# SANITATION BROS INC

Industrial Hygiene. Peak Performance. | (647) 365-1503 | sanitationBros20@gmail.com

# PPE & EQUIPMENT ACKNOWLEDGMENT

OHSA Section 25(1)(b) & 28(1)(b) — Personal Protective Equipment

## EMPLOYEE INFORMATION

| EMPLOYEE NAME | POSITION / TITLE | DEPARTMENT | DATE ISSUED |
|---|---|---|---|
| | | | |

## PART A — PPE ISSUED TO EMPLOYEE (CHECK ALL THAT APPLY — RECORD SIZE/SPEC)

*Employee must inspect all PPE before first use and report any defects immediately.*

| | |
|---|---|
| ☐ Disposable Gloves (Nitrile) | ☐ Heavy-Duty Chemical-Resistant Gloves |
| ☐ Safety Goggles / Eye Protection | ☐ Face Shield (full face) |
| ☐ N95 Respirator / Dust Mask | ☐ Half-Face / Full-Face Respirator |
| ☐ Safety Footwear (CSA Grade 1) | ☐ High-Visibility Safety Vest |
| ☐ Disposable Coverall / Tyvek Suit | ☐ Reusable Coverall / Company Uniform |
| ☐ Hard Hat / Bump Cap | ☐ Hearing Protection (Earplugs / Earmuffs) |
| ☐ Back Support / Lifting Belt | ☐ Knee Pads |

Glove size: _____ Boot size: _____ Coverall size: _____ Hard hat size: _____

## PART B — COMPANY EQUIPMENT ISSUED

| ITEM / SERIAL NO. | QTY | CONDITION ON ISSUE | CONDITION ON RETURN | RETURN DATE | INIT. |
|---|---|---|---|---|---|
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## PART C — EMPLOYEE ACKNOWLEDGMENT

I received all PPE/equipment listed above and it was in good working condition at time of issue

I have been trained on the correct use, maintenance, cleaning, storage, and disposal of all PPE

I understand PPE must be inspected before every use and must be worn whenever required by compa

Damaged, lost, or stolen PPE must be reported immediately. Replacement cost may be charged if d

All company-owned equipment remains the property of Sanitation Bros INC and must be returned up

| EMPLOYEE SIGNATURE | DATE | ISSUED BY (SIGNATURE) | DATE |
|---|---|---|---|
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