

Faller Site Hazard Assessment Checklist

(OH&S Regulation 4.13(1), (2), 4.20(2) to 4.29(b), 26.2, 26.11(1))

Purpose: By the end of this procedure, supervisors/fallers should have completed a thorough site overview (hazard assessment) to identify hazards and any potentially dangerous situations prior to falling any trees. (Use check-boxes where provided.)

Instructions / Conditions to Check:

1. Did you identify hazards en route to site?

List Hazards

2. Did you check for immediate worksite hazards, such as?

Other workers in area

Stacking of fallers

Equipment in area

Equipment in area

Equipment within 2 tree-lengths

Equipment within 2 tree-lengths

Fallers working too close

Fallers working too close

Fallers working in isolation

Fallers working in isolation

3. Did you walk through the falling area to recognize and evaluate hazards?

List Hazards

4. Have dangerous trees been identified by you, in and outside of the falling block?

Are locations of dangerous trees identified on map and referenced by falling corner?

(Any tree that is hazardous to the worker because of location, lean, physical damage, overhead hazards, deterioration of limbs, stem or root systems – or a combination of these. Could also include hanging limbs, jackpot or mechanical damage.)

5. Did you check for overhead hazards, such as?

Brushed trees

Blowdown

Stumps

Snag tops

[Company Logo]

Company Name

Determine predominant lean of trees

6. Difficult trees: Have you identified them?

7. Did you check for ground hazards, such as?

Pulled up roots

Holes

Blowdown

Stumps

Snagtops

8. Other hazards: Have they been identified, such as?

Different tree species issues

Fire impacted

Insects, beetles

Weather related issues (blowdown, wind, rain, snow, fog)

Have any certain specific hazards been identified during your assessment that requires special attention?
(e.g. qualified assistance, blasting, machine assist or other alternative means)

Has the *Hazard Report Form* Corrective Action Log (CAL) been completed?

Faller and Supervisor have assessed site hazards and acknowledge by signing below:

Faller: _____

Date: _____

Supervisor: _____

Date: _____