

Document Number: HSER-SAF-EXE-FRM-032
Version Number: 1.1

Effective Date: 06/30/25
Page 1 of 2

Date:	Time: <input type="checkbox"/> am <input type="checkbox"/> pm	Division / Area:	Weather:
JSA Written By:		Location:	
JSA Reviewed By PIC:		911 Address:	
Work Activity (Job):		Nearest Hospital:	

Life Saving Rules (Check all that apply) Refer to **LSR Standard** to understand and mitigate these hazards.

- | | | | | | | | | |
|--|---|----------------------------------|---|-----------------------------------|---------------------------------------|---|---|--|
| | | | | | | | | |
| <input type="checkbox"/> BYPASSING SAFETY CONTROLS | <input type="checkbox"/> CONFINED SPACE ENTRY | <input type="checkbox"/> DRIVING | <input type="checkbox"/> ENERGY ISOLATION | <input type="checkbox"/> HOT WORK | <input type="checkbox"/> LINE OF FIRE | <input type="checkbox"/> MECHANICAL LIFTING | <input type="checkbox"/> WORK AUTHORIZATION | <input type="checkbox"/> WORKING AT HEIGHT |

- Equipment Required For The Job**
- | | |
|---|--|
| <input type="checkbox"/> Fire Extinguisher | <input type="checkbox"/> Lifting Equipment |
| <input type="checkbox"/> Barricade Tape | <input type="checkbox"/> Fall Protection |
| <input type="checkbox"/> Safety Goggles | <input type="checkbox"/> Respiratory Protection |
| <input type="checkbox"/> Face Protection | <input type="checkbox"/> Insect Repellent / Controls |
| <input type="checkbox"/> Hearing Protection | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Hand Protection | |

- Environmental Controls Required For The Job**
- | | |
|--|---|
| <input type="checkbox"/> Emission Control | <input type="checkbox"/> Check Dam |
| <input type="checkbox"/> Secondary Containment | <input type="checkbox"/> Erosion Control |
| <input type="checkbox"/> Catch Pan | <input type="checkbox"/> Waste Container |
| <input type="checkbox"/> Absorbent Pads | <input type="checkbox"/> Spill Response Kit |
| <input type="checkbox"/> Absorbent Booms | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Berm | |

- Permits / Checklist**
- | |
|---|
| <input type="checkbox"/> Hot Work |
| <input type="checkbox"/> Confined Space |
| <input type="checkbox"/> Lockout Tagout |
| <input type="checkbox"/> Excavation |
| <input type="checkbox"/> SIMOPS |
| <input type="checkbox"/> Other: |

Work Sequence Steps	Potential Safety & Environmental Hazards	Control Measures	Ownership
1			
2			
3			
4			
5			



JOB SAFETY ANALYSIS FORM

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Page 2 of 2

Work Sequence Steps		Potential Safety & Environmental Hazards	Control Measures	Ownership
6				
7				
8				
9				
10				
11				
12				

Personnel Involved in JSA (Print Name) Check SSE or Mentor if applicable.

Print Name		Print Name		Print Name	
1	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	11	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	21	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
2	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	12	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	22	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
3	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	13	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	23	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
4	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	14	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	24	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
5	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	15	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	25	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
6	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	16	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	26	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
7	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	17	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	27	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
8	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	18	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	28	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
9	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	19	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	29	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor
10	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	20	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor	30	<input type="checkbox"/> SSE <input type="checkbox"/> Mentor