EHS Project Review Checklist

Environment Health & Safety System

Unit	Location		Project ID	Project Name
		1		

Project Description

Project In-charge :

Contacts:

General Requirements					
#	POINTS	N/A	YES	NO	

Checklist Prepared by	Date	Verified & Approved by	Date

Received	General Points & Action Plan Considered				
by EHS					
office					
	EHS COORDINATOR SIGN.				