

Required Safety Equipment Signature Form

The City of Miami Parks and Recreation Department will ensure that all appropriate personnel have the required and approved safety equipment prior to beginning work (supervisors are required to check Personal Protective Equipment (PPE) before work begins).

I have reviewed the Personal Protective Equipment Matrix and have been fully informed of the Personal Protective Equipment required based on my job description and duties.

I have received the safety Personal Protective Equipment issued to me and will wear it on duty. I will report any defects in my safety Personal Protective Equipment to my supervisor.

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

