**Toolbox Meeting Record**

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| --- | --- |
| Department:  | Date: |
| Meeting held at:  |
| Meeting conducted by: |

**Safety Discussion Topic (include worksite hazards)**

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**Action required (plan to eliminate/control/reduce hazards)**

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| Action | Responsible | Timeframe |
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**Attendees**

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| --- | --- |
| Name (print) | Signature |
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