

Certificate of Hazard Assessment Personal Protective Equipment | Chemical handling

All managers and supervisors must survey the work areas and activities under their control to determine where Personal Protective Equipment, (PPE) may be required.

Instructions: Identify the workplace location. Conduct a walkthrough survey of the workplace and list the task or job functions that require PPE. Ensure PPE has an acceptable ANSI rating based on the chart provided on the back of this sheet. Conduct interviews with employees while performing field observations when necessary and complete this form. Sign and date this certificate. The completed certificate should remain on file in your area and additional areas required by your department.

Please note:

When determining if a potential hazard exists, consideration should be given to the following:

- Employee's perception of hazards.
- History of employee complaints or concerns.
- History of injuries or illnesses related to the workplace or job.

Task	Potential hazard	PPE required
Mixing pesticides and herbicides	Skin contact, eye contact, inhalation of vapors	Safety glasses, face shield, apron, chemical-resistant gloves
Application - pesticides and herbicides	Skin contact, eye contact, inhalation of vapors	Safety glasses, chemical-resistant gloves
Pouring/mixing corrosive liquids - acids, bases, ammonium compounds	Skin contact, eye contact, inhalation of vapors	Safety glasses, face shield, apron, chemical-resistant gloves
Pouring/mixing solvents - acetone, alcohols, paint thinner.	Skin contact, eye contact, inhalation of vapors	Safety glasses, face shield, apron, chemical-resistant gloves

Observation		
Are employees wearing PPE appropriate to tasks? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is PPE worn and adjusted properly? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is PPE maintained in good condition? Yes <input type="checkbox"/> No <input type="checkbox"/>

If no, describe the corrective action taken:

I _____, certify that the above location has been evaluated for potential hazards and the appropriate PPE, and that training has been performed.

Signature of Assessor: _____ Date: _____