: 14:32:00

End Time: 14:32:00

Conducted By:
sijina-test

Ray No. : RU/603

Signature:

Life Saving Rules: Tick on the boxes which you being discuss during TBT

Don't walk under a suspended load	<input checked="" type="checkbox"/>
Don't smoke outside designed smoking areas	<input checked="" type="checkbox"/>
Conduct gas test when required	<input type="checkbox"/>
Work with a valid work permit when required	<input checked="" type="checkbox"/>
No drugs or alcohol while working or driving	<input checked="" type="checkbox"/>
While driving don't use the mobile phone and exceed speed limit	<input type="checkbox"/>
Obtain permit for working in confined Space	<input checked="" type="checkbox"/>
Verify isolation before work begins and use the specified life protection	<input checked="" type="checkbox"/>
Wear your seat belt	<input checked="" type="checkbox"/>
Obtain authorization before overriding	<input checked="" type="checkbox"/>
Follow prescribed journey	<input type="checkbox"/>
Protect yourself against a fall when working at height	<input checked="" type="checkbox"/>

Tick on the boxes which required your plan for the

Does everyone have correct PPI	<input type="checkbox"/>
Do you have all required tools, a	<input checked="" type="checkbox"/>
Is every one aware of themselfe	<input checked="" type="checkbox"/>
Have you discussed Life Saving	<input type="checkbox"/>
Have you agreed how to commu	<input type="checkbox"/>
Does everyone know that if there	<input checked="" type="checkbox"/>
Does appropriate posters and si	<input type="checkbox"/>
Are using tools being inspected	<input checked="" type="checkbox"/>
Emergency switches properly fu	<input checked="" type="checkbox"/>
Good housekeeping?	<input type="checkbox"/>
Proper barricading?	<input checked="" type="checkbox"/>
Check if isolation required and ir	<input type="checkbox"/>
Check job requirements & timing	<input type="checkbox"/>
Team aware of the emergency re	<input type="checkbox"/>
Check if permit to work is require	<input type="checkbox"/>
Job hazards identified &controls	<input type="checkbox"/>
Does the sufficient number of su	<input type="checkbox"/>

Use hazards warning signs as reminders and tick the signs being discussed during TBT

Flammable	Lifting in progress	Moving Equipment/ve hicles	Falling objects	Slippery	Toxic	Electruction hazard	High pressure cylinders	Entaglement hazard
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HAZARD CONTROL SHEET

Task	Hazards	Controls	Responsibilities
s	d	f	f
s	g	hh	h

ATTENDANCE SHEET

S.No	Emp.No.	Name	Company	Designation	Signature
	2,603	sijina-test	Company1		
	2,603	sijina-test	Company1		