






Task Hazard Assessment Form

Task Name	Operating Stationary Power Tools
	Band saw, Chop saw, Table saw
Department	HVAC
Supervisor	Kyle Brennan
Work Location	Central Steam Plant
Date of Assessment	10.10.2024

Hazard	Description
Physical Hazards (Check all that apply) <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Electrical Hazards <input type="checkbox"/> Fall from Heights <input type="checkbox"/> Falling Objects <input checked="" type="checkbox"/> Flying Particles <input checked="" type="checkbox"/> Noise <input checked="" type="checkbox"/> Sharp/Abrasive Objects <input checked="" type="checkbox"/> Struck by Objects <input type="checkbox"/> Slippery Surfaces <input checked="" type="checkbox"/> Sparks/Hot Particles <input type="checkbox"/> Temperature Extremes <input type="checkbox"/> Vehicular Traffic <input type="checkbox"/> Other (Please Describe): _____	Describe any applicable hazards <ul style="list-style-type: none"> ➤ Electricity powering equipment can cause shocks ➤ Power tools can create outward flying particles ➤ Saw blades and bits can be sharp/abrasive, as well as create sharp/abrasive surfaces on materials ➤ Objects can shift suddenly while cutting, striking the operator ➤ Power tools generate loud noises while in use ➤ Cutting metals can generate sparks and hot particles
Chemical Hazards (Check all that apply) <input type="checkbox"/> N/A <input type="checkbox"/> Air/Water-Sensitive Substances <input type="checkbox"/> Flammable Liquids/Vapors <input checked="" type="checkbox"/> Irritants <input type="checkbox"/> Compressed Gases <input type="checkbox"/> Corrosive Substances <input type="checkbox"/> Radioactive Substances <input checked="" type="checkbox"/> Toxic Substances <input type="checkbox"/> Other (Please Describe): _____	Describe any applicable hazards <ul style="list-style-type: none"> ➤ Cutting certain materials can generate irritating dust ➤ Cutting materials containing lead-based paint can cause exposure to lead
Biological Hazards (Check all that apply) <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Air-borne Pathogens <input type="checkbox"/> Biological Sharps <input type="checkbox"/> Blood and Bodily Fluids <input type="checkbox"/> Mold <input type="checkbox"/> Sewage <input type="checkbox"/> Other (Please Describe): _____	Describe any applicable hazards

Controls Methods	Task-Specific Controls
<p>Engineering Controls - Physical methods that reduce or prevent workers from coming into contact with hazards</p> <p><u>Examples (Not Exhaustive)</u></p> <ul style="list-style-type: none"> ▪ Carts/Dollies ▪ Emergency Shut-Offs ▪ Guardrails ▪ Hoists ▪ Machine Guards ▪ Pumps ▪ Ventilation 	<p>List any engineering controls that are required to complete this task</p> <ul style="list-style-type: none"> ➤ Ensure the shut-off button is present and in good working order ➤ Ensure any applicable guards are in place and in good condition ➤ Plug equipment into a GFCI whenever possible
  	
<p>Administrative Controls – Work practices that reduce the duration, frequency, or intensity of exposure to hazards</p> <p><u>Examples (Not Exhaustive)</u></p> <ul style="list-style-type: none"> ▪ Buddy System ▪ Communication ▪ Limiting Access ▪ Rest Breaks ▪ Training 	<p>List any administrative controls that are required to complete this task</p> <ul style="list-style-type: none"> ➤ Only use stationary power tools if you have been trained in safe operation by a competent employee ➤ Visually inspect the tool prior to use. If there is signs of damage or missing parts, place the equipment out-of-service. ➤ Do not operate any power tools if you are feeling fatigued/unwell ➤ Do not cut, drill, or grind anything that may contain hazardous materials (lead, asbestos, PCBs), without consulting WCSU EH&S
<p>Personal Protective Equipment (PPE) - Equipment worn to minimize exposure to hazards</p> <p><u>Examples (Not Exhaustive)</u></p> <ul style="list-style-type: none"> ▪ Chemical Aprons ▪ Cut-Resistant Gloves ▪ Dust Suits ▪ Face Shields ▪ Safety Glasses 	<p>List any personal protective equipment that is required to complete this task</p> <ul style="list-style-type: none"> ➤ Safety glasses ➤ Ear protection (ear plugs, earmuffs) ➤ Work gloves ➤ Standard work clothing (long pants, work shoes)



Is a follow-up required?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Reason for follow-up		

Task Hazard Assessment Form Completed By

Name: _____ Mark Schuman _____

Signature: _____ 

Department: _____ Environmental Health and Safety _____

Date: _10/10/24_