SPI	ECIA	L E	FFECTS SAFETY INSP	ECTION CHECKLIST
Production: Product		Production Scheo	dule:	
Locat	Location: Signature/Date:			
BASI	C PRO	CEDUR	RES	
	lotify all p	personne	involved of your intention to use special	Have one last briefing and dry run to ensure everyone's understanding.
W	ill happe	n to, the	briefing of the action: What will happen, who it hazards involved, equipment involved,	If there are any changes, review from the beginning.
emergency procedures and the location of emergency medical facilities.				Clear the set of unnecessary personnel.  Make ourse that communications are charlytally clear between
<ul> <li>Answer any questions or respond to concerns completely.</li> <li>Allow adequate rehearsal time.</li> </ul>				Make sure that communications are absolutely clear between everyone involved.
		•	. THE SPECIAL EFFECT TO BE PERFORN	ΛΕD·
Che	ck eac	h item		he item and have taken appropriate steps to comply, if uired, give brief description.
YES	NO	N/A	.,	Inspection Item
	.,,		Do all Special Effects personnel he possession?	nave proper licenses or certification cards in their
			•	www.matilation.hoom.numided.andin.anfile.andin.anfile.
			required?	er ventilation been provided and is safety equipment

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	Have Safety Data Sheets (SDS) been obtained for any hazardous substance to be used?			
	Have you planned procedures for:			
	Do any safety modifications need to be made?			
	Have the following personnel been briefed on the specifics of the stunts:			
	<ul> <li>Medic/First Aid</li> <li>Stunt Coordinator</li> <li>Production Safety Coordinator</li> <li>Cast</li> <li>Assistant Directors</li> <li>Security Officers</li> <li>Fire Safety Officer</li> <li>Special Effects Coordinator</li> </ul>			
	After each run-through, has the effect been set up to run again exactly as originally planned?			
	If changes have been made, are all involved parties aware of and comfortable with the changes?			
	If animals are involved, have the procedures for proper animal handling been reviewed?			
	If minors are involved, have you obtained the teacher/welfare workers' approval?			
	Have proper arrangements been made for emergency medical services?			
	<ul> <li>Is a doctor needed on the set?</li> <li>Has the nearest emergency medical facility been notified of your work?</li> <li>Is a stand-by ambulance or helicopter needed?</li> </ul>			
KEY PERSONNEL				

Stunt Coordinator:	Special Effects Coordinator:
Assistant Director:	First Aid:
Production Safety Advisor:	Transportation Coordinator
Local Law Enforcement/Contact Phone:	
Local Fire Department/Contact Phone:	
Signature:	Date:
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