Job Hazard Assessment

Controls in Place

MOTIVA Training Inc.

Job Position: ______________________

Job Risk Value: [ ]

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Identification			Control		Assessment Post Controls				
Tasks Performed	**Hazard Category** Physical Chemical Biological Ergonomic	**Identified Hazards (For each task)**	**Controls in Place** (Please List)	**Additional Controls Required**	**Exposure Frequency** **1** Yearly **2** Monthly **3** Weekly **4** Daily **5** Continuously	**Revised Likelihood/Chance** **1** Almost Impossible **2** Not Likely **3** 50/50 **4** Very Possible **5** Expected	**Consequence (Outcome/Result)** **1** Near Miss **2** First Aid **3** Medical Aid **4** Lost Time (STD) **5** Disabling (LTD) **10** Fatality	**Revised Risk Value** **Hazard Risk** Add previous 3 numbers	**Task Average Risk Value**
0	0	0	0	0	0		0		
0	0	0	0	0	0		0		
0	0	0	0	0	0		0		
0	0	0	0	0	0		0		
0	0	0	0	0	0		0		
0	0	0	0	0	0		0		
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Facility: **Completed By:** **Date:**