

Toolbox Meeting Report



Project:	Date:
Location:	Project No:
Name person delivering toolbox meeting :	Time:

➤ **Outstanding Items from Previous Meeting:** (allocate responsibility & timeframe)

➤ **Safety Issues:** (Safety Alerts / topics / recommendations / Legislative changes)

➤ **Incidents / Accidents:** (since last toolbox meeting from all sites)

➤ **Environmental Issues:** (dust / noise / stormwater run-off / flora / fauna etc.)

➤ **Upcoming Works / SWMSs / Construction Method or Design change:**

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➤ **Personnel Protective Equipment:** (compliance / requirements / condition / additional)

➤ **Housekeeping:** (site in general / compound / amenities)

➤ **Traffic Management:** (construction site / public interface / pedestrians / access-egress)

➤ **Other Issues:**

➤ **Minuted By:** _____ **Signed:** _____

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Distribution List: [Executive Position Title] / [Management Position]

PERSONNEL ATTENDING

Name	Company	Signature
_____	_____	_____
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