

		<h2 style="text-align: center;">Jobs Safety Analysis</h2>		Start Date: <b>10/7/2009 (one year)</b>
JOB/ACTIVITY NAME: Roller			JSA # (optional):	
DEPARTMENT/GROUP NAME Metrology / Alignment Engineering Group		BLDG/AREA LOCATION(s): 107		OTHER INFORMATION or REFERENCES::
SCOPE OF WORK Roll Material				

Steps	Potential Hazards	Controls
Adjust rollers	Lacerations to hand Pinching hand	Wear leather gloves. Deburr test strips Do not slide hands along the edges. Wear gloves. Keep fingers from the pinch point.
Feed sheet metal into the rollers	Lacerations to hand  Pinching hand Muscle strain	Wear leather gloves. Deburr the edges. Do not slide hands along the edges. Wear gloves. Keep fingers from the pinch point. Position body in relation to the crank handle so you don't have to reach to grab the handle.
Guide sheet metal out of the rollers	Lacerations to hand Pinching hand	Wear leather gloves. Do not slide hands along the edges. Wear gloves. Keep fingers from the pinch point.

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***I understand & will adhere to the steps, hazards & controls as described in this JSA. I understand that performing steps out of sequence may pose hazards that have not been evaluated, nor authorized. I will contact my supervisor prior to continuing work, if the scope of work changes or new hazards are introduced.***

***I understand I have the authority and responsibility to stop work I believe to be unsafe.***

Worker Name (please print)

Signature

Date

Brendan Dix

Georg Gassner

Supervisor

Signature

Date

***I have communicated area hazards with the supervisor or listed worker(s) for this activity and have coordinated the described activity with affected occupants. The above listed workers are released to perform described scope of work in the following area(s):*** \_\_\_\_\_

Mike Racine

Area or Building Manager

Signature

Date