



SafeChurch® Snow and Ice Removal Log

A log documenting the steps taken to remove snow and ice can be a good defense to claims that the school was negligent in snow or ice removal. Only adopt the use of a log, however, if your school will consistently document all aspects of your snow and ice removal operations. Use this log to document snow and ice removal.

Date: _____ Building Location: _____

Current Temperature: _____

Precipitation: Snow Sleet Freezing Rain Rain

Area	Type of Treatment						Time		
	Plow	Blow	Shovel	Salt	Sand	Anti-Icing Chemical	Time	a.m.	p.m.
Stairways/Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Sidewalks/Walkways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Entrances/Exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Ramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Parking Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Person Completing Log: _____							Title: _____		
Start Time: _____		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		Finish Time: _____		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.			
Comments:									



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