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| **JOB SPECIFIC SAFETY ANALYSIS (K3)** | | | | |
| **SR #:** | **Bldg./Area:** | | | **Date:** Click or tap to enter a date. |
|  | **Primary** | | **Secondary** | |
| **Emergency Contact Person(s):** |  | |  | |
| **Phone Number:** |  | |  | |
| **Pre-job/Walkthrough Conducted:** | **Yes** | **No** | | |
| **PPE Requirements** | | | | |
| Minimum PPE Requirements:  Task Specific PPE: | | | | |
| Job Specifics | | | | |
| Job Location: | | | | |
| Work Scope: | | | | |
| Method: | | | | |
| Uncertainties: | | | | |
| Hazards | | Controls | | |
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| **APPROVER** | **SIGN/DATE** |
| **WS&H Professional:** |  |
| **Contractor Supervision:** |  |
| **PRE-JOB ROSTER** | |
| **NAME** | **SIGN/DATE** |
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