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| **Title: Shop Equipment Hazard Analysis & Management Form** | | **Procedure No.: SSEHA-** |
| **Authorized/Approved By:**  John M. Seaman, *EHS Industrial Safety Manager* |
| **Issue Date:** Click or tap here to enter text. | **Review Date:**  Click or tap here to enter text. | **Page Number:** **1** **of 4** |

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| **1. Hazard Management Details - General** | | | | |
| **Shop/Equipment Item**  Click or tap here to enter text. | **Make/Model No.:**  Click or tap here to enter text. | | | **Serial No.:**  Click or tap here to enter text. |
| **Department:** Click or tap here to enter text. | **Work Location:** Click or tap here to enter text. | | | |
| **Person(s) Conducting Hazard Analysis: JOHN M. SEAMAN**  ***EHS, Industrial Safety Manager*** | | | **Date Conducted:** Click or tap here to enter text. | |
| **Equipment Photo:** | | **Description of Use:** | **Summary of Key Risks: (refer to appropriate subsections)** | |
|  | | Click or tap here to enter text.   |  | | --- | |  | | Click or tap here to enter text. | |

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| **2. Documentation:** | | |
| **Relevant Legislation/Standards** | **Y / N** | **Comments:** |
| **a. Is equipment required to be registered?** | **Y N** | Click or tap here to enter text. |
| **b. Is a user license/Certification required?** | **Y  N** | Click or tap here to enter text. |
| **c. Key Reference Materials Required:** | Click or tap here to enter text. | |
| **Equipment Documentation** | **Y / N** | **Comments:** |
| **a. Are operator’s manuals accessible?** | **Y  N** | Click or tap here to enter text. |
| **b. Is this a restricted use item?** | **Y  N** | Click or tap here to enter text. |
| **c. Does this equipment require safe use document(s)/test?** | **Y  N** | Click or tap here to enter text. |

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|  | | **3. Personal Protective Equipment (PPE) Required** *(Check the box for required PPE)* | | | | | | |
| images (10).jpg  **Gloves** | Mandatory_Dust_Mask.png  **Face Masks** | | images.jpg  **Eye Protection** | 0000462_125.jpg    **Face Shield** | MD011AD.jpg  **Hearing Protection** | 809367_sm.jpg  **Safety**  **Footwear** | 14614194-commanded-sign-safety-sign-pictogram-occupational-safety-sign-use-protective-apron (1).jpg  **Protective**  **Clothing** | P-815831_S.jpg  **Welding**  **Mask** |
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| **4. Hazard Analysis** | | | |
| **TASK** | **HAZARD** | **CAUSE** | **PREVENTIVE MEASURE** |
| **a. Routine Operation** | **Entanglement**  **Inhalation**  **Eye Injury**  **Trauma**  **Foot Injury**  **Hand Injury**  **Fire**  **Electrical Shock** | **Long hair, loose clothing, rags, cleaning brushes and jewelry could become entangled in the moving parts of the saw.**  **Dust/particles generated during machine operation**  **Projectiles, dust/particles, sparks**  **Projectiles, rotating parts, point of operation, ingoing nip points, flying chips and sparks**  **Drop object on foot**  **Point of operation, ingoing nip points, rotating parts, flying chips/sparks**  **Sparks**  **Improper grounding, operation, or maintenance, damaged electrical cords** | **Use aprons to restrict loose clothing. Use hair ties/nets to secure long hair. Do not wear jewelry or loose accessories when operating machine.**  **Appropriate natural ventilation, use of disposable respirators**  **Safety glasses w/side shield, goggles, face shield**  **Situational awareness, PPE, protective clothing, and machine guards**  **Wear safety shoes/boots**  **Machine guards, situational awareness**  **Appropriately placed fire extinguisher, remove all combustibles and fire hazards from work area**  **Proper grounding of frame, manufacturer’s instructions strictly followed, inspect cords** |
| **b. Routine Maintenance or Repair** | **Trauma** | **Uncontrolled/unexpected start up of machine** | **Make sure equipment is serviced on a regular basis, tested & tagged .Use appropriate energy isolation procedures prior to beginning maintenance work** |
| **c. Shutdown and Isolate**  **Unit** | **Electrical Shock/Laceration** | **Failure to follow Lockout/Tagout procedures** | **Strictly adhere to established Lockout/Tagout protocols** |

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| **Equipment Procedures/ Requirements** |
| **1.** Operate equipment in strict accordance with Manufacturer’s instructions and in accordance with OSHA 29 CFR 1910.212 and 1910.213.  **2.**  Only authorized users can operate equipment.  **3.** A mechanical or electrical power control shall be provided to make it possible for the operator to cut off power without leaving his position at the point of  operation.  **4.** All belts, pulleys, gears, shafts shall be guarded in accordance with the specific requirements of OSHA 29 CFR 1910.219.  **5.** Machines designed for a fixed location shall be securely anchored to prevent walking or moving.  **6.** One or more methods of machine guarding shall be provided to protect the operator and other employees in the area from hazards such as those created  by point of operation, ingoing nip points, rotating parts, flying chips and sparks.  **7.**  All portions of the blade shall be enclosed or guarded, except for the working portion of the blade.  **8.** Report any observed defect or safety hazard to your supervisor immediate  **9.** Where any object handled would possibly cause injury to feet if dropped, safety shoes will be worn.  **10**. Where any object handled could possibly cause cuts, punctures or abrasions to hands, appropriate gloves will be worn. (Exception: where rotating  machinery presents a greater hazard of entangling gloves, they are optional with a written justification).  **11.** Keep hands, hair and loose clothing clear of all moving parts. |