

 <p>RISING EDGE TECHNOLOGIES ELECTRICAL FIELD SERVICES</p>	<p>DAILY TOOLBOX MEETING</p> <p>Version 14.3</p>	<p>Date: _____</p> <p>Client: _____</p> <p>Project: _____</p> <p>Leader: _____</p>
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Employee Sign Off

Initial beside your name both at the start of the shift, during the toolbox meeting and after the shift, during the daily close out meeting.

	Employee Sign Off (Print your name below)	Initials		Employee Sign Off (Print your name below)	Initials	
		START	END		START	END
1	_____	_____	_____	11	_____	_____
2	_____	_____	_____	12	_____	_____
3	_____	_____	_____	13	_____	_____
4	_____	_____	_____	14	_____	_____
5	_____	_____	_____	15	_____	_____
6	_____	_____	_____	16	_____	_____
7	_____	_____	_____	17	_____	_____
8	_____	_____	_____	18	_____	_____
9	_____	_____	_____	19	_____	_____
10	_____	_____	_____	20	_____	_____

Daily Close Out Meeting

- | | | |
|--|---------|--------|
| 1 Have any Near Misses and/or Incidents occurred during the day? | ___ Yes | ___ No |
| 2 Have all Near Misses and/or Incidents been reported? | ___ Yes | ___ No |
| 3 All workers are, and have remained, "FIT FOR DUTY". | ___ Yes | ___ No |
| 4 All tools have been put away in their proper location | ___ Yes | ___ No |
| 5 Equipment is parked in a professional manner and plugged in(if required) | ___ Yes | ___ No |
| 6 All equipment is in good working order. | ___ Yes | ___ No |
| 7 If "NO" to number 6, have the issues been reported to the Fleet Manager? | ___ Yes | ___ No |

Remaining hazards and/or issues that need to be discussed during the next daily toolbox meeting.

By signing your name to this sheet, you agree that you are fit for duty and understand your role and responsibility to do your job as safely as possible