

SAFETY TASK ASSESSMENT READY-MIX DELIVERY

Delivery Site					Plant Manager/Supervisor				
Date					Plant Name				
WEATHER CONDITIONS					PRETRIP INSPECTION				
Dark	☐ Yes	□No	□ N/A		Underhood Inspection	☐ Yes	□No	□ N/A	
Hot	☐ Yes	□No	□ N/A		Climbing on Truck	☐ Yes	□No	□ N/A	
Cold	☐ Yes	□No	□ N/A		LOADING CONCRETE				
Rainy	☐ Yes	□No	□ N/A		High Noise Levels	☐ Yes	□No	□ N/A	
Foggy	☐ Yes	□No	□ N/A		Falling Materials	☐ Yes	☐ No	□ N/A	
Snow/Ice	☐ Yes	□No	□ N/A		ON ROAD	DRIVING			
WASH DOWN TRUCK				Repetitive Motion	☐ Yes	☐ No	□ N/A		
Climbing Ladder	☐ Yes	☐ No	□ N/A		Truck Rollover	☐ Yes	☐ No	□ N/A	
Slip Hazards	☐ Yes	□No	□ N/A		Heavy Traffic	☐ Yes	☐ No	□ N/A	
Moving Parts	☐ Yes	☐ No	□ N/A		Tire Blow Out	☐ Yes	☐ No	□ N/A	
JOB SITE CONDITIONS					CUSTOMER RELATIONS				
Rough Terrain	☐ Yes	□No	□ N/A		Demanding	☐ Yes	☐ No	□ N/A	
Muddy Conditions	☐ Yes	□No	□ N/A		Confrontations	☐ Yes	☐ No	□ N/A	
Standing Water	☐ Yes	□No	□ N/A		WELLNESS MESSAGE				
Truck Placement	☐ Yes	□No	□ N/A						
Towing	☐ Yes	□No	□ N/A						
Tight Area	☐ Yes	□No	□ N/A						
Access/Egress	☐ Yes	□No	□ N/A						
OTHER				DRIVER NAME (PRINT	RIVER NAME (PRINT)		INITIALS		
DRIVER NAME (PRINT)		INIT	IALS						