

# Safety Agreement

## ABC CONTRACTORS

123 Any Street  
Anytown, US 00000  
555-555-5555

Date: \_\_\_\_\_

Employee: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

The undersigned, \_\_\_\_\_, hereby acknowledges and agrees that:

1. I have been shown the location of the first-aid kit, emergency telephone numbers, and fire extinguisher.
2. I have received instruction in the use of the fire extinguisher, safety goggles, hard hat, and other equipment applicable to my trade.
3. I have been issued a hard hat and will wear it at all times when on the job site.
4. I have received a copy of the Job Site Safety Program; I have read it, I understand it, and I will comply with each and every provision.
5. In case of injury, I will report it to my supervisor.
6. I will report any unsafe conditions to my supervisor.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_