

Stunt Safety Inspection Checklist

Production: _____ Production Schedule: _____

Location: _____ Completed by: _____

Date of Shoot: _____

Stunt Coordinator: _____

Special Effects Coordinator: _____

Basic Procedures

1. Complete a stunt diagram on enclosed form.
2. Notify all personnel involved of your intention to perform a stunt.
3. Conduct a detailed briefing of the stunt: What will happen, who it will happen to, the hazards involved, emergency procedures and the location of emergency medical facilities.
4. Answer any questions or respond to concerns completely.
5. Allow adequate rehearsal time.
6. Have one last briefing and dry run to insure everyone's understanding.
7. If there are any changes, review from the beginning.
8. Clear the set of unnecessary personnel.
9. Make sure that communications are absolutely clear between everyone involved.

Describe the stunt to be performed in detail: _____

How many people involved in stunt scene, including production crew?: _____

Describe safety measures used to protect participants, public and equipment: _____

Please answer yes, no, or N/A for “not applicable”, for all of the following questions.

	<i>Question/Concern</i>	<i>Comments</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Do all stunt personnel have any required licenses or certification cards in their possession (e.g. SCUBA, motorcycle, etc.) and have they been verified?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Is there a helicopter involved? If yes, have safety rules/policies been reviewed and personnel notified, warned and rehearsed?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Is any fixed-wing aircraft involved? If yes, have safety rules/policies been reviewed and personnel notified, warned and rehearsed, and aerial coordinator's FAA motion picture flight safety manual been reviewed? Reference: <i>Actsafes Safety Bulletin #11: Fixed-Wing Aircraft</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Are personnel cables or other special rigging involved? If yes, have safety rules/policies been reviewed and personnel notified, warned and rehearsed?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Have Material Safety Data Sheets (MSDS) been obtained for any hazardous substance to be used?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Has every piece of stunt equipment been carefully inspected, especially after each use? See page 5.	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Do any safety modifications need to be made? If so, what? _____ _____	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Have you planned procedures for: <ul style="list-style-type: none"> ◆Human Error ◆Outside Interference ◆natural acts (i.e. weather changes) ◆mechanical error ◆anything unexpected 	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Have stunt personnel been allowed adequate time to inspect the area and rehearse?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Have the following personnel been briefed on the specifics of the stunts: <ul style="list-style-type: none"> ◆Cast ◆Stunt Coordinator ◆Assistant Directors ◆Production Safety Coordinator ◆Medic/First Aid ◆Fire Safety Officer ◆Security Officers 	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	After each run-through, has the stunt been set up to run again exactly as originally planned?	

- Yes No N/A If changes have been made, are all involved parties aware of and comfortable with the changes?
- Yes No N/A If animals are involved, have the procedures for proper animal handling been reviewed?
Reference: *Actsafes Safety Bulletin #6: Animal Handling Rules*
- Yes No N/A If children are involved, have you obtained the teacher/welfare workers' approval?
- Yes No N/A Have proper arrangements been made for emergency medical services?
♦ Is a stand-by ambulance or helicopter needed?
♦ Has the nearest emergency medical facility been Located and listed on call sheet?

Signature

Date

Pre-Planned Stunt Diagram

Equipment Checklist

Equipment: _____

Tested/Rated/Engineered Details: _____

Inspected Details: _____

Equipment: _____

Tested/Rated/Engineered Details: _____

Inspected Details: _____

Equipment: _____

Tested/Rated/Engineered Details: _____

Inspected Details: _____

Equipment: _____

Tested/Rated/Engineered Details: _____

Inspected Details: _____

Equipment: _____

Tested/Rated/Engineered Details: _____

Inspected Details: _____

Equipment: _____

Tested/Rated/Engineered Details: _____

Inspected Details: _____