



# INTEGRATED MANAGEMENT SYSTEM

Document No.:  
BPDB-IMS-FR-040

Revision No.: 00

Effective Date: 01-11-2021

## SITE SAFETY DISCUSSION

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### Form/Record

This form to be filled prior commencement of any job and to be shared with User

Date: \_\_\_\_\_

Name of the Project: \_\_\_\_\_

Name of the site: \_\_\_\_\_

Work description:

\_\_\_\_\_  
\_\_\_\_\_

Identified HSE hazards & risks involved in the work:

SI.No.	Hazards	Risks	Controls to apply for risks mitigation including use of SOPs &PPE

Safety issues discussed with the working team & User Organization:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Prepared By		Approved By	
Reviewed By			



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**Name & designation of the site supervisor** \_\_\_\_\_

Signature \_\_\_\_\_

**User Site representative** \_\_\_\_\_

Signature \_\_\_\_\_

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Reviewed By			