

# Daily Workplace Safety Observation Questionnaire

The **daily workplace safety observation questionnaire** is an essential tool designed to identify potential hazards and ensure a safe working environment. This questionnaire helps employees systematically assess safety practices and report risks promptly. Regular use promotes a culture of safety and reduces workplace accidents.

## Observer Information

Observer Name:

Date:

Department/Area:

## Safety Observation Checklist

- Are all employees wearing the required Personal Protective Equipment (PPE)?
- Is the work area clean and free of slip, trip, and fall hazards?
- Are tools and equipment used properly and in good condition?
- Are warning signs and safety instructions clearly visible?
- Are safe work procedures being followed?
- Are emergency exits and equipment accessible and unobstructed?

## Hazard Identification

Did you identify any potential hazards? If yes, please describe:

## Action Taken/Recommendations

What actions were taken or recommended to address identified hazards?

## Additional Comments

Any other observations or suggestions:

Observer Signature:

Submit

