PPE Hazard Assessment

This form is generally intended to apply to the area being assessed, not specific tasks.

Area:	Responsible Organization:
Completed by:	Date:

Activity/Tools	Potential Hazards	Body Parts	PPE Required

	Hazard Key	Body Part Key	PPE Key
	1. Cut 2. Abrasion 3. Burn 4. Fall 5. Falling/dropped objects 6. Flying objects 7. Noise 8. Flying particles 9. Inhalation 10. Slip 11. Splash 12. Radiation 13. Impact/crush 14. Other	A. Head B. Face C. Eye(s) D. Hearing E. Respiratory F. Trunk G. Arms H. Hands I. Fingers J. Legs K. Foot/feet L. Toes M. Other	I. Hardhat II. Goggles III. Spoggles IV. Safety Glasses V. Face Shield VI. Ear Muffs VII. Fall Arrest VIII. Gloves(list type) IX. Safety shoes X. Respirator XI. Chemical Suits XII. Other

Comments:

Completed forms will be retained by the BP Safety Department if used to satisfy the requirement for Area Hazard Assessments per 29 CFR 1910.132