



## Safety Minute Observation Card

**Vessel:**

**Project:**

**Unsafe Act/Conditions**

**Safe Act/Practices**

PPE

Maintenance/Inspections

Tools and Equipment

Procedures

Safety Attitude

Pre-Job Inspections

Permit to Work

Communication

Housekeeping

Body Mechanics (lifting, handling, movement)

**Date:**

**Name or Dept:**

**Observation Details**

**Immediate Action Taken**

**Safety Meeting Date** \_\_\_\_\_

**Proposed Corrective Action/Suggestion for Improvement**