

## San Juan County Safety & Compliance JOB SAFETY ANALYSIS

JOB SAFETY ANALYSIS:	JOB TITLE (and number if applicable)		DATE:	NEW
	PAGE_1_ OF _1 JSA NO		-	REVISED
	TITLE OF PERSON WHO DOES JOB:	DEPTMENT HEAD:	ANAYLYSIS BY:	
	LOCATION:	DEPARTMENT:	REVIEWED BY:	
REQUIRED AND/OR RECOMMENDED PERSONAL PROTECTIVE EQUIPMENT:				
SEQUENCE OF BASIC JOB STEPS	POTENTIAL HAZARDS	RECOMMENDED ACTION OR PROCEDURE		