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I. INTRODUCTION

_____________________ GOAL IS TO PROVIDE A SAFE WORKING ENVIRONMENT FOR OUR
EMPLOYEES AND SUB-CONTRACTORS ON EVERY PROJECT. AS AN ESTABLISHED FLOORING
CONTRACTOR, _____________________ KNOWS HOW IMPORTANT IT IS TO HAVE EMPLOYEES
AND SUB-CONTRACTORS THAT ARE BOTH EXPERIENCED IN SAFETY AND INJURY
PREVENTION.

JOB SITE SAFETY AND ACCIDENT PREVENTION ARE THE RESPONSIBILITY OF ALL OUR
EMPLOYEES AND SUB-CONTRACTORS. OUR PHASED SAFETY PLAN IS DESIGNED TO
PROMOTE AWARENESS AND EDUCATION TO PREVENT ACCIDENTS.

EDUCATES ITS EMPLOYEES
AND SUB-CONTRACTORS ON
SAFETY AND
ACCIDENT PREVENTION
II. EMPLOYEE AND SUB-CONTRACTOR SAFETY ORIENTATION

THE FOLLOWING INFORMATION HAS BEEN CONVEYED TO ME.

PRELIMINARY SAFETY INFORMATION

HOW TO PARTICIPATE IN THE _____________________ TOTAL SAFETY PROGRAM.
HOW TO OBTAIN, USE, AND CARE FOR PERSONAL PROTECTIVE EQUIPMENT.
HOW TO PERFORM INITIAL JOB ASSIGNMENTS IN A SAFE MANNER.
HOW TO IDENTIFY AND SAFELY USE HAZARDOUS GASES, CHEMICALS, OR MATERIALS AND WHAT EMERGENCY ACTIONS TO TAKE IN THE EVENT OF A SPILL, LEAK, OR OTHER EXPOSURE.
WHAT ACTIONS TO TAKE IN AN EMERGENCY, INCLUDING APPROPRIATE EXIT ROUTES FROM THE SITE.
HOW AND WHEN TO REPORT INJURIES.
LOCATION OF FIRST AID FACILITIES.
HOW TO REPORT UNSAFE CONDITIONS.

GENERAL JOB SAFETY PROCEDURES

ATTENDANCE AT WEEKLY SAFETY MEETINGS IS REQUIRED
HARD-HATS MUST BE WORN:
    AT ALL TIMES:
        ONLY WHEN THERE IS DANGER OF FALLING OBJECTS, OR WORKMEN ABOVE.
APPROPRIATE CLOTHING MUST BE WORN AT ALL TIMES ON THE JOB SITE. THIS INCLUDES SUBSTANTIAL LEATHER, ANKLE-SUPPORTING BOOTS.
WEAR AND USE APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT (SAFETY GLASSES, HARNESSSES, EAR PLUGS, RESPIRATORY, ETC.) AS DIRECTED BY SITE SUPERINTENDENT OR AS JOB CONDITIONS REQUIRE.
FLOOR COVERINGS AND HANDRAILS MUST BE REPLACED IMMEDIATELY AFTER ACCESS OR EGRESS.
INSPECT ALL ELECTRICAL EQUIPMENT AND CORDS DAILY BEFORE USE, TESTING ALL EQUIPMENT QUARTERLY.
KEEP IN MIND THAT ALL WORKERS ARE RESPONSIBLE FOR HOUSEKEEPING.
ANY AND ALL INJURIES OR ILLNESSES, REGARDLESS OF THE DEGREE OF SEVERITY MUST BE REPORTED TO _____________________ SAFETY DIRECTOR.
BECOME FAMILIAR WITH THE _____________________ SAFETY MANUAL AND ITS USE.

SITE SPECIFIC SAFETY PROCEDURES
READ AND SIGN THE SITE SPECIFIC FALL PROTECTION WORK PLAN.
BE FAMILIAR WITH THE MEDICAL EMERGENCY PLAN. HAZMAT EMERGENCY PLAN, AND
JOB SITE EMERGENCY PHONE LOCATIONS AND NUMBERS.
READ ALL REQUIRED MATERIAL THAT IS POSTED IN THE SAFETY OFFICE.
UNDERGO MSDS TRAINING AND KNOW THE LOCATION OF THE MSDS BINDER
OBSERVE NO SMOKING AREAS AS INDICATED BY SIGNS
PARK ONLY IN AUTHORIZED AREAS.
OBSERVE POSTED SPEED LIMITS, AS THESE ARE STRICTLY ENFORCED.
MAINTAIN THE SECURITY OF THE JOB SITE BY LOCKING AND SECURING GATES AND
FENCES AFTER YOU PASS THROUGH.
SEXUAL HARASSMENT OR PROFANE LANGUAGE DIRECTED AT AN INDIVIDUAL WILL NOT
BE TOLERATED.
FOLLOW ALL POSTED REQUIREMENTS FOR CONFINED SPACES ON THIS JOB SITE.

ACTIVITIES THAT WILL NOT BE TOLERATED
USE OF ALCOHOL OR NARCOTICS ON THE JOB OR ARRIVAL ON THE JOB UNDER THE
INFLUENCES OF THESE SUBSTANCES.
GAMBLING, FIGHTING, INCITING RIOTS, OR PRACTICAL JOKING AND HORSEPLAY.
CARRYING FIREARMS OR DANGEROUS WEAPONS.
THEFT OF MATERIAL, EQUIPMENT, OR SUPPLIES.
UNAUTHORIZED USE OF COMPANY VEHICLES OR RECKLESS DRIVING.
REPEATED OR MAJOR VIOLATIONS OF SAFETY REGULATIONS.
SEXUAL HARASSMENT

ALL INFORMATION IN THIS ORIENTATION CHECKLIST WAS EXPLAINED TO ME.

BY: ___________________________________________

COMPANY: __________________________________________

DATE: __________________________________________

I EXPLAINED ALL ITEMS IN THIS ORIENTATION CHECKLIST TO THE ABOVE MENTIONED SUB-
CONTRACTOR.

__________________________________________

BY: __________________________________________

SAFETY DIRECTOR

DATE: __________________________________________
SAFETY COMMUNICATIONS

THE _____________________ SAFETY REQUIREMENTS MUST BE EFFECTIVELY COMMUNICATED TO EMPLOYEES AT ALL TIMES. THE UNDERSTANDING, INVOLVEMENT, AND COMMITMENT TO SAFETY AMONG EMPLOYEES IS ESSENTIAL TO THE SUCCESS OF THE OVERALL PROGRAM. THE _____________________ SAFETY COMMUNICATION PROCESS INVOLVES ORIENTATION SESSIONS, WEEKLY, SAFETY MEETINGS, AND TRAINING PROGRAMS.

ALL EMPLOYEES ON THE PROJECT SITE MUST PARTICIPATE IN A SAFETY ORIENTATION SESSIONS PRIOR TO BEGINNING WORK ON THE JOB. THE SPECIFIC TOPICS INCLUDED DEPEND ON THE WORK TO BE PERFORMED. REGULARLY INCLUDED IN THIS ORIENTATION ARE SECTIONS ON FIRE SAFETY, ELECTRICAL GROUNDING, LOCKOUT AND TAG, REPORTING OF UNSAFE CONDITIONS, RESPIRATORY PROTECTION, CONFINED SPACE ENTRY, FALL PROTECTION, EMERGENCY PROCEDURES, HAZARDOUS MATERIAL MANAGEMENT AND STORAGE, HAZARDOUS WASTE DISPOSAL, DISCIPLINARY PROCEDURES, THE TOOLBOX, MEETING SCHEDULE, AND PERSONAL PROTECTIVE EQUIPMENT.

THE ORIENTATION FOR _____________________ AND SUB-CONTRACTOR SUPERVISORS ALSO INCLUDES TOOLBOX MEETINGS AND SAFETY MEETINGS, JOB HAZARD ANALYSIS REVIEW, ACCIDENT INVESTIGATION AND REPORTING, PROCEDURES FOR OBTAINING SPECIAL PERMITS, AND COORDINATION OF WORK WITH OTHER CREWS.

TO MAINTAIN EFFECTIVE COMMUNICATION WITH OUR CLIENTS, THE _____________________ SAFETY DIRECTOR COORDINATES WITH THE SUB-CONTRACTOR SAFETY DIRECTOR TO INCORPORATE ALL PROJECT-SPECIFIC INFORMATION INTO OUR PHASE SAFETY PROCESS.

WEEKLY TOOLBOX SAFETY MEETINGS

- LOCATION: _____________________ AND/OR JOB SITE FACILITIES
- TIME: WEEKLY SCHEDULE DETERMINED BY SCOPE OF THE PROJECT
- DURATION: 10-15 MINUTES OR LESS
- LEADER: _____________________ SAFETY DIRECTOR
- PARTICIPANTS: ALL INDIVIDUALS WORKING ON THE PROJECT
- RECORD KEEPING: _____________________ SAFETY DIRECTOR WILL KEEP BRIEF NOTES
- AGENDA: SAFETY ISSUES AFFECTING THE CREW, REVIEW OF PROJECT SAFETY PERFORMANCE, AND SPECIAL TRAINING TOPICS

_____________________ REGULARLY CONDUCTS CLASSES ON FALL PROTECTION, EYE INJURY PREVENTION, HAZARD COMMUNICATION, ELECTRICAL SAFETY, BACK INJURY PREVENTION, RESPIRATORY PROTECTION, ENVIRONMENTAL HEALTH, FIRST AID, AND CPR. CLASSES ADDRESSING THESE TOPICS ARE CONDUCTED AT ___________________. THE COMPANY PERIODICALLY OFFERS SPECIAL TRAINING SESSIONS WHICH ARE CONDUCTED BY OUTSIDE SPECIALISTS. TOPICS FOR THESE SESSIONS ARE SELECTED BY THE SAFETY DIRECTOR. IT IS IMPORTANT TO UNDERSTAND THE IMPORTANCE OF GOOD HOUSEKEEPING AS IT AFFECTS THE SAFETY, QUALITY, AND THE GENERAL ATTITUDE OF THE INDIVIDUALS INVOLVED IN A PROJECT. BECAUSE IT IS THE GOAL OF _____________________ TO MAINTAIN GOOD HOUSEKEEPING THROUGHOUT THE PROJECT, ALL EMPLOYEES AND SUB-CONTRACTORS ARE EXPECTED AND REQUIRED TO HELP MAINTAIN A NEAT AND ORDERLY WORKPLACE THAT IS FREE FROM HAZARDS.
MANDATORY DRUG TESTING IS AN INTEGRAL PART OF THE COMMITMENT TO PROVIDING A SAFE WORK ENVIRONMENT. IT IS OUR GOAL TO EMPHASIZE SAFETY AND TO ENCOURAGE EMPLOYEE HEALTH AND MORALE, BOTH WHICH ULTIMATELY RESULT IN INCREASED PRODUCTIVITY. A SUMMARY OF THE MANDATORY DRUG TESTING PROGRAM FOLLOWS. A COPY OF THE COMPLETE PROGRAM IS AVAILABLE UPON REQUEST.

PRE-EMPLOYMENT TESTING IS MANDATORY FOR ALL PROSPECTIVE EMPLOYEES. APPLICANTS WHO REFUSE TO PARTICIPATE IN THE REQUIRED TESTING WILL NOT BE CONSIDERED.

THE DRUG TESTING PROGRAM MAINTAINS ABSOLUTE CONFIDENTIALITY FOR EMPLOYEES. THE TESTING LABORATORY INDICATES ONLY A POSITIVE OR A NEGATIVE OUTCOME FROM EACH TEST.
III.

EMERGENCY REQUIREMENTS

**ACTIONS TO TAKE WHEN AN INJURY OCCURS ON SITE:**

- Assess the seriousness of the injury.
- Stabilize the condition of the injured person as much as you can.
- Send someone to call for help.
- Have a runner stationed at the entrance to the site and place other runners at key points along the route to guide emergency medical personnel to the proper location.

**WHEN TO CALL FOR EMERGENCY MEDICAL ASSISTANCE:**

- Is unconscious or disoriented.
- Is unable to walk or is trapped in machinery or debris.
- Is bleeding severely from deep cuts or gashes.
- Has sustained head injuries.
- Has sustained crushing injuries.
- Was injured by contact with electricity.
- Has fractures or possible fractures.
- Has dislocated joints or possible dislocations.
- Was injured by chemical releases or accidents.
- Has experienced a fall.
- Has burns other than minor burns, burns on face, or scalding burns.
- Has difficulty breathing or chest pains.
- Responds with intense or unexpected symptoms following a seemingly minor injury.

Note: Be prepared to provide information about the accident or medical condition for the emergency dispatcher or medical emergency personnel.
EMERGENCY REQUIREMENTS
FIRE CONTROL REGULATIONS

FIRE PREVENTION:
SAFETY DIRECTOR IS RESPONSIBLE FOR IMPLEMENTATION AND
ENFORCEMENT OF THE FIRE CONTROL PROGRAM. THIS PROGRAM IS AIMED AT PROTECTING
LIFE AND PROPERTY WHILE MINIMIZING LOSSES. FIRE PROTECTION ACTIVITIES ARE
EMPHASIZED DURING ALL PHASES OF CONSTRUCTION.

HOUSEKEEPING:
• AVOID ACCUMULATION OF FLAMMABLE RUBBISH AND WASTE MATERIALS.
• REMOVE TRASH FROM INSIDE BUILDINGS AND AWAY FROM BUILDINGS DAILY OR
WHENEVER AN ACCUMULATION OF MATERIAL MAY CONSTITUTE A FIRE HAZARD.
• DO NOT, UNDER ANY CIRCUMSTANCES, USE WOOD SAWDUST OR SHAVINGS AS AN
ABSORBENT FOR SPILLED FLAMMABLE LIQUIDS OR PETROLEUM LUBRICANTS.
• BURNING OF RUBBISH IS PROHIBITED.

REFUELING OF EQUIPMENT
• REFUEL ALL GASOLINE-POWERED EQUIPMENT OUTSIDE AND CLEAR OF STRUCTURES,
WITH ENGINES SHUT OFF.
• LOCATE GASOLINE POWERED EQUIPMENT, SUCH AS AIR COMPRESSORS, HOISTS, AND
PUMPS SO EXHAUSTS ARE WELL AWAY FROM COMBUSTIBLE MATERIAL.

HEATING DEVICES
• USE OF OPEN FLAME DEVICES, SOURCES OF HEAT, AND SPARK-PRODUCING EQUIPMENT IS
PROHIBITED IN AREAS CONTAINING FLAMMABLE MATERIALS.
• ALL OPEN FLAME DEVICES AND FURNACES USED IN CONSTRUCTION WORK MUST HAVE
AN ATTENDANT, UNLESS THE DEVICE IS EQUIPPED WITH COMBUSTION SAFETY
CONTROLS.
• REMOVE ALL EMPTY PROPANE, ACETYLENE, OXYGEN, AND BUTANE GAS CYLINDERS
FROM BUILDINGS, MARK AS EMPTY (MT), AND STORE AND SECURE IN AN UPRIGHT
POSITION IN AN APPROVED AREA.

FLAMMABLE LIQUIDS:
• SEGREGATE ALL FLAMMABLE LIQUIDS, CHEMICAL FUELS, RESINS, LUBRICANTS, AND
SOLVENTS BY LABELS AND STORE IN AN APPROVED LOCATION. DO NOT STORE NON-
COMPATIBLE MATERIALS IN THE SAME STORAGE AREA.
• KEEP FLAMMABLE LIQUID CONTAINERS COVERED AT ALL TIMES WHEN NOT IN USE.
• DO NOT STORE FLAMMABLE LIQUIDS IN THE WORK AREA, EXCEPT IN A QUANTITY
NEEDED TO ACCOMPLISH THE JOB.
• DISPOSE OF FLAMMABLE PAINT OR SOLVENT RAGS AND ANY MATERIALS SUBJECT TO
SPONTANEOUS COMBUSTION IN COVERED METAL CONTAINERS.
• STORE ALL FLAMMABLE LIQUIDS IN SAFETY CANS OR APPROVED CONTAINERS.
ELECTRICAL EQUIPMENT:
• THE USE OF FRAYED OR WORN EXTENSION CORDS IS NOT PERMITTED.
• THE OVERLOADING OF EXTENSION CORDS AND ELECTRICAL RECEPTACLES IS NOT PERMITTED,
• PROTECT TEMPORARY WIRING FROM MECHANICAL DAMAGE BY CRANES, SHOVELS, TRUCKS, AND OTHER EQUIPMENT.

COMBUSTIBLE BUILDING MATERIALS:
• STORE COMBUSTIBLE MATERIALS SEPARATE FROM CONSTRUCTION SHACKS OR BUILDINGS.
• SEGREGATE STORAGE OF VARIOUS MATERIALS BY TYPE WITH APPROVED SEPARATION PROVIDED FOR NON-COMPATIBLE MATERIALS.

SMOKING:

• SMOKING IS NOT PERMITTED INSIDE BUILDINGS.
• SMOKING IS ONLY PERMITTED ONLY IN DESIGNATED AREAS OUTSIDE OF BUILDINGS.

EMERGENCY PHONE NUMBERS:
• PROMINENTLY DISPLAY OR POST THE EMERGENCY PHONE NUMBERS NEAR THE TELEPHONE AT THE CONSTRUCTION SITE.
EMERGENCY REQUIREMENTS
INJURY MANAGEMENT

_____________________ PROVIDES FIRST AID, MEDICAL SERVICES, AND ARRANGES FOR EMERGENCY TRANSPORTATION FOR EMPLOYEES WITH ON THE JOB INJURIES OR ILLNESSES. AN INJURED EMPLOYEE MUST REPORT AN INJURY, NO MATTER HOW SLIGHT TO THE SAFETY DIRECTOR OR THEIR SUPERVISOR.

NON-EMERGENCY:
_____________________ WILL TRANSPORT EMPLOYEES WITH NON-EMERGENCY INJURIES TO AND FROM THE MEDICAL FACILITY.

EMERGENCY:
BECAUSE THE EFFICIENT AND THOUGHTFUL HANDLING OF SERIOUSLY INJURED OR ILL EMPLOYEES MINIMIZES CONFUSION AND OFFSETS NEGATIVE REACTIONS THAT CAN FOLLOW A SERIOUS ACCIDENT, IT IS BEST TO CALL 911.

INJURY MANAGEMENT:
AN EMPLOYEE WHO HAS SUSTAINED AN ON-THE-JOB INJURY OR ILLNESS MAY RETURN TO WORK IF A RELEASE FROM THE ATTENDING PHYSICIAN HAS BEEN OBTAINED.

THE SAFETY DIRECTOR IS RESPONSIBLE FOR ENSURING THAT THE APPROPRIATE SAFETY-RELATED REPORTS CONCERNING OCCUPATIONAL INJURIES AND ILLNESSES ARE FILLED OUT, FILED, AND MAINTAINED.

THE FOLLOWING REPORTS AND RECORDS MUST BE FILLED OUT, FILED, AND MAINTAINED:

SUPERVISOR’S REPORT OF ACCIDENT:
THIS IS TO BE COMPLETED FOR ALL INJURIES SUSTAINED BY PEOPLE REQUIRING A PHYSICIAN’S ATTENTION. A COPY OF THE COMPLETED REPORT IS SENT TO ______________________ SAFETY DIRECTOR.

EMPLOYER’S FIRST REPORT OF INJURY:
THIS REPORT IS USED TO ADVISE THE INSURANCE COMPANY OF A WORKERS COMPENSATION CLAIM. THIS FORM MUST BE COMPLETED WITHIN 48 HOURS OF THE INJURY OR ILLNESS REPORT. THE ORIGINAL FORM IS SENT TO ______________________ SAFETY DIRECTOR.

OSHA 300 LOG AND SUMMARY OF OCCUPATIONAL INJURIES AND ILLNESSES:
THIS REPORT MUST BE KEPT CURRENT AND ON FILE. THE FORM MUST BE POSTED YEARLY TO COMPLY WITH OSHA REQUIREMENTS.
ACCIDENT REPORTING AND INVESTIGATION:
Each occupational injury or illness that results in treatment by a physician must be thoroughly investigated and monitored by the ________________ safety director. In addition, certain first aid cases as well as non-injury and near miss incidents with a potential for serious injury must also be investigated.

The purpose of accident investigation is to identify contributing causes so future incidents of similar nature can be prevented. These contributing factors also have a bearing on legal liability issues, investigations should be directed toward fact finding, not fault finding.

The investigation should begin as soon as possible after the necessary notifications have been accomplished. All accident investigation reports are submitted to the ________________ safety director.

CONCLUDING THE INVESTIGATION:
At the conclusion of a major accident investigation, a meeting is held to assure that the causes of the accident have been determined and that proper corrective actions have been initiated. Personnel who must attend this meeting include:
• The ________________ safety director
• The sub-contractor safety director
• The owner representative

INJURY PREVENTION:
If all facts involved in an accident are known, it should not be difficult to determine what actions are necessary to prevent injury to other employees with similar duties or exposure to similar conditions.
IV.

SUB-CONTRACTOR SAFETY REQUIREMENTS

SUB-CONTRACTOR SAFETY DIRECTOR:
EACH SUB-CONTRACTOR SHALL APPOINT A SAFETY DIRECTOR WHO IS DIRECTLY RESPONSIBLE FOR INITIATING AND MAINTAINING A COMPANY SAFETY PROGRAM THAT REQUIRES ITS EMPLOYEES TO WORK IN SAFE, HEALTHY, AND SANITARY CONDITIONS.

PRE-CONSTRUCTION SAFETY MEETING:
PRIOR TO THE START OF CONSTRUCTION ACTIVITIES ON THE PROJECT, A SAFETY MEETING IS HELD WITH EACH SUB-CONTRACTOR’S MANAGEMENT REPRESENTATIVES.

THE _____________________ SAFETY DIRECTOR WILL DISCUSS IN THIS MEETING:
- THE _____________________ POLICY FOR SAFETY AND HEALTH FOR EMPLOYEES.
- SAFETY AND HEALTH REQUIREMENTS THAT MAY BE UNIQUE TO THIS PROJECT.
- HOW AND WHERE TO FIND FIRST AID AND MEDICAL SERVICES.
- THE MONTHLY SAFETY REPORT WHICH INCLUDES ACCIDENT REPORTING AND INVESTIGATION.
- THE MAINTENANCE OF SITE SECURITY.
- THE _____________________ SAFETY MONITORING POLICY FOR SUB-CONTRACTORS.
- OTHER SAFETY RELATED INFORMATION THAT MAY ENHANCE THE SUB-CONTRACTOR’S PERFORMANCE.
- DISCUSSION OF THE _____________________ SAFETY PROGRAM.

MINUTES OF THE MEETING ARE RECORDED AND DISTRIBUTED TO ALL IN ATTENDANCE, WITH ONE COPY GOING INTO THE CONTRACT FILE.

SAFETY MONITORING POLICY:
SAFETY IS A PRIMARY CONSIDERATION IN ALL ASPECTS OF OUR WORK. ABSOLUTE COMPLIANCE AND ACCEPTANCE OF REQUIREMENTS IMPOSED ON THE PERFORMANCE OF WORK ARE REQUIRED TO ACHIEVE HIGH STANDARDS OF SAFETY FOR HUMAN LIFE AND PROPERTY. ALL OWNERS, GENERAL CONTRACTORS, AND SUB-CONTRACTORS, TO INCLUDED OTHER PERSONNEL, MUST BEAR THEIR SHARE OF RESPONSIBILITY IN MEETING THIS GOAL. ALL WORK MUST BE PERFORMED IN SUCH A MANNER AS TO PRECLUDE OR MINIMIZE BODILY INJURY OR DAMAGE TO PROPERTY.

THE _____________________ SAFETY DIRECTOR WILL MONITOR THE SAFETY PRACTICES INVOLVED IN EACH SUB-CONTRACTOR’S FIELD ACTIVITIES. IN THE EVENT OF AN APPARENT VIOLATION OR DEVIATION FROM AN ACCEPTED SAFETY STANDARD, THE SAFETY DIRECTOR WILL CALL THIS TO THE SUB-CONTRACTOR’S ATTENTION AND CORRECTIVE ACTION WILL BE REQUIRED. SUB-CONTRACTORS ARE REQUIRED TO CONFIRM ABATEMENT OF CITED SAFETY VIOLATIONS IN WRITING TO THE _____________________ SAFETY DIRECTOR.
SUB-CONTRACTOR SAFETY REQUIREMENTS

SECTION 1

JOB SPECIFIC SAFETY PLAN

A. **ON SITE/OFF SITE SAFETY REPRESENTATIVE**
   PROVIDE THE NAMES OF YOUR DESIGNATED ON SITE AND OFF SITE SAFETY REPRESENTATIVES.

B. **SAFETY ORIENTATION**
   1. REVIEW WITH ALL NEWLY HIRED EMPLOYEES THE JOB SPECIFIC SAFETY REQUIREMENTS.
   2. REVIEW WITH EMPLOYEES PRACTICES NECESSARY TO PERFORM THE INITIAL JOB ASSIGNMENTS IN A SAFE MANNER.
   3. PROVIDE COMPANY POLICY FOR ALCOHOL OR DRUG IMPAIRMENT ON THE JOB.
   4. INFORM EMPLOYEES ON MINIMUM DRESS REQUIREMENTS, LONG PANTS, TEE SHIRT, PROPER FOOTWEAR, HARD HATS, AND SAFETY GLASSES.

C. **SAFETY TRAINING**
   1. PROVIDE COMPANY POLICY ON THE USE AND CARE OF PERSONAL PROTECTIVE EQUIPMENT.
   2. PROVIDE COMPANY POLICY FOR THE SAFE WORK OPERATION AND PROCEDURES FOR EQUIPMENT AND VEHICULAR TRAFFIC CONTROL.
   3. PROVIDE COMPANY POLICY ON TRAINING FOR SAFE MATERIAL HANDLING.
   4. PROVIDE COMPANY POLICY ON TRAINING FOR FALL PROTECTION EQUIPMENT AND ITS PROPER USE.
   5. PROVIDE COMPANY POLICY ON TRAINING FOR HAZARD COMMUNICATION.
   6. PROVIDE COMPANY POLICY ON TRAINING FOR ASSURED GROUNDING PROGRAM.

D. **EMPLOYEE ACCIDENT/INCIDENT REPORTING**
   1. PROVIDE COMPANY POLICY REQUIREMENTS FOR REPORTING UNSAFE CONDITIONS AND PRACTICES.
   2. PROVIDE COMPANY POLICY THAT EXPLAINS THE REPORTING REQUIREMENTS FOR ALL INCIDENTS, ACCIDENTS, AND INJURIES.
   3. PROVIDE COMPANY POLICY THAT EXPLAINS THE LOCATION OF FIRST AID FACILITIES.
   4. PROVIDE COMPANY POLICY ON THE ACTIONS TO TAKE IN EMERGENCIES, INCLUDING EXIT ROUTES DURING EMERGENCIES.

E. **DESIGNATED OPERATOR POLICY AND DAILY INSPECTION PROGRAM**
   PROVIDE COMPANY DESIGNATED OPERATOR POLICY AND DAILY EQUIPMENT INSPECTION PROGRAM.

F. **FIRE PROTECTION PROGRAM**
   1. PROVIDE COMPANY POLICY ON FIRE PROTECTION.
   2. PROVIDE COMPANY POLICY ON DAILY SITE CLEANING REQUIREMENTS.
   3. PROVIDE COMPANY POLICY ON THE STORAGE AND DISPENSING OF FLAMMABLE LIQUIDS.
   4. PROVIDE PROPOSED SITE FOR THE STORAGE AND DISPENSING OF FLAMMABLE LIQUIDS.
G. **INSPECTION OF POWER AND HAND TOOLS**
   PROVIDE COMPANY POLICY FOR INSPECTION OF POWER AND HAND TOOLS.

H. **LOCKOUT AND TAG PROCEDURE**
   PROVIDE COMPANY LOCKOUT AND TAG POLICY.

I. **RESPIRATORY PROTECTION PROGRAM**
   PROVIDE COMPANY RESPIRATORY PROTECTION PROGRAM.

J. **CONFINED SPACE ENTRY**
   PROVIDE COMPANY CONFINED SPACE ENTRY PROCEDURES AND REGULATIONS.

K. **FALL PROTECTION PROGRAM**
   1. PROVIDE COMPANY FALL PROTECTION POLICY.
   2. PROVIDE FALL PROTECTION WORK PLAN.

L. **LADDER SAFETY PROGRAM**
   PROVIDE COMPANY POLICY FOR INSPECTION AND USE OF LADDERS.
SUB-CONTRACTOR SAFETY REQUIREMENTS
SECTION 2

JOB SPECIFIC SAFETY PLAN SUBMITTALS

A. **WEEKLY SAFETY MEETINGS**
   1. ATTENDANCE AT ___________________ SAFETY MEETINGS IS MANDATORY. IF YOU CHOOSE TO HOLD YOUR OWN SAFETY MEETING, A REPRESENTATIVE IS REQUIRED TO ATTEND EACH ___________________ SAFETY MEETING AS WELL.
   2. IF YOU HOLD YOUR OWN SAFETY MEETING, YOU MUST SUBMIT A COPY OF THE MEETING

B. **SITE SAFETY INSPECTIONS**
   1. ONCE EACH WEEK, YOUR DESIGNATED SAFETY DIRECTOR MUST DO A WALK-THROUGH SAFETY INSPECTION WITH THE ___________________ SAFETY DIRECTOR (IN THE CASE OF A LARGE PROJECT, SUBCONTRACTORS SHOULD BRING ONE EMPLOYEE REPRESENTATIVE), LOOKING FOR HAZARDOUS CONDITIONS, STATE COMPLIANCE, AND COMPLIANCE WITH JOB SPECIFIC SAFETY RULES AND REGULATIONS. IF HAZARDS OR LACK OF COMPLIANCE EXIST, CORRECTIVE ACTION IS ADDRESSED AND ABATEMENT TIME ESTABLISHED.
   2. A WRITTEN REPORT, SIGNED BY THE SUB-CONTRACTOR SAFETY DIRECTOR MUST BE SUBMITTED ON OR BEFORE THE ABATEMENT DUE DATE.

C. **ACCIDENT/INCIDENT REPORTING**
   1. THE SUB-CONTRACTOR’S SAFETY REPRESENTATIVE MUST SUBMIT A COPY OF THE FIRST REPORT OF INJURY TO THE ___________________ SAFETY DIRECTOR IMMEDIATELY FOLLOWING THE REPORT OF INJURY.
   2. THE SUB-CONTRACTOR’S SAFETY DIRECTOR MUST SUBMIT A COPY OF ALL ACCIDENT INVESTIGATION REPORTS TO THE ___________________ SAFETY DIRECTOR.
   3. THE SUB-CONTRACTOR’S SAFETY REPRESENTATIVE MUST INVESTIGATE AND SUBMIT TO ___________________ A COMPLETE AND DETAILED REPORT OF ANY AND ALL ACCIDENTS OR INCIDENTS (NON-EMPLOYEES, MATERIAL DAMAGE, THEFT, VANDALISM) OR ANY OCCURRENCE THAT DISRUPTS THE ORDERLY PROCESS OF PERFORMING WORK.

D. **MATERIAL SAFETY DATA SHEETS**
   1. PROVIDE A COPY OF ALL MATERIAL SAFETY DATA SHEETS (MSDS’S) TO THE ___________________ SAFETY DIRECTOR BEFORE THE HAZARDOUS SUBSTANCE ARRIVES ONSITE,

E. **ASSURED GROUNDING QUARTERLY LOG**
   1. PROVIDE EACH QUARTER’S ASSURED GROUNDING LOG TO THE ___________________ SAFETY DIRECTOR

F. **FALL PROTECTION PROGRAM**
   1. PROVIDE A COPY OF YOUR COMPANY’S SITE SPECIFIC FALL PROTECTION PROGRAM TO THE ___________________ SAFETY DIRECTOR.
SUB-CONTRACTORS SAFETY QUESTIONNAIRE

SUBCONTRACTOR:__________________________________________

PROJECT:________________________________________________

DATE:___________________________________________________

1. LIST YOUR FIRM’S WORKER’S INTERSTATE EXPERIENCE MODIFICATION RATE FOR THE THREE MOST RECENT YEARS.

2. DO YOU CONDUCT PROJECT INSPECTIONS AT LEAST WEEKLY?

3. PLEASE LIST SAFETY RESPONSIBLE PERSONS AND EXPERIENCE:

4. DO YOU HAVE A WRITTEN ACCIDENT PREVENTION SAFETY PROGRAM?

5. DO YOU MAINTAIN A WRITTEN SITE SPECIFIC SAFETY PLAN?

6. DO YOU HAVE A SAFETY ORIENTATION PROGRAM FOR NEW HIRES?

7. DO YOU CONDUCT, DOCUMENT, AND MAINTAIN ATTENDANCE RECORDS OF CRAFT WEEKLY "TOOLBOX" SAFETY MEETINGS?

8. DO YOU USE SUB-TIER SUB-CONTRACTORS IN THE PERFORMANCE OF YOUR WORK?

9. DO YOUR SUB-TIER SUB-CONTRACTORS HAVE WRITTEN ACCIDENT PREVENTION SAFETY PROGRAM?

10. DO YOUR SUB-TIER SUB-CONTRACTORS MAINTAIN WRITTEN SITE SPECIFIC SAFETY PLANS COVERING THEIR WORK?

11. DO YOU MAINTAIN COPIES OF YOUR SUB-TIER SUB-CONTRACTORS’ SITE SPECIFIC SAFETY PLANS?

12. DO YOU REQUIRE YOUR SUB-TIER SUB-CONTRACTORS TO ATTEND WEEKLY TOOLBOX SAFETY MEETING MINUTES?

13. DO YOU REVIEW AND MONITOR YOUR SUB-TIER SUBCONTRACTORS’ WEEKLY TOOLBOX SAFETY MEETING MINUTES?

14. DESCRIBE YOUR DISCIPLINARY ACTION PROCEDURES WHEN YOU DETECT A DEFICIENCY IN YOUR OR YOUR SUB-TIER SUB-CONTRACTOR’S SAFETY PERFORMANCE.

15. NAME, TITLE, AND PHONE NUMBER OF PERSON COMPLETING THIS FORM.
16. PLEASE PROVIDE ONE COPY EACH OF YOUR AND YOUR SUB-TIER SUB-CONTRACTORS’ SITE SPECIFIC SAFETY PLANS. IF ADDITIONAL OR REVISED PLANS ARE PREPARED, PLEASE FORWARD THEM TO _____________________ UPON RECEIPT.

COMPANY: _______________________

BY: ___________________________

DATE: _________________________
## V. JOB HAZARD ANALYSIS
### SUB-CONTRACTOR GUIDELINES

**JOB PHASE:**

**PROJECT:**

**CONTRACTOR:**

**LOCATION:**

**CONTRACTOR NUMBER:**

**ESTIMATED START:**

**DATE:**

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<tr>
<th>OPERATION</th>
<th>HAZARD</th>
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VI.

SAFETY INSPECTION CHECKLIST

PROJECT: ________________________________  DATE: ______________

PERSON MAKING INSPECTION: ____________________________________________

NOTE: TO COMPLY WITH WAC 296-155-110 9(A) & (B) PLEASE FILE THIS REPORT WITH THE WEEKLY AUDIT CHECKLIST AT THE JOB SITE FOR LATER REFERENCE.

SUMMARY: ________________________________

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SAFETY INSPECTION

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CHECKLIST

1. **PROJECT ADMINISTRATION**
   - POSTING REQUIRED POSTERS/SIGNS?
   - DOES THE JOB HAVE SAFETY MEETINGS, BOTH GENERAL AND TOOLBOX?
   - ARE EMPLOYEES INSTRUCTED IN THE HAZARDS OF THEIR JOBS AND THE BASIC SAFETY REGULATIONS?
   - ARE EMPLOYEES MADE AWARE OF THE SPECIFIC REQUIREMENTS FOR HEALTH PROTECTION AND FIRE PROTECTION?
   - IS OUR QUALITY PROGRAM IN PLACE?
   - IS OUR INCENTIVE PROGRAM IN PLACE?
   - IS OUR FALL PROTECTION WORK PLAN IN PLACE? HAVE OUR EMPLOYEES BEEN INSTRUCTED IN ITS APPLICATION? HAVE THEY SIGNED OFF ON THE PLAN? ARE THE HAZARDS REPORTED ON THE PLAN CURRENT WITH THE WORK PRESENTLY BEING PERFORMED?
   - ARE THE SUB-CONTRACTORS BEING ISSUED THE SAFETY REQUIREMENTS?
   - ARE DRUG AND ALCOHOL TESTING PROCEDURES ESTABLISHED TO TEST OUR EMPLOYEES? SUB-CONTRACT EMPLOYEES?
   - ARE THE ___________________ HAZCOM MANUALS ON SITE?
   - ARE THE MSDS’S CURRENT FOR THE PRODUCTS ON SITE?
   - ARE FIELD SUPERVISORS AND CRAFTSMEN PARTICIPATING IN HAZCOM TRAINING?
   - ARE SUB-CONTRACTORS’ MSDS’S CURRENT FOR THEIR PRODUCTS ONSITE?
   - ARE MSDS’S BEING SHARED WITH OUR EMPLOYEES BEFORE THE PRODUCTS ARE USED? IS THIS DOCUMENTED?

2. **FIRST AID AND MEDICAL ATTENTION**
   - ARE EMPLOYEES INSTRUCTED IN OUR BLOODBORNE PATHOGEN PROGRAM? IS THIS DOCUMENTED? IS THE PROGRAM POSTED?
   - ARE THE NECESSARY OSHA RECORDS AND LOGS BEING MAINTAINED?
   - HAVE OUTSIDE EMERGENCY PROCEDURES BEEN ORGANIZED, SUCH AS DESIGNATED PHYSICIAN, HOSPITAL AND AMBULANCE SERVICES?
   - ARE EMERGENCY PHONE NUMBERS POSTED?
   - IS THE FIRST AID FACILITY ONSITE ADEQUATE?
   - ARE FIRST AID KITS AND STRETCHERS PROVIDED AND PROPERLY MAINTAINED? ARE RUBBER GLOVES AND CPR BARRIERS PROVIDED IN THE FIRST AID FACILITY AND KITS?
   - DO CREW LEADERS/SUPERVISORS IN CHARGE OF TWO OR MORE PEOPLE HAVE A VALID FIRST AID CARD?

3. **HOUSEKEEPING**
   - IS THE SITE ORDERLY IN GENERAL?
   - ARE PASSAGEWAYS, WALKWAYS, AND AREAS ADJACENT TO STRUCTURES CLEAR?
   - ARE CONTAINERS PROVIDED FOR WASTE MATERIAL, RAGS, AND COMBUSTIBLES WITH COVERS SUPPLIED AS NEEDED?
   - HAS SCRAP LUMBER BEEN PILED NEATLY WITH NAILS REMOVED?
   - DO YOU REGULARLY REMOVE AND DISPOSE OF WASTE AND TRASH?
4. **SANITATION**
   ARE THE REQUIRED FACILITIES ADEQUATE AND CLEAN?
   HAVE YOU PROVIDED AN ADEQUATE SUPPLY OF TESTED DRINKING WATER?
   IS THIS DISPENSED FROM APPROVED CONTAINERS? ARE SANITARY CUPS PROVIDED?
   ARE OUTLETS OF POTABLE AND NON-POTABLE WATER LABELED FOR INTENDED USE?

5. **PERSONAL PROTECTIVE EQUIPMENT**
   ARE APPROVED HARD HATS WORN BY ALL PERSONNEL?
   ARE EYE AND FACE PROTECTION PROVIDED WITH USE ENFORCED WHEN OPERATIONS
   CREATE RECOGNIZED HAZARDS?
   IS HEARING PROTECTION PROVIDED WHEN ACCEPTED NOISE LEVELS ARE EXCEEDED?
   ARE GLOVES, APRONS, AND SLEEVE PROVIDED FOR PROTECTION FROM CAUSTICS,
   ACIDS, ALKALIS, AND WELDING AND BURNING OPERATIONS?
   ARE RESPIRATORS PROVIDED FOR HARMFUL DUSTS, MISTS, VAPORS, AND OTHER
   AIRBORNE HAZARDS?
   HAVE YOU PROVIDED ADEQUATE VENTILATION WHEN NEEDED?
   ARE LANYARDS, LIFELINES, AND SAFETY NETS PROVIDED AS REQUIRED?
   IS ALL EQUIPMENT INSPECTED REGULARLY AND MAINTAINED IN A SAFE AND
   SANITARY CONDITION? IS THIS DOCUMENTED?

6. **FIRE PREVENTION**
   HAS A FIRE PROTECTION PROGRAM BEEN ESTABLISHED FOR ALL PHASES OF
   CONSTRUCTION?
   IS THE NECESSARY FIRE FIGHTING EQUIPMENT PROVIDED AND PROPERLY
   MAINTAINED? IF IT PROPERLY MARKED AS TO LOCATION?
   DOES THE JOB HAVE A PROPERLY TRAINED AND EQUIPPED FIRE BRIGADE?
   IS ACCESS TO HYDRANTS, EXTINGUISHERS, AND THOROUGHFARES KEPT OPEN?
   ARE THERE AN ESTABLISHED ALARM SYSTEM AND EMERGENCY PROCEDURES? DO
   YOU HOLD DRILLS?
   ARE NO SMOKING AREAS POSTED AND ENFORCED WHERE NEEDED?
   ARE ALL COMBUSTIBLE OR FLAMMABLE MATERIAL STORED, DISPENSES, AND USED
   PROPERLY?
   ARE EMERGENCY TELEPHONE NUMBERS POSTED?

7. **SIGNS AND SIGNALS**
   ARE HAZARD WARNING SIGNS PROPERLY POSTED AND VISIBLE?
   IS THE CONSTRUCTION AREA POSTED WITH LEGIBLE TRAFFIC SIGNS?
   ARE LOCKOUT TAGS USED?
   ARE FLAG MEN OR APPROPRIATE TRAFFIC CONTROLS PROVIDED WHEN REQUIRED?

8. **HANDLING AND STORAGE OF MATERIALS**
   IS ALL MATERIAL STACKED, RACKED, BLOCKED OR OTHERWISE SECURED?
ARE THE MAXIMUM SAFE LOAD LIMITS OF FLOORS AND MEZZANINES POSTED AND OBSERVED?
ARE AISLES AND PASSAGeways IN STORAGE AREAS KEPT CLEAR AND MARKED?
ARE EMPLOYEES LIFTING CORRECTLY?
IS THERE AN ADEQUATE NUMBER OF MEN FOR EACH OPERATION?
ARE MATERIALS PROTECTED FROM CONSTRUCTION ACTIVITIES AND WEATHER?
IS FIRE PROTECTION ADEQUATE?
IS ALL RIGGING EQUIPMENT PROPERLY USED AND INSPECTED?
IS THE SAFE WORKING LOAD CLEARLY MARKED ON ALL SLINGS, CHOKERS, AND CHAINS?
IS A RECORD MAINTAINED OF ALL TESTS PERFORMED ON ALL MATERIAL HANDLING EQUIPMENT?

9. **POWER AND HAND TOOLS**
ARE THE PROPER TOOLS BEING USED FOR THE JOB?
IS GOOD HOUSEKEEPING MAINTAINED WHERE TOOLS ARE USED?
ARE SAFE STORAGE AND CARRYING PRACTICES OBSERVED?
ARE TOOLS PROPERLY INSPECTED AND MAINTAINED. IS THIS RECORDED?
ARE TOOLS AND CORDS IN GOOD CONDITION?
ARE TOOLS PROPERLY GROUNDED?
HAVE EMPLOYEES BEEN INSTRUCTED IN THE USE OF THE TOOLS?
ARE MECHANICAL SAFEGUARDS IN PLACE AND IN USE?
IS WIRING PROPERLY INSTALLED?

10. **POWDER-ACTUATED TOOLS**
HAVE YOU COMPLIED WITH LOCAL LAWS AND ORDINANCES?
ARE ALL OPERATORS QUALIFIED?
ARE TOOLS AND CHARGES PROTECTED FROM UNAUTHORIZED USE?
DO YOUR EMPLOYEES RECEIVE COMPETENT INSTRUCTION AND SUPERVISION?
ARE TOOLS CHECKED AND IN GOOD WORKING ORDER?
ARE TOOLS USED ONLY ON APPROVED MATERIALS?
HAVE YOU CHECKED FOR FLYING HAZARDS?
ARE EMPLOYEES USING SAFETY GOGGLES OR FACE SHIELDS?

11. **WELDING AND CUTTING**
ARE OPERATORS QUALIFIED?
IS EQUIPMENT IN GOOD OPERATING CONDITION?
IS ELECTRICAL EQUIPMENT GROUNDED?
ARE POWER CABLES PROTECTED AND IN GOOD REPAIR?
ARE WELDING SCREENS OR SHIELDS BEING USED?
HAVE GOGGLES, GLASSES, AND GLOVES BEEN PROVIDED?
IS COMBUSTIBLE MATERIAL PROTECTED?
ARE GAS CYLINDERS UPRIGHT?
ARE CYLINDER PROTECTION CAPS USED?
ARE FIRE EXTINGUISHERS OF THE PROPER TYPE AND SIZE NEARBY?
ARE WELDING LEAD AND BURNING HOSE PLACED TO AVOID TRIPPING HAZARDS?

12. **ELECTRICAL**
DOES ALL ELECTRICAL EQUIPMENT COMPLY WITH LOCAL STATE AND OSHA REQUIREMENTS.
IS THE Wiring ADEQUATE AND WELL INSULATED WITH NO FRAYING?
ARE TERMINAL BOXES EQUIPPED WITH COVERS?
ARE POWER SOURCES LABELED FOR THE AREAS THEY SERVE?
ARE ELECTRICAL HAZARDS POSTED? ARE DANGER TAGS IN USE?
HAVE FIRE HAZARDS BEEN CHECKED AN PROPER FIRE EXTINGUISHER PROVIDED?
HAS TEMPORARY WIRING BEEN SUSPENDED BY NO-CONDUCTORS AND DOES IT AVOID BEING A TRIPPING HAZARD?
IS THE GFI OR ASSURED GROUNDING ELECTRICAL SAFETY PROGRAM CURRENT AND DOCUMENTED?

13. **LADDERS**
ARE LADDERS PROVIDED FOR ACCESS TO ALL ELEVATORS WHERE NO OTHER MEANS IS PROVIDED?
ARE LADDERS REGULARLY INSPECTED AND IN GOOD CONDITION?
ARE LADDERS SECURED TO PREVENT SLIPPING, FALLING, AND SLIDING?
DO THE SIDE RAILS EXTEND 36 INCHES ABOVE THE TOP OF THE LANDING?
ARE THE RUNGS OR CLEATS NOT OVER 12 INCHES ON CENTER?
ARE STEPLADDERS FULLY OPENED WHEN IN USE?
HAVE YOU MADE SURE METAL LADDERS ARE NOT USE AROUND ELECTRICAL HAZARDS?
ARE ALL STRAIGHT LADDERS PROVIDED WITH SAFETY SHOES?

14. **MOTOR VEHICLES**
ARE YOUR DRIVERS QUALIFIED?
DO YOU HAVE REGULAR INSPECTIONS AND MAINTENANCE? IS A LOG KEPT?
IS ALL GLASS IN GOOD CONDITION, BACK-UP SIGNALS OPERATIVE, AND HAVE SEAT BELTS AND FIRE EXTINGUISHERS BEEN PROVIDED?
ARE PERSONNEL SEATED AND CARRIED IN A SAFE MANNER?
IS ALL MATERIAL SECURED AGAINST ACCIDENTAL DISPLACEMENT?
ARE WEIGHT LIMITS AND LOAD SIZES CONTROLLED?
ARE BACK-UP ALARMS PROVIDED AND FUNCTIONING PROPERLY?

15. **GARAGES AND REPAIR SHOPS**
ARE ALL FUELS AND LUBRICANTS STORED AND USED BY APPROVED MEANS?
ARE ELECTRICAL TOOLS PROPERLY GROUNDED?
ARE FUELS AND LUBRICANTS PROPERLY DISPENSED?
DO YOU PRACTICE GOOD HOUSEKEEPING AND CONTROL FIRE HAZARDS?
ARE HAND TOOLS IN GOOD CONDITION?

16. **CONFINED SPACE**
ARE THERE CONFINED SPACES? ARE THEY IDENTIFIED?
IS THE AIR QUALITY BEING MONITORED? IS THIS BEING DOCUMENTED?
ARE THE AIR MONITORS CALIBRATED? IS THIS DOCUMENTED?
ARE CONFINED SPACE PERMITS BEING USED? ARE THESE DOCUMENTED?

17. **DEMOLITION**
ARE ALL OPERATIONS PLANNED AHEAD?
IS SHORING REQUIRED? HAVE ADJACENT BUILDINGS BEEN PROTECTED?
ARE MATERIAL CHUTES USED PROPERLY?
ARE THERE ADEQUATE ACCESS LADDERS OR STAIRS?
IS THERE CLEAR OPERATING SPACE FOR VEHICLES?
IS THE PROTECTION FOR OTHER BUILDING OR PERSONNEL ADEQUATE?
IS THERE ADEQUATE FIRE PROTECTION?

18. **HAZARDOUS MATERIAL STORAGE, DISPENSING, DISPOSAL, AND SPILL CONTAINMENT**

- ARE ALL CONTAINER AND STORAGE AREAS PROPERLY IDENTIFIED?
- HAVE WARNING SIGNS BEEN PLACED WHERE REQUIRED?
- HAVE PROPER STORAGE PRACTICES BEEN OBSERVED?
- HAVE ALL 55 GALLON DRUMS BEEN PLACED ON PALLETs?
- IS THERE PROPER PROTECTION FROM FIRE HAZARDS?
- IS THE CORRECT SIZE AND TYPE FIRE EXTINGUISHER ON SITE?
- HAVE DRIP PANS BEEN PLACED UNDER DRUMS FOR CONTAINMENT?
- IS THE PROPER PERSONAL PROTECTIVE EQUIPMENT BEING USED?
- ARE DRUMS PROTECTED FROM RAIN ACCUMULATION?
- ARE STORAGE AREAS REGULARLY INSPECTED? IS THIS DOCUMENTED?
- ARE LIQUIDS PUMPED FROM THE DRUMS?
VII
FALL PROTECTION WORK PLAN
INTRODUCTION

ALL _____________________ PROJECTS USE FALL PROTECTION WORK PLANS. ALTHOUGH THE KIND OF FALL PROTECTION WORK PLAN THAT ENCOMPASSES THE ENTIRE PROJECT EFFECTIVELY MEETS REGULATORY REQUIREMENTS, THE WIDE RANGE OF ACTIVITIES ON A PROJECT CAN NECESSITATE FREQUENT REWRITING OF THE PLAN. FOR THIS REASON, THE ATTACHED FALL PROTECTION WORK PLAN WAS DESIGNED FOR USE BY THE FOREMAN AND CREWS AS THEY PRE-PLAN THEIR WORK ASSIGNMENTS.

BECAUSE THE FOREMAN AND CREWS ARE THE MOST KNOWLEDGEABLE ABOUT THE WORK TO BE PERFORMED AND THE ASSOCIATED HAZARDS, _____________________ REQUIRES THEM TO DEVELOP AN ACTIVITY SPECIFIC FALL PROTECTION WORK PLAN FOR EACH ACTIVITY THAT EXPOSES WORKERS TO POTENTIAL FALLS OF SIX (6) OR MORE FEET. HAVING WORKERS DIRECTLY INVOLVED IN THE PREPARATION OF THE PLAN RESULTS IN INCREASED COOPERATION AND COMPLIANCE ON THE PROJECT.

AFTER THE FALL PROTECTION WORK PLANS HAVE BEEN COMPLETED, THEY ARE REVIEWED BY THE PROJECT SUPERINTENDENT FOR ACCURACY AND WORKABILITY AND ARE MODIFIED IF NECESSARY. THEY ARE THEN POSTED FOR FUTURE REFERENCE.
FALL PROTECTION WORK PLAN
ACTIVITY SPECIFIC

JOB NAME: 
TRADE OR SUB: 

REPORT PREPARED BY: 
DATE: 

1. SPECIFIC WORK AREA: 

2. ACTIVITIES: 

3. IDENTIFY HAZARDS IN THE WORK AREA: 

4. METHODS OF FALL RESTRAINT TO BE USED: 

5. DESCRIBE PROCEDURES FOR HANDLING AND SECURING TOOLS AND EQUIPMENT, AND FOR PROVIDING OVERHEAD PROTECTION FOR WORKERS: 

6. DESCRIBE METHOD FOR PROMPT, SAFE REMOVAL FOR INJURED WORKERS: 

7. THIS SPACE IS PROVIDED FOR STICK FIGURE DRAWING OF SYSTEM CONFIGURATION: 

I CERTIFY THAT I HAVE RECEIVED FALL PROTECTION ORIENTATION INCLUDING THE MATERIAL COVERED IN THIS PLAN.

BY: ____________________________ COMPANY: ____________________________ 
DATE: ____________________________ 

VII. 
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FALL PROTECTION WORK PLAN
OVERVIEW MAINTENANCE AND INSPECTION PROCEDURES

**DAILY INSPECTIONS:**

REQUIRES A VISUAL INSPECTION OF ALL SAFETY EQUIPMENT DAILY
OR BEFORE EACH USE. DEFECTIVE EQUIPMENT IS TAGGED AND REMOVED FROM USE
IMMEDIATELY. THE MANUFACTURERS’ RECOMMENDATION FOR MAINTENANCE AND
INSPECTION AND FOR ASSEMBLY AND DISASSEMBLY OF EQUIPMENT MUST BE FOLLOWED.

**OVERHEAD PROTECTION:**

HARD HATS ARE REQUIRED WHEN THERE IS DANGER OF FALLING OBJECTS, OR WORKMEN
ABOVE. WARNING SIGNS, BARRICADES, AND WARNING TAPE MUST BE POSTED TO CAUTION
WORKERS OF EXISTING HAZARDS WHEN THESE ARE PRESENT. ALL FLOOR OPENINGS MUST
BE COVERED WITH WOOD OR METAL. IN SOME CASES, DEBRIS NETS OR COVERED
WALKWAYS MAY BE USED IF A HAZARD WARRANTS ADDITIONAL PROTECTION.

**TOOLS AND MATERIALS:**

EQUIPMENT IS STORED IN THE TOOL ROOM OR JOB SHACK UNDER LOCK AND KEY EACH
NIGHT AND IS DISTRIBUTED DAILY. ALL POWER TOOLS AND CORDS ARE UNPLUGGED AND
LOCKED UP AT NIGHT. ALL MATERIALS ARE STORED IN A NEAT AND ORDERLY MANNER TO
AVOID CAUSING A HAZARD BY BLOCKING ACCESS AND EGRESS ROUTES. ALL MATERIALS
MUST BE SECURED TO RESTRICT MOBILITY SHOULD ADVERSE WEATHER CONDITIONS
OCCUR.

**REMOVAL OF AN INJURED WORKER:**

FIRST AID PROCEDURES SHOULD BE PERFORMED AS THE SITUATION REQUIRES. IF THE AREA
IS SAFE FOR ENTRY, THE FIRST AID SHOULD BE DONE BY A FOREMAN OR OTHER CERTIFIED
INDIVIDUAL.

**DIAL 911 FOR EMERGENCY SERVICES**

TELEPHONE LOCATION: ____________________________
FIRST AID KIT LOCATION: __________________________
ELEVATOR LOCATION: ____________________________
ADDITIONAL FALL HAZARDS: _______________________

**TRAINING AND INSTRUCTION PROGRAM:**

ALL NEW EMPLOYEES ARE GIVEN INSTRUCTIONS ON THE PROPER USE OF FALL PROTECTION
DEVICES BEFORE THEY BEGIN WORK AND MUST SIGN A FORM STATING THAT THEY HAVE
RECEIVED THIS TRAINING. THIS FORM THEN BECOMES A PART OF THE EMPLOYEE’S
PERSONNEL FILE.

THE FALL PROTECTION PROGRAM IS REVIEWED BEFORE WORK BEGINS ON THE JOB SITE.
THE FALL PROTECTION EQUIPMENT USE IS REVIEWED REGULARLY AT THE WEEKLY SAFETY
MEETING.
EMPLOYEE SAFETY DEPENDS ON THE PROPER ERECTION AND SAFE USE OF SCAFFOLDING. KNOW HOW TO INSPECT A SCAFFOLD FOR PROPER ERECTION. THE FOLLOWING ITEMS SHOULD BE VISUALLY CHECKED PRIOR TO WORKING FROM SCAFFOLDING ON A DAILY BASIS.

1. HAVE PERSONNEL BEEN INSTRUCTED IN THE SAFE USE OF THIS EQUIPMENT?
2. IS THE FOOTING OF THE SCAFFOLDING SOUND AND RIGID, CAPABLE OF SUPPORTING THE NECESSARY WEIGHT?
3. DID COMPETENT PERSONS ERECT, DISMANTLE, OR MOVE THE SCAFFOLD?
4. ARE THE SCAFFOLD AND ITS COMPONENTS CAPABLE OF SUPPORTING AT LEAST 4 TIMES THE INTENDED LOAD?
5. ARE GUARDRAILS 2”X4” (OR EQUIVALENT), 42” HIGH TOP-RAIL, AND 21” HIGH MID-RAIL, WITH SUPPORTS NOT EXCEED 8”?
6. WERE WEAKENED OR DAMAGED SCAFFOLD COMPONENTS IMMEDIATELY REPAIRED OR REPLACED?
7. IS THE MAXIMUM SPAN FOR 2”X12” PLANKS 8 FEET.
8. ARE ALL PLANKING OR PLATFORMS OVERLAPPED BY A MINIMUM OF 12”, AND SECURED FROM MOVEMENT?
9. IS THERE AN ACCESS LADDER OR OTHER SAFE ACCESS?
10. DO THE SCAFFOLD PLANKS EXTEND OVER THEIR END SUPPORT AT LEAST 6” BY NO MORE THAN 12”?
11. IS THERE OVERHEAD PROTECTION PROVIDED ON A SCAFFOLD EXPOSED TO OVERHEAD HAZARDS?
12. IS THE WIRE OR WIRE ROPE USED FOR SCAFFOLD SUSPENSIONS CAPABLE OF SUPPORTING SIX TIMES THE INTENDED LOAD?
13. ARE HANDRAILS, MID-RAILS, AND TOE BOARDS INSTALLED ON ALL OPEN SIDES AN ENDS OF PLATFORMS, MORE THAN 10 FEET ABOVE THE GROUND OR FLOOR?
14. ARE THE NAILS USED IN CONSTRUCTION OF THE SCAFFOLD NOT DOUBLE-HEADED AND ARE THEY DRIVEN FULL LENGTH INTO THE WOOD?
15. ARE THE POLES, LEGS, AND UPRIGHTS OF THE SCAFFOLD PLUMB AND RIGIDLY BRACED TO PREVENT SWAYING DISPLACEMENT?
16. IS THE SCAFFOLD PROPERLY BRACED BY CROSS-BRACING OR DIAGONAL BRACES, OR BOTH, FOR SECURING VERTICAL MEMBERS TOGETHER?
17. WHERE UPLIFT MAY OCCUR, ARE VERTICAL MEMBERS LOCKED TOGETHER BY PINS OR OTHER EQUIVALENT SUITABLE MEANS?
18. IS THE SCAFFOLD SECURELY GUYYED OR TIED TO A BUILDING OR STRUCTURE WHEN THE HEIGHT EXCEEDS FOUR TIMES ITS MINIMUM BASE DIMENSION?
19. ARE SILLS PROPERLY PLACED AND OF ADEQUATE SIZE? (12”X12” MINIMUM)
20. HAVE SCREW JACKS BEEN USED TO LEVEL AND PLUMB SCAFFOLD INSTEAD OF UNSTABLE OBJECTS, SUCH AS CONCRETE BLOCKS OR LOOSE BRICKS.
21. ARE BASE PLATES AND SCREW JACKS IN FIRM CONTACT WITH SILLS AND FRAME?
22. IS SCAFFOLD LEVEL AND PLUMB?
23. HAS SCAFFOLD BEEN TIED TO STRUCTURE AT LEAST EVERY 30 FEET IN LENGTH AND 26 FEET IN HEIGHT?
24. HAVE FREE-STANDING TOWERS BEEN GUYYED OR TIED EVERY 26 FEET IN HEIGHT?
25. HAVE BRACKETS AND ACCESSORIES BEEN PROPERLY PLACED WITH ALL BRACKETS, PUTLOGS, TUBES, AND CLAMPS, AND NUTS AND BOLTS TIGHTENED?
26. IS THE SCAFFOLD FREE OF MAKESIFT DEVICES OR LADDERS TO INCREASE HEIGHT?
27. ARE WORKING LEVEL PLATFORMS FULLY PLANKED BETWEEN GUARDRAILS?
28. ARE TOE BOARDS INSTALLED PROPERLY?
29. HAVE HAZARDOUS CONDITIONS BEEN PROVIDED FOR, SUCH AS WIND LOADING, OR POSSIBLE WASHOUT OF FOOTINGS?
30. IF THE WORK PLATFORM IS OVER 4 FEET OFF THE GROUND OR FLOOR AND STANDARD HANDRAILS ARE NOT BEING USED, IS THE WIDTH OF THE WORK PLATFORM 45” OR GREATER?
31. IS THE WORK PLATFORM IS OVER 4 FEET OFF THE GROUND OR FLOOR, STANDARD HANDRAILS ARE NOT BEING USED, AND THE WIDTH OF THE WORK PLATFORM IS LESS THAN 45”, ARE EMPLOYEES TIED OFF 100% OF THE TIME?
32. IN THE ABOVE SITUATION, ARE EMPLOYEES USING A FULL BODY HARNESS WITH A 6-FOOT DOUBLE-LOCKING SNAP-HOOK LANYARD THAT IS SECURED TO A STRUCTURAL MEMBER THAT CAN WITHSTAND A 5000 POUND LOAD?
33. IF THE SCAFFOLD IS ERECTED BELOW OR NEXT TO ELECTRICAL POWER LINES, HAVE PRECAUTIONS BEEN TAKEN TO KEEP THE SCAFFOLD AND ALL POSSIBLE TOOLS BEING USED AT LEAST 10 FEET FROM THE POWER LINES? IF SO, PLEASE LIST PRECAUTIONS TAKEN BELOW THIS CHECKLIST.
34. IF SCAFFOLD IS ERECTED IN HIGH TRAFFIC AREAS, SUCH AS ROUTE FOR FORKLIFTS, HAVE PRECAUTIONS BEEN TAKEN TO PREVENT COLLISION? IS SO, PLEASE LIST PRECAUTIONS TAKEN BELOW THIS CHECKLIST.
35. IF SCAFFOLD IS ERECTED NEAR AN EXCAVATION OR ON A PERMANENT ELEVATION, HAVE PRECAUTION BEEN TAKEN TO PREVENT THE SCAFFOLD FROM COLLAPSING INTO THE EXCAVATION OR FROM FALLING OFF THE ELEVATOR? IS SO, PLEASE LIST PRECAUTIONS TAKEN BELOW THIS CHECKLIST?

INSPECTED BY:  

DATE:  

LOCATION OF SCAFFOLDING:  

________________________________________

________________________________________

_____________________________
VIII. HAZARD COMMUNICATION (HAZCOM)

IN COMPLIANCE WITH 29 CFR 1910.1200, THE ___________________ WRITTEN HAZARD COMMUNICATION PROGRAM ADDRESSES THE FOLLOWING ISSUES ON CONSTRUCTION SITES.

A. ___________________ CONTAINER LABELING
THE ___________________ SAFETY DIRECTOR VERIFIES THAT:
• ALL CONTAINERS RECEIVED HAVE CONTENTS CLEARLY LABELED.
• CONTAINERS HAVE WARNING LABELS, AS APPROPRIATE.
• ALL LABELS LIST THE NAME AND ADDRESS OF THE MANUFACTURER.
• SECONDARY CONTAINERS ARE ALSO LABELED AND HAVE AN MSDS NUMBER AND CHEMICAL NAME.
• THE MATERIALS ALSO HAVE A COMMON NAME AND HAZARD WARNING ON THE LABEL.

B. MATERIAL SAFETY DATA SHEET (MSDS’S)
THE ___________________ SAFETY DIRECTOR IS RESPONSIBLE FOR MONITORING THE MSDS SYSTEM, MAKING SURE THAT MSDS’S ARE OBTAINED AND KEEPING THESE ON FILE FOR ___________________. ANY NEW OR SIGNIFICANT HEALTH AND SAFETY INFORMATION OBTAINED FROM THESE SHEETS IS PASSED ON TO EMPLOYEES WORKING WITH OR AROUND THOSE MATERIALS.

COPIES OF MSDS’S ARE SHARED BY ___________________ AND SUB-CONTRACTOR EMPLOYEES.
• COPIES OF ALL SUB-CONTRACTORS’ MSDS’S AND ___________________ MSDS’S FOR HAZARDOUS MATERIALS ARE KEPT ON THE JOB SITE.
• MSDS’S ARE AVAILABLE FOR REVIEW BY ALL AFFECTED EMPLOYEES 24 HOURS A DAY AT A CENTRAL LOCATION, WITH COPIES AVAILABLE UPON REQUEST.

C. EMPLOYEE TRAINING
THE ___________________ SAFETY DIRECTOR IS RESPONSIBLE FOR DEVELOPING, IMPLEMENTING, AND MONITORING THE EMPLOYEE TRAINING PROGRAM. IN ADDITION TO HAZCOM INFORMATION PRESENTED IN SAFETY ORIENTATION, EACH NEW EMPLOYEE SHALL BE TRAINED IN THE FOLLOWING BEFORE STARTING WORK:
• USE OF HAZARDOUS MATERIALS IN THE WORKPLACE.
• RECOGNITION OF HAZARDOUS MATERIALS IN THE WORKPLACE.
• KNOW PHYSICAL AND HEALTH HAZARDS RELATED TO A POTENTIAL EXPOSURE.
• KNOW HOW TO REDUCE OR PREVENT EXPOSURES TO HAZARDOUS MATERIALS.
• USE OF PERSONAL PROTECTIVE EQUIPMENT AND PROCEDURES.
• KNOW THE PROCEDURES TO FOLLOW IF EXPOSED TO HAZARDOUS MATERIALS.

AFTER PARTICIPATION IN A HAZCOM TRAINING SESSION, EACH EMPLOYEE MUST SIGN A FORM TO INDICATE INVOLVEMENT IN THE CLASS. DURING PERIODIC SAFETY MEETINGS HELD ONSITE, HAZARDOUS MATERIALS ARE AGAIN DISCUSSED. ATTENDANCE AT THESE MEETINGS IS MANDATORY.
D. **LIST OF HAZARDOUS MATERIALS**

The Hazard Communication File contains a list of the hazardous materials on the job. Information on each hazardous material can be found in this MSDS file.

E. **HAZARDOUS NON-ROUTINE TASKS**

If employees are required to perform a hazardous task they would not normally do, they must receive information from the Safety Director prior to starting this work about hazardous materials they may encounter. This information includes:

- Specific hazardous material hazards.
- Protective and safety measures the employee can take.
- Measures _________________ has taken to reduce these hazards.

F. **INFORMING SUB-CONTRACTORS**

It is the responsibility of the _________________ Safety Director to provide sub-contractors with the following information:

- Job safety rules.
- Hazardous materials to which the employees may be exposed.
- The location of MSDS’s for employees to read.
- Procedures to follow if exposed to a hazardous material.
- Measures _________________ has taken to reduce these hazards.
IX. HAZARDOUS MATERIALS MANAGEMENT

THE _____________________ HAZARD COMMUNICATION PROGRAM IS AN IMPORTANT LINK IN OUR COMPANY’S TOTAL ACCIDENT PREVENTION PROGRAM AND IS AN INTEGRAL PART OF HAZARDOUS MATERIALS MANAGEMENT.

WITHIN THE PROGRAM ARE SEVEN KEY ELEMENTS:
1. HANDLING, STORAGE, AND USE OF HAZARDOUS MATERIALS.
2. CONTAINER LABELING.
3. MATERIAL SAFETY DATA SHEETS (MSDS’S)
4. EMPLOYEE TRAINING AND EDUCATION.
5. PROCEDURES IN THE EVENT OF A SPILL
6. SUB-CONTRACTOR’S RESPONSIBILITIES.
7. A COMPLETE HAZARDOUS CHEMICAL LISTING.

ALL SUB-CONTRACTORS MUST OBSERVE _____________________ POLICIES AND ENVIRONMENTAL REGULATIONS WHEN USING OR STORING HAZARDOUS MATERIALS. HAZARDOUS MATERIALS INCLUDE, BUT ARE NOT LIMITED TO, GASOLINE, DIESEL FUEL, OIL LUBRICANTS, PAINTS, SOLVENTS, TAR, COOLANTS, AND HAZARDOUS WASTES.

THE FOLLOWING PROCEDURES OUTLINE CORRECT METHODS FOR USING AND STORING HAZARDOUS MATERIALS:
• STORE CONTAINERS, SUCH AS 5-GALLON CANS AND 55-GALLON DRUMS IN A COVERED AREA TO PROVIDE PROTECTION FROM THE WEATHER.
• EACH HAZARDOUS MATERIAL USED OR STORED ON SITE SHALL HAVE A MATERIAL SAFETY DATA SHEET (MSDS) AVAILABLE FOR INSPECTION. A MONTHLY INVENTORY OF THE HAZARDOUS MATERIALS STORED OR USED ON SITE SHALL BE SUBMITTED TO THE _____________________ SAFETY DIRECTOR.
• CLEARLY MARK ALL CONTAINERS REGARDING THE CONTENTS. WHENEVER POSSIBLE, USE THE ORIGINAL MANUFACTURER’S LABEL TO IDENTIFY THE CONTENTS.
• CONTAINERS MUST REMAIN CLOSED WHEN NOT IN USE OR WHEN LEFT UNATTENDED.
• STORE TANKS AND CONTAINERS IN AN AREA THAT PROVIDES FOR SECONDARY CONTAINMENT IN THE EVENT OF A SPILL.
• SEGREGATE AND STORE HAZARDOUS MATERIALS BASED ON CHEMICAL COMPATIBILITY OF THE MATERIALS.
• WHEN CONDUCTING ROOF TARRING, PAINTING, OR FUEL BURNING OPERATIONS IN AN AREA WHERE FUMES ARE LIKELY TO ENTER A BUILDING THROUGH AN INTAKE DUCT, OPEN DOOR, OR CONSTRUCTION INSIDE A BUILDING, CONTACT THE _____________________ SAFETY DIRECTOR TO ASSURE THAT EMPLOYEES ARE NOT AFFECTED.
• NO CHEMICALS, HAZARDOUS MATERIALS, OR CONTAMINATED WATER MAY BE DISCHARGED TO STORM DRAINS OR SANITARY SEwers.
• DISPOSAL OF HAZARDOUS WASTE GENERATED DURING THE JOB IS THE RESPONSIBILITY OF THE CONTRACTOR GENERATING THE WASTE UNLESS OTHERWISE SPECIFIED.
• IN THE EVENT OF A SPILL, THE CONTRACTOR MUST IMMEDIATELY CONTACT THE _____________________ SAFETY DIRECTOR. THE SAFETY DIRECTOR CAN HELP LOCATE MATERIALS TO CONTAIN AND CLEAN UP THE SPILL.
X. LOCKOUT/TAGOUT

WHEN TO USE LOCKOUT/TAGOUT:
WHEN MAINTENANCE, REPAIR, OR RELOCATION OF MACHINERY IS NECESSARY, TURNING OFF OR UNPLUGGING THE MACHINERY DOES NOT PROVIDE ADEQUATE PROTECTION FOR EMPLOYEES WORKING ON OR WITH THAT EQUIPMENT. SERIOUS ACCIDENTS CAN OCCUR WHEN SOMEONE MISTAKENLY THINKS THE MACHINE OR THE ENERGY SOURCE IS SAFELY TURNED OFF. USE THESE GUIDELINES THAT APPLY TO THE START-UP OR RELEASE IF STORED ENERGY TO MACHINES OR EQUIPMENT TO AVOID INJURY TO EMPLOYEES.

ATTACHING LOCKS AND TAGS TO EQUIPMENT:
BEFORE WORK BEGINS ON ANY EQUIPMENT, THE POWER SWITCH MUST BE LOCKED AND TAGGED IN A DE-ENERGIZED POSITION. EQUIPMENT AS USED IN THIS DOCUMENT REFERS TO ANY DEVICE THAT COULD BE HARMFUL IN AN ENERGIZED STATE, TO INCLUDE WIRING, WIRED EQUIPMENT, SWITCH GEAR, SUBSTATIONS, MOTOR CONTROL CENTERS, DISTRIBUTION PANELS, AND PUMPS.

WHEN PLACING OR REMOVING LOCKS AND TAGS, FOLLOW THESE STEPS:
1. THE EMPLOYEE OBTAINS A NUMBERED “DO NOT OPERATE” TAG AND AN IDENTICALLY NUMBERED LOCK FROM THE ________________ SAFETY DIRECTOR. THE EMPLOYEE THEN SIGNS THE TAG.
2. ENTER THE LOCK AND TAG NUMBERS, DATE, EMPLOYEE’S NAME, FOREMAN’S NAME, AND SWITCH DESCRIPTION IN THE LOCKOUT/TAGOUT LOG.
3. EACH EMPLOYEE ATTACHES A NUMBERED AND ASSIGNED TAG AND LOCK ON THE SWITCH. AFTER TAGS AND LOCKS ARE ATTACHED, AN ATTEMPT IS MADE TO ACTIVATE THE EQUIPMENT TO DETERMINE THAT THE CORRECT SWITCH HAS BEEN LOCKED OUT.
4. WHEN EMPLOYEES OTHER THAN ELECTRICIANS MUST WORK ON ELECTRICALLY POWERED EQUIPMENT, THE EMPLOYEE MUST CONTACT THE ELECTRICIANS AND JOINTLY ATTACH A TAG AND LOCK ON THE SWITCH WITH AN ELECTRICIAN.
5. WHEN MORE THAN ONE LOCK IS ATTACHED, A MULTIPLE LOCK ADAPTER IS USED TO ENSURE THAT THE SWITCH CANNOT BE ACTIVATED UNTIL ALL LOCKS HAVE REMOVED.

REMOVING LOCKS AND TAGS FROM EQUIPMENT:
WHEN AUTHORIZED EMPLOYEES HAVE COMPLETED WORK ON THE EQUIPMENT, THESE STEPS MUST BE FOLLOWED IN THE REMOVAL OF TAGS:
1. INSPECT THE WORK AREA TO VERIFY THAT ALL TOOLS HAVE BEEN REMOVED FROM THE EQUIPMENT. NOTIFY ALL AFFECTED PERSONS THAT THE EQUIPMENT IS TO BE RESTARTED,
2. EACH EMPLOYEE REMOVES HIS OR HER OWN LOCKOUT/TAGOUT DEVICE.
3. THE LOCKS ARE THEN RETURNED TO THE LOCK BOARD WHERE THE LOCKS AND TAGS ARE STORED. BOTH THE LOCK AND TAG ARE THEN SIGNED OFF IN THE LOG.

ONLY THE AUTHORIZED EMPLOYEE MAY REMOVE THE LOCKOUT OR TAGOUT DEVICES. NO ONE IS AUTHORIZED TO REMOVE ANOTHER PERSON’S LOCK. IT IS POSSIBLE THAT IN AN EMERGENCY OR IN THE ABSENCE OF THE EMPLOYEE, THE LOCK MAY HAVE TO BE REMOVED. IN THIS CASE, THE LOCK SHALL BE REMOVED ONLY UNDER THE DIRECTION OF THE ________________ SAFETY DIRECTOR AFTER A SAFETY INSPECTION HAS BEEN CONDUCTED.
THE LIMITS OF LOCKOUT/TAGOUT:
LOCKOUT/TAGOUT RULES ALONE CANNOT STOP SERIOUS ACCIDENTS. HOWEVER, THE 
EMPLOYERS AND EMPLOYEES WHO FOLLOW STRICT LOCKOUT/TAGOUT PROCEDURES CAN 
PREVENT SERIOUS ACCIDENTS.

ELECTRICAL SAFETY/ASSURED GROUNDING PROGRAM