PURDUE UNIVERSITY | Administrative Operations

# Certification of Hazard Assessment (Location)

**Supervisor** (print): _____ **Assessment Date(s):** _____

**Signature:** _____ **Location(s) Covered:** _____

| Hazards | Task<br>*(Hands-on or within reach of potential hazards of described activity/items)* | Minimum Requirements |
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**Other control measures:** _____

**Distribution:** Departmental PPE hazard assessment certification file and/or post in work area