

APPENDIX A3

**CERTIFICATION OF HAZARD ASSESSMENT**

(Location)

|                            |                    |
|----------------------------|--------------------|
| <b>Assessment Date(s):</b> | <b>Department:</b> |
| <b>Building:</b>           | <b>Room:</b>       |
| <b>Supervisor (print):</b> | <b>Signature:</b>  |

| <b>Hazards</b> | <b>Task: hands-on work or being within reach<sup>(a)</sup> of potential hazards of described activity/items:</b> | <b>Minimum Requirements</b> |
|----------------|------------------------------------------------------------------------------------------------------------------|-----------------------------|
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**OTHER CONTROL MEASURES:** \_\_\_\_\_

**NOTES**

Being within reach of potential hazards: "within reach" varies widely depending on scale and conditions of work and will be judged by affected staff in each room

**DISTRIBUTION:** Department PPE Assessment File  
REM, CIVL  
POST: Work Area