

# PPE Hazard Assessment



**CREATIVE**  
safety supply

The leaders in visual safety™

## Digital Safety Evaluation Form Series - PPE-01

Page 1 of 2

Location:

Date:

Conducted by:

Task / Location	Hazard/Exposure (sparks, chemicals, impact)	PPE required for the job			
		(Please use page 2 to note exact PPE requirements and specifications)			
Job 1:		Check all that areas that apply:			
		Face	Eye	Feet/Leg	Hands
		Head	Torso	Hearing	Respiratory
Job 2:					
		Face	Eye	Feet/Leg	Hands
		Head	Torso	Hearing	Respiratory
Job 3:					
		Face	Eye	Feet/Leg	Hands
		Head	Torso	Hearing	Respiratory
Job 4:					
		Face	Eye	Feet/Leg	Hands
		Head	Torso	Hearing	Respiratory
Job 5:					
		Face	Eye	Feet/Leg	Hands
		Head	Torso	Hearing	Respiratory
Job 6:					
		Face	Eye	Feet/Leg	Hands
		Head	Torso	Hearing	Respiratory

Note: You may need to save this interactive form to your desktop first for "PRINT" to work.

(Please use page 2 to note exact PPE requirements and specifications)

# PPE Hazard Assessment



**CREATIVE**  
safety supply

The leaders in visual safety™

Digital Safety Evaluation Form Series - PPE-01

Page 2 of 2

Task / Location PPE explanation and list of required items such as “Hard Hat”, “Face Shield”, “Heat or Cut Resistant Gloves”, etc.)

Task 1: Required Equipment 1:

Task 2: Required Equipment 2:

Task 3: Required Equipment 3:

Task 4: Required Equipment 4:

Task 5: Required Equipment 5:

Task 6: Required Equipment 6: