

# Residential Fall Protection Assessment

Jobsite Location: \_\_\_\_\_ Date of Assessment: \_\_\_\_\_

Height of the Fall Hazard: \_\_\_\_\_ Pitch/Slope of Roof: \_\_\_\_\_

Prepared by (Supervisor): \_\_\_\_\_

<b>Fall Hazards</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Action Needed</b>
Roof or elevated surface 6 or more feet above the ground or a lower level				
Ladders used (What type and in good condition?)				
Are ladders secured?				
Ladders extend 3 feet above roof line/landing				
Ladders at correct angle for climbing				
Leading edges - Lack of guard rails or parapets (walls)				
Openings, holes, or skylights to a lower level				
Potential for falling objects				
Window openings/missing guardrails				
Stairwells unguarded/missing railing				
Are fall harnesses being worn correctly? (Full body harness with lanyard attached to the D-ring in the back)				
Are the anchor points secured properly and can withstand 5,000 lbs. per worker?				
Have harnesses and lanyards been inspected, and are they in good condition?				
Have employees been properly trained on fall protection hazards and how to wear fall protection harness/lanyard?				
<b>Other Hazards</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Action Needed</b>
Personal protective equipment (PPE) used (hard hat, safety glasses, gloves, fall protection harness and lanyard)				
Tools in good condition and equipped with safety guards				
Nail guns equipped with contact safety tip/trigger				
Jobsite housekeeping good				

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