# Roof Fall Protection Assessment

<table>
<thead>
<tr>
<th>Date: __________</th>
<th>Bldg. No. ________</th>
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<tbody>
<tr>
<td>Completed By: ________________</td>
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## Type of Building:
- Permanent
- Modular
- Trailer
- Other

## Risks and Options
- Equipment Maintenance
  - Permanent FP
  - Modular
  - Scaffold Handrail
  - Fall Restraint Equipment

## Access Req. By:
- Maint.
- Bldg. Emp’s Security

## Frequency of Access:
- Weekly
- Monthly
- Yearly

## Method of Access:
- Roof Acc.
- Dr.
- Acc. Hatch
- Perm. Ladder
- Port Ladder

## Hoist Area:
- (Y/N)
- Ladder Tie Off (Y/N)

## Acc. Hatch Guardrail:
- (Y/N)

## Areas to be Accessed Requiring Fall Protection
- Penet. Equip.
- Drains/Gutters
- Perimeters

## Low Slope < 4/12
- (Y/N)
- Steep Roof > 4/12 (Y/N)

## Parapet Wall:
- (Y/N)
- (> 42") (< 42")

## Fixed Guardrails 42" Min.:
- (Y/N)

## Temp Guardrails 39"-45" Min.:
- (Y/N)

## Perm. Fall Arrest Anchor Pts. Installed:
- (Y/N)

## Perm. Fall Restraint Pts. Installed:
- (Y/N)

## Skylights
- (Y/N) Protected

## Courtyards / Atriums
- (Y/N) Protected

## No Load Roofs <20 lb./SF
- (Y/N) Protected

## Unguarded Perimeters, Holes, & Elev. Changes (lin. ft.)
- (Y/N)