

## Fall Hazard Mitigation Form

Task or Job Title:	Department:				
Describe the method of access and egress to elevated work: (Ladder, Scaffold, MEWP, ect)					
What Personal Fall Protection System(s) (PFAS) will be used?					
How will workers be protected as they enter/leave the elevated work area?					
Explain how PFAS will be installed and how we	orkers will be protec	cted during the installation:			
How will PFAS be Maintained 100% of	f the time workers a	are exposed to falls?			

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Describe the work (What is the work, where is it, who is working around you, ect?)					
Can all Fall Hazards be Eliminate	ed? [	□ Yes	0	No	
If no, explain why / if	yes, explain wh	ny they have no	ot been elir	ninated:	
By signing I am acknowledging that all the hazards associated with this task are addressed and mitigated in the best manner possible.  Foreman Signature:					
Safey Signature:				_ _	
Employee Signatures:					
Print Name:		Signature:		Date:	
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