

C/M or P/M Reviewed:	<u>CONSTRUCTION JOB HAZARDS ANALYSIS</u> <i>Powder Actuated Tools</i> <i>(Low Velocity PAT)</i>	
Building & Room(s):	Contractor/Subcontractor Name:	Rev: 2015
Project:	Date:	

Scope of Work: Please list the scope of work in this area. Example; Fastening steel studs to concrete. Installing ceiling wires for T-bar.
(and remove these directions).

Tasks being Performed	Potential Safety Risks/Hazards	Safety Controls / Mitigations
<p><u><i>This is a TEMPLATE</i></u></p> <p>Please list the tasks identified from the scope of work from above in this area.....</p> <p>Please list make, model and booster size (color)</p> <p><i>(and remove these directions).</i></p>	Risk of bodily injury from Improper use of powder actuated tools.	<p>All employees shall be trained & Certified in the safe operation of PAT. (Powder Actuated Tool)</p> <p>All qualified employees shall carry proof of training by way of identification card at all times. <i>(This card is now a life time cert.)</i></p> <p>Work area shall have signage posted of PAT in operation.</p>
	Risk of bodily injury from poorly maintained tools.	<p>Tools shall be inspected by the operator prior to use each day.</p> <p>Tools that are not fully operational shall be "RED" tagged & removed from service & work area.</p>
	Risk of bodily injury from flying particles, debris & loud noise	<p>Use proper PPE. (Eye & Hearing protection) required.</p> <p>Proper PPE shall be worn by adjacent personnel, as required by their proximity to the work task.</p> <p>Signage shall be posted of "Powder Actuated Tool in Use" in the work area.</p>
	Risk of exposure to unspent cartridges	<p>Dispose of cartridges as per the manufacture directions.</p> <p><i>" Do Not Leave unspent Cartridges laying around" as per OSHA requirements.</i></p>

Employee Signatures:	Date:

Employee Signatures:	Date:

Employee Signatures:	Date:

A signed copy of this JHA must be posted while the applicable subcontractor is working on-site and be available to any employee upon request.