



On-site assessment form to work safely on Jersey roads

Site location and details:

Road Name:		Duration of Works:			
Speed of Road:		Traffic Count (3 mins)			
Carriageway Width (metres):		Footway Width (metres):			
Approach Visibility (metres):		Type of Traffic			
Works to Occupy Carriageway:	Yes	No	Works to Occupy Footway:	Yes	No

Hazards (select all that apply):

Roundabouts	<input type="checkbox"/>	Junctions	<input type="checkbox"/>	Unloading Bay	<input type="checkbox"/>	Parked Vehicles	<input type="checkbox"/>
Shops/Public Areas	<input type="checkbox"/>	Hospitals	<input type="checkbox"/>	Bends/Hills	<input type="checkbox"/>	Bus/Taxi Stops	<input type="checkbox"/>
Approach Visibility	<input type="checkbox"/>	Pedestrian Crossings	<input type="checkbox"/>	Speeding Traffic	<input type="checkbox"/>	Residential Access	<input type="checkbox"/>
No Street Lighting	<input type="checkbox"/>	Traffic Sensitive	<input type="checkbox"/>	School Route	<input type="checkbox"/>	Weather Conditions	<input type="checkbox"/>
*Restricted Work Times	<input type="checkbox"/>	*If in a time sensitive area, specify times of work:					

Do the works restrict the width of:

Footway	Yes	No	Carriageway	Yes	No
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Do the works require:

Temporary Walkway	Yes	No	Single Lane Working	Yes	No
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Do the works require:

The use of existing crossings	Yes	No	Temporary speed limit	Yes	No
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Will people with a disability as well as other vulnerable road users have difficulty:

Understanding	Yes	No	Observing safety measures	Yes	No
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Traffic Control (select all that apply):

Signing Only	<input type="checkbox"/>	Priority Passing	<input type="checkbox"/>	Stop/Go (1 Person)	<input type="checkbox"/>	Stop/Go (2 Person)	<input type="checkbox"/>
Lanes Reduced	<input type="checkbox"/>	Contra-Flow	<input type="checkbox"/>	One Way	<input type="checkbox"/>	Road Closure	<input type="checkbox"/>
Temporary Traffic Signals:	<input type="checkbox"/>	2-Way	<input type="checkbox"/>	3-Way	<input type="checkbox"/>	4-Way	<input type="checkbox"/>

Pedestrian Safety (select all that apply):

Unregulated Crossing	<input type="checkbox"/>	Divert to Exiting Crossing	<input type="checkbox"/>	Barriered Walkway	<input type="checkbox"/>	Operative to Escort	<input type="checkbox"/>
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List any additional information below:



List all the equipment and materials required for the site location you surveyed.

Indicate in each box on the right the number of items required. If the list above does not show all the equipment and materials required, give further details on requirements in the additional information section.

	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
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