8.7 – Site Safety Meeting Record



| GENERAL | | |
|---------------------------|-------|------------|
| Worksite: | Date: | |
| Conducted by: | Time: | |
| | | |
| AGENDA | | |
| Review of last meeting: | | ☐ Yes ☐ No |
| Unfinished business: | | |
| | | |
| | | |
| Housekeeping: | | |
| Tiousenceping. | | |
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| PPE review: | | |
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| Incident/Accident review: | | |
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| Near Misses: | | |
| iveal iviioses. | | |
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| | | |
| Other business: | | |
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8.7 – Site Safety Meeting Record



ATTENDANCE

| Company Name | Site Representative/Foreman |
|--------------|-----------------------------|
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