PWD/ROICC/OICC/FSC OFFICE:

DATE:

QC MANAGER:

FINAL OVERALL SCORE:



CONTRACTOR: CONTRACT TITLE: CONTRACT% COMPLETE:

TOTAL MONTHLY MAN-HOURS: TOTAL CUMULATIVE MAN-HOURS:

SUPERINTENDENT: SITE SAFETY HEALTH OFFICER (SSHO):

PERSON COMPLETING INSPECTION: SSHO LEVEL: (CIRCLE REQUIRED LEVEL) (1), (2), (3), (4), (5), (6)

QUESTIONS ANSWERED "NO" ARE BE ENTERED INTO THE SITE SAFETY AND OCCUPATIONAL HEALTH DEFICIENCY TRACKING SYSTEM FOR CORRECTION (REFER TO EM 385-1-1 01.A.12.d)

			QUESTIONS ANSWERED 'NO' ARE BE ENTERED INTO THE SITE SAFETY AND OCCUPATIONAL HEALTH DEFICIENCY TRACKING SYSTEM FOR CORRECTION (REFER TO EM 385-1-1 01.4.12.d)
PREP	ARATORY PHAS	SE/ OF	RM PLANNING
1	(Yes) (No) (N	N/A)	ACCEPTED ACCIDENT PREVENTION PLAN (APP) OR ABBREVIATED (APP) ON-SITE and UPDATED TO REFLECT CURRENT MANAGEMENT?
2	(Yes) (No) (N	N/A)	APPLICABLE UFGS 013526 AVAILABLE IN SITE ?
3	(Yes) (No) (N	N/A)	COMPETENT PERSON EMPLOYED FULL TIME AS SITE SAFETY AND HEALTH OFFICER (SSH0) UNLESS SPECIFIED DIFFERENTLY IN THE CONTRACT?
4	(Yes) (No) (No)	-	SSHO ON - SITE AT ALL TIMES WHEN WORK IS BEING PERFORMED ?
	(100) (110) (1	,	
5	(Yes) (No) (No)	N/A)	SAFETY INSPECTIONS/AUDITS CONDUCTED BY COMPETENT PERSON, OF THE WORK SITE, MATERIAL, AND EQUIPMENT DOCUMENTED IN WRITING AND AVAILABLE ON REQUEST?
6	(Yes) (No) (No)	N/A)	SAFETY AND HEALTH BULLETIN BOARD ERECTED IN AREA COMMONLY ACCESSED AND IN CLEAR VIEW OF THE ON-SITE WORKERS?
7	(Yes) (No) (No)	N/A)	SAFETY AND OCCUPATIONAL HEALTH DEFICIENCY TRACKING SYSTEM ESTABLISHED and UPDATED DAILY (REFER TO EM 385-1-1 01.A.12.d)?
8	(Yes) (No) (No)	N/A)	QUALIFIED PERSON CONDUCTING/DOCUMENTING ALL TRAINING, MEETINGS AND INDOCTRINATION FOR NEW EMPLOYEES?
9	(Yes) (No) (N	N/A)	ACTIVITY HAZARD ANALYSIS (AHA) with COMPETENT PERSON IDENTIFIED and PROOF OF QUALIFICATIONS ATTACHED and ACCEPTED BY GOVERNMENT DESIGNATED AUTHORITY FOR EACH WORK ACTIVITY ON SITE?
10	(Yes) (No) (N	N/A)	WORK NOT STARTED UNTIL ACTIVITY HAZARD ANALYSIS REVIEWED BY CONTRACTOR, SUBCONTRACTOR(S) AND GOVERNMENT ON-SITE REPRESENTATIVES DURING PREPARATION and INITIAL PHASE MEETING?
11	(Yes) (No) (N	N/A)	ARE REQUIRED WEEKLY SAFETY MEETINGS FOR ALL WORKERS TO REVIEW PAST ACTIVITES, PLAN FOR NEW OR CHANGED OPERATIONS, REVIEW aha'S BY TRADE, ESTABLISH SAFE WORKING PROCUDRES FOR UPCOMING HAZARDS, PROVIDE SAFETY AND HEALTH TRAINING BEING HELD AND DOCUMENTED?
12	(Yes) (No) (N	N/A)	ARE REQUIRED MONTHLY SAFETY MEETINGS FOR ALL SUPERVISORS ON THE PROJECT LOCATION TO REVIEW PAST ACTIVITES, PLAN FOR NEW OR CHANGED OPERATIONS, REVIEW aha'S BY TRADE, ESTABLISH SAFE WORKING PROCUDRES FOR UPCOMING HAZARDS, PROVIDE SAFETY AND HEALTH TRAINING BEING HELD AND DOCUMENTED?
13	(Yes) (No) (N	N/A)	WRITTEN HAZARD COMMUNICATION PROGRAM SUBMITTED and IMPLEMENTED IAW EM 385 SECTION 06.B.01 ?
14	(Yes) (No) (No)	N/A)	MSDS FOR EACH HAZARDOUS SUBSTANCE MAINTAINED WITH SITE MAP ATTACHED?
15	(Yes) (No) (N	N/A)	PRIME CONTRACTOR ASSURING SUBCONTRACTOR COMPLIANCE WITH REQUIREMENTS OF EM-385-1-1?
			Other? Extra Credit?
OFFIC	E TRAILER/SIG	NAGE	E/GENERAL
16	(Yes) (No) (N		OFFICE AND STORAGE TRAILERS ANCHORED?
17	(Yes) (No) (N	-	EMERGENCY PHONE NUMBERS POSTED?
	(103) (110) (1	IVA,	
18	(Yes) (No) (No	N/A)	TEMPORARY PROJECT FENCING WHICH EXTENDS FROM GRADE LEVEL TO A MINIMUM OF 48IN. ABOVE GRADE? (UNLESS GDA DETERMINES OTHERWISE BASED ON RISK ANALYSIS)
19	(Yes) (No) (No		SIGNS WARNING OF THE PRESENCE OF CONSTRUCTION HAZARDS AND REQUIRING UNAUTHORIZED PERSONS TO KEEP OUT POSTED ON THE FENCING EVERY 150 FEET?
20	(Yes) (No) (No)	N/A)	CONTRACTOR AWARE OF IMMEDIATE NOTIFICATION FOR ALL INJURIES REQUIRED BY PWD/ROICC/OICC/FSC OFFICE?
21	(Yes) (No) (No)	N/A)	EMERGENCY PLANS IN CASE OF FIRE OR OTHER EMERGENCY PREPARED IN WRITING AND REVIEWED?
22	(Yes) (No) (No)	N/A)	DRINKING WATER WITH DISPOSABLE CUPS AND A WASTE RECEPTACLE AVAILABLE?
23	(Yes) (No) (No)	N/A)	TOILET FACILITIES WITH WASHING FACILITIES AVAILABLE?
24	(Yes) (No) (No)	N/A)	HIGHLY VISIBLE MAP DELINEATING BEST ROUTE TO NEAREST MEDICAL FACILITY POSTED ON SAFETY BULLETIN BOARD?
25	(Yes) (No) (N	N/A)	FIRST-AID KIT, TYPE III, 16 UNIT, and ONE POCKET MOUTH PIECE OR CPR BARRIER PROVIDED AND MAINTAINED WITH INVENTORY LOG AVAILABLE?
26	(Yes) (No) (N	N/A)	ALL EMPLOYEES ON SITE WEARING AS A MINIMUM SHORT SLEEVE SHIRT, LONG PANTS, LEATHER OR OTHER PROTECTIVE WORK SHOES OR BOOTS
27	(Yes) (No) (N	N/A)	EVERY FLOOR, WORKING PLACE AND PASSAGEWAY KEPT FREE FROM PROTRUDING NAILS, SPLINTERS, LOOSE BOARDS, CLUTTER AND UNNECESSARY HOLES AND OPENING?
28	(Yes) (No) (No)	N/A)	WORK AREAS INSPECTED DAILY FOR ADEQUATE HOUSEKEEPING AND RECORDED ON DAILY SAFETY INSPECTION REPORT?
29	(Yes) (No) (N	N/A)	TRAFFIC CONTROL AROUND SITE ADEQUATE?
			Other? Extra Credit?
FIRE F	REVENTION		
30	(Yes) (No) (N	N/A)	WRITTEN FIRE PREVENTION PLAN ON SITE AND USED TO BRIEF EMPLOYEES?
31	(Yes) (No) (No)		FIRE EXTINGUISHERS AVAILABLE, FULLY CHARGED, EASILY VISIBLE WITHIN 75 FEET FOR LOW HAZARD AREAS?
32	(Yes) (No) (No)	-	FIRE EXTINGUISHERS INSPECTED MONTHLY, RECORDED ON TAGS, AND INITIALED?
33	(Yes) (No) (No)		FUEL STORED IN SAFETY CANS LABELED/LISTED and PAINTED RED WITH YELLOW BAND AND CONTENTS INDICATED?
34	(Yes) (No) (No)		ARE HOT WORK PERMITS BEING OBTAINED FOR WELDING, CUTTING OR OPERATING OTHER FLAME-PRODUCING/SPARK PRODUCING DEVICES FROM THE FIRE DEPARTMENT?
35	(Yes) (No) (No)	N/A)	ARE FIRE WATCHES PROVIDED?
33	(103) (140) (1	· 41/~)	Other? Extra Credit?
PPE			OHIGH: LANG OFGUIG
\vdash	(Vec) (No.	NI/A)	WODIFER WEADING CAFETY TOED I FATUED CHOSE OF BOOTS MEETING ASTM FOLIA OF AND FOLIA OF A
36	(Yes) (No) (N		WORKERS WEARING SAFETY-TOED LEATHER SHOES OR BOOTS MEETING ASTM F 2412 - 05 AND F 2413 - 05 ?
37	(Yes) (No) (No)		HARD HATS BEING WORN PROPERLY AND MEETING ANSI Z89.1?
38	(Yes) (No) (No)	-	ARE WORKERS INVOLVED IN ACTIVITIES THAT SUBJECT HANDS TO INJURY USING HAND PROTECTION APPROPRIATE FOR THE HAZARD?
39	(Yes) (No) (No)		SAFETY GLASSES USED WHERE APPROPRIATE?
40	(Yes) (No) (No)		HEARING PROTECTION WHERE APPROPRIATE? (IF YOU NEED TO YELL TO CONVERSE HEARING PROTECTION IS REQUIRED)
41	(Yes) (No) (No)		WORKERS WEARING RESPIRATORS WHERE APPROPRIATE?
42	(Yes) (No) (No)		IMPALEMENT PROTECTION PROVIDED WHERE PERSONNEL COULD WORK ABOVE VERTICAL IMPALEMENT HAZARD (Rebar etc.)?
43	(Yes) (No) (No)	N/A)	ARE PROTECTIVE LEG CHAPS WORN BY WORKERS WHO OPERATE CHAIN SAWS?
44	(Yes) (No) (N	N/A)	HIGH VISIBILITY APPAREL BEING WORN WHEN WORKERS ON SITE ARE EXPOSED TO VEHICULAR OR EQUIPMENT TRAFFIC AT UP TO 45 MPH, THERE IS LIMITED OR REDUCED VISIBILITY FOR WORKERS AROUND MOBILE/HEAVY EQUIPMENT OR WORKERS ARE WORKING CLOSE TO VEHICULAR TRAFFIC WITH NO PROTECTIVE BARRIERS?
			OTHER? EXTRA CREDIT?

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		CONTRACTOR SAFETY SELF- EVALUATION CHECKLIST
SCAF	FOLD SAFETY	
45	(Yes) (No) (N/A)	HAS A SITE-SPECIFIC FALL PROTECTION AND PREVENTION PLAN and AHA BEEN ACCEPTED BY THE GDA PRIOR TO COMMENCING WORK IN ELEVATED AREAS?
46	(Yes) (No) (N/A)	ALL ERECTION, MOVING, DISMANTLING, OR ALTERING OF SCAFFOLD SYSTEMS UNDER THE SUPERVISION OF A COMPETENT PERSON?
47	(Yes) (No) (N/A)	COMPETENT PERSON USING A COLOR-CODED TAGGING SYSTEM? (GREEN = INSPECTED & SAFE TO USE) (RED = SCAFFOOLD IS UNSAFE TO USE)
48	(Yes) (No) (N/A)	PLANKS OVERLAPPED NOT LESS THAN 6" OR MORE THAN 12" OVER END SUPPORTS WITH TOE BOARDS IN PLACE?
49	(Yes) (No) (N/A)	SCAFFOLD PINNED PROPERLY AND ALL CROSS BRACING IN PLACE?
50	(Yes) (No) (N/A)	SCAFFOLD HEIGHT 4 TIMES SMALLEST BASE DIMENSION AND SYSTEM IS SECURED TO STRUCTURE?
51	(Yes) (No) (N/A)	ALL GUARDRAILS ARE IN PLACE?
52	(Yes) (No) (N/A)	FULL WORK PLATFORM OR DECKS AT EACH WORKING LEVEL WITH NO CRACKS/SPLITS?
53	(Yes) (No) (N/A)	WORK PLATFORM OR DECK SECURELY FASTENED TO THE SCAFFOLD?
54	(Yes) (No) (N/A)	SAFE ACCESS PROVIDED TO EACH WORKING LEVEL?
55	(Yes) (No) (N/A)	IS SCAFFOLD SYSTEM PLUMB AND LEVEL?
56	(Yes) (No) (N/A)	SUSPENDED SCAFFOLD SYSTEMS USING INDEPENDENT PERSONAL FALL ARREST SYSTEM?
57	(Yes) (No) (N/A)	PERSONNEL PROHIBITED FROM RIDING ON MANUALLY PROPELLED SCAFFOLDS?
		Other? Extra Credit?
FALL	PROTECTION	
58	(Yes) (No) (N/A)	HAS SITE-SPECIFIC FALL PROTECTION AND PREVENTION PLAN BEEN ACCEPTED?
59	(Yes) (No) (N/A)	WORKERS USING FALL PROTECTION EQUIPMENT USING "BUDDY SYSTEM" TO BEGIN RESCUE OF FALLEN WORKER IF REQUIRED
60	(Yes) (No) (N/A)	ALL WORKERS ABOVE 6 FOOT FALL PROTECTION THRESHOLD PROTECTED FROM FALLING TO LOWER LEVEL?
61	(Yes) (No) (N/A)	ARE EMPLOYEES TRAINED FOR FALL PROTECTION SYSTEMS IN USE?
62	(Yes) (No) (N/A)	HAS THE CONTRACTOR DESIGNATED A COMPETENT PERSON FOR FALL PROTECTION?
63	(Yes) (No) (N/A)	IS A WRITTEN RESCUE PLAN (IAW ANSI Z359.2) BEEN PREPARED AND MAINTAINED WHEN WORKERS ARE WORKING AT HEIGHTS?
64	(Yes) (No) (N/A)	IS A FULL BODY HARNESS USED?
65	(Yes) (No) (N/A)	ALL WORKERS ALOFT TIED OFF AT ALL TIMES (100%) TO STRUCTURAL ELEMENT CAPABLE OF SUPPORTING 5,000 LBS?
66	(Yes) (No) (N/A)	HAVE STANDARD GUARDRAILS BEEN PROVIDED WHERE NEEDED?
67	(Yes) (No) (N/A)	ACCESS TO WORK AREAS GREATER THAN 20 FEET HIGH PROVIDED WITH A STAIR SYSTEM?
68	(Yes) (No) (N/A)	HAVE HORIZONTAL LIFE LINES IF USED BEEN DESIGNED AND INSTALLED UNDER SUPERVISION OF A QUALIFIED PERSON?
		OTHER? EXTRA CREDIT?
LADD	ER SAFETY	
69	(Yes) (No) (N/A)	LADDERS EXTEND 3' ABOVE LANDING PLATFORM AND TIED TO STRUCTURE?
70	(Yes) (No) (N/A)	ARE LADDERS USED WITH HAND TOOLS ONLY?
71	(Yes) (No) (N/A)	ARE LADDER BASE DISTANCES FROM STRUCTURE 1/4 HEIGHT?
72	(Yes) (No) (N/A)	ALL FLOOR OPENINGS EITHER COVERED OR SURROUNDED BY A GUARDRAIL?
73	(Yes) (No) (N/A)	ELECTRICIANS NOT USING CONDUCTIVE LADDERS?
74	(Yes) (No) (N/A)	STAIRWAYS PROVIDED ON ALL STRUCTURES OVER 20' DURING CONSTRUCTION/WITH GUARDRAIL?
75	(Yes) (No) (N/A)	ALL FLIGHTS OF STAIRS WITH 4 OR MORE RISERS HAVE STANDARD STAIR RAILINGS OR HANDRAILS
76	(Yes) (No) (N/A)	PORTABLE STEP LADDERS OVER 20' NOT USED ON THE SITE?
77	(Yes) (No) (N/A)	ARE LADDERS PROPERLY USED?
	(12) (1) (1)	OTHER? EXTRA CREDIT?
EXCA	VATIONS	
78	(Yes) (No) (N/A)	HAS EXCAVATION/TRENCHING PLAN IN ACCORDANCE WITH (SECTION 25.A.01 a - n) BEEN SUBMITTED AND ACCEPTED BY THE GDA PRIOR TO BEGINNING OPERATIONS?
79	(Yes) (No) (N/A)	COMPETENT PERSON ABLE TO DEMONSTRATE TRAINING, EXPERIENCE AND KNOWLEDGE OF SOIL ANALYSIS: PROTECTIVE SYSTEMS AND REQUIREMENTS OF 29 CFR 1926 SUBPART P AND HAS AUTHORITY TO STOP WORK WHEN REQUIRED?
	n. v	
80	(Yes) (No) (N/A)	COMPETENT PERSON INSPECTED AND DOCUMENTED EXCAVATION DAILY?
81	(Yes) (No) (N/A)	HIGH VISIBILITY APPAREL WORN BY ALL WORKERS EXPOSED TO VEHICLE TRAFFIC OR WORKING AROUND EQUIPMENT
82	(Yes) (No) (N/A)	HYDRAULIC EXCAVATORS, WHEEL/TRUCK/BACKHOE LOADERS USED TO TRANSPORT OR HOIST LOADS WITH RIGGING COMPLY WITH EM 385 SECTION 16 "S" AND HAVE AHA
	(, (, ()	SPECIFIC TO THESE OPERATIONS?
83	(Yes) (No) (N/A)	WRITTEN PROOF OF QUALIFICATION OF EQUIPMENT OPERATORS, RIGGERS INVOLVED IN HOISTING, TRANSPORTING OPERATIONS?
84	(Yes) (No) (N/A)	OPERATIONAL TEST PERFORMED AS DESCRIBED IN 16.F?
85	(Yes) (No) (N/A)	MANUFACTURERS OPERATING MANUAL WITH EQUIPMENT?
86	(Yes) (No) (N/A)	PROPER USE OF RIGGING, INCLUDING POSITIVE LATCHING DEVICES?
87	(Yes) (No) (N/A)	INSPECTION OF RIGGING
88	(Yes) (No) (N/A)	BARRICADE SWING RADIUS OF EQUIPMENT AND LOAD?
89	(Yes) (No) (N/A)	OVER 4' DEEP MUST HAVE A LADDER WITHIN 25' AND TWO MEANS OF EGRESS?
90	(Yes) (No) (N/A)	HAS PROPER SLOPE OR TRENCH BOX/SHORING BEEN PROVIDED?
91	(Yes) (No) (N/A)	IS WATER CONTROLLED/REMOVED?
_		
92	(Yes) (No) (N/A)	IS EXCAVATED MATERIAL AT LEAST 2' BACK FROM TRENCH EDGE?
93	(Yes) (No) (N/A)	HAS SAFE ACCESS/PROTECTION BEEN PROVIDED TO PREVENT PERSONNEL, VEHICLES, AND EQUIPMENT FROM FALLING INTO EXCAVATIONS?
94	(Yes) (No) (N/A)	PERIMETER PROTECTION THAT MEETS CLASS I or CLASS III OR CLASS III REQUIREMENTS PROVIDED?
1		OTHER? EXTRA CREDIT?

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		CONTRACTOR SAFETY SELF- EVALUATION CHECKLIST
ELEC	TRICAL	
95	(Yes) (No) (N/A)	HAS A SKETCH OF TEMPORARY POWER DISTRIBUTION SYSTEMS BEEN SUBMITTED /ACCEPTED BY GDA?
96	(Yes) (No) (N/A)	ELECTRICAL WORK PERFORMED BY QUALIFIED PERSONNEL WITH VERIFIABLE CREDENTIALS?
97	(Yes) (No) (N/A)	ENERGIZED WORK PERMIT SUBMITTED TO GDA PRIOR TO ANY WORK ON ENERGIZED LINES ON EQUIPMENT AND IAW NFPA70E AND EM 385 I.E 02 C(1) - (8)
98	(Yes) (No) (N/A)	ARE ARC FLASH REQUIREMENTS KNOWN AND ADHERED TO?
99	(Yes) (No) (N/A)	ARE TEMPORARY POWER PANEL AND RECEPTACLES PROTECTED FROM WEATHER?
100	(Yes) (No) (N/A)	GFCI'S IN USE FOR SITE TOOLS - APPLIES TO EXISTING OUTLETS IN RENOVATION PROJECTS AS WELL?
101	(Yes) (No) (N/A)	TEMPORARY LIGHTS INSULATED FROM SUPPORTS PROPERLY WITH ALL LAMPS WORKING AND GUARDED?
102	(Yes) (No) (N/A)	
		OVERHEAD POWER LINES IN AREA, OPERATIONS PROHIBITED UNLESS MAINTAINING PROPER CLEARANCE DISTANCES?
103	(Yes) (No) (N/A)	HAS HAZARDOUS ENERGY CONTROL PROGRAM BEEN SUBMITTED AND ACCEPTED BY GDA? (OLD LOCK OUT/TAG OUT)
104	(Yes) (No) (N/A)	VERTICAL CLEARANCE OF TEMPORARY WIRING OF AT LEAST 10 FEET MAINTAINED ?
105	(Yes) (No) (N/A)	ALL FLEXIBLE CORDS INSPECTED AT LEAST DAILY? DOCUMENTED?
106	(Yes) (No) (N/A)	FLEXIBLE CORDS NOT SPLICED EXCEPT HARD SERVICE CORDS # 12 OR LARGER WITH MOLDED OR VULCANIZED SPLICES BY QUALIFIED ELECTRICIAN?
		OTHER? EXTRA CREDIT?
CRAN	IES	
107	(Yes) (No) (N/A)	BEFORE CRANE/HOISTING EQUIPMENT IS PLACED IN SERVICE HAS IT BEEN INSPECTED, TESTED, AND CERTIFIED IN WRITING BY A COMPETENT PERSON TO BE IN ACCORDANCE WITH THE MANUFACTURER'S RECOMMENDATION AND THE REQUIREMENTS OF EM 385?
108	(Yes) (No) (N/A)	CRANE OPERATOR DESIGNATED QUALIFIED AND PROOF OF QUALIFICATION IN WRITING PROVIDED TO THE GDA?
109	(Yes) (No) (N/A)	PROJECT HAS ADEQUATE MEANS FOR MONITORING LOCAL WEATHER CONDITIONS, INCLUDING A WIND-INDICATING DEVICE?
110	(Yes) (No) (N/A)	ARE EM 385-1-1 16.D.08 (AT THE BEGINNING OF EACH SHIFT) START UP INSPECTIONS PERFORMED BY OPERATOR AND SUBMITTED WITH DRI?
111	(Yes) (No) (N/A)	HAS THE PERIODIC INSPECTION BEEN PERFORMED PRIOR TO USE ON SITE IAW EM 385-1-1, TABLE 16-1 AND 16.D.10?
112	(Yes) (No) (N/A)	IS CRANE EQUIPPED WITH ANTI TWO-BLOCK DEVICE IF REQUIRED?
113	(Yes) (No) (N/A)	IS THE CRANE LEVEL AND ON FIRM GROUND AND OUTRIGGERS IN USE WITH APPROPRIATE CRIBBING?
113	(100) (NA)	
114	(Yes) (No) (N/A)	IAW 16.G.09 WHEN CRANE IS OPERATED WITHIN 20 FOOT OF POWER LINES (OPERATING WORK ZONE IS AREA 360 DEGREES AROUND CRANE) HAS A DETERMINATION BEEN MADE THAT ALL POWER LINES ARE ENERGIZED?
115	(Yes) (No) (N/A)	IAW TABLE 16-3 CRANE NOT ALLOWED TO WORK CLOSER THAN 10 FOOT OF ENERGIZED POWER LINES (DEPENDING ON ACTUAL VOLTAGE OF LINES
116	(Yes) (No) (N/A)	IS CRANE SIDE LOADING PROHIBITED?
117	(Yes) (No) (N/A)	ARE RIGGING CABLES AND SLINGS INSPECTED BY A COMPETENT PERSON BEFORE EACH SHIFT?
118	(Yes) (No) (N/A)	ARE WORKERS PROTECTED FROM THE CRANE SWING RADIUS AND PREVENTED FROM PASSING UNDER THE LOAD?
		OTHER? EXTRA CREDIT?
CONF	INED SPACE	
119	(Yes) (No) (N/A)	ALL CONFINED SPACE WORK IAW EM 385 SECTION 34.A.06?
120	(Yes) (No) (N/A)	IS CONFINED SPACE COMPETENT PERSON (CSCP), IN WRITING, IDENTIFIED?
121	(Yes) (No) (N/A)	IS ATMOSPHERE BEING MONITORED?
122		
-	(Yes) (No) (N/A)	IS SPACE BEING VENTILATED?
123	(Yes) (No) (N/A)	ARE ENTRANTS, ATTENDANTS AND ENTRY SUPERVISOR PROPERLY TRAINED?
124	(Yes) (No) (N/A)	IS RESCUE/RETRIEVAL SYSTEM IN PLACE FOR PERMIT REQUIRED CONFINED PLACES?
125	(Yes) (No) (N/A)	ARE ENTRY PERMITS POSTED AT POINT OF ENTRY AND SIGNED BY ENTRY SUPERVISOR?
126	(Yes) (No) (N/A)	IS THE POINT OF ENTRY POSTED "DANGER CONFINED SPACE"?
127	(Yes) (No) (N/A)	HAS BLANKING OR LOCKING OUT OF SYSTEMS TAKEN PLACE?
		OTHER? EXTRA CREDIT?
ROOF	ING	
128	(Yes) (No) (N/A)	HAS STRUCTURAL ANALYSIS OF THE ROOF BEEN CONDUCTED BY A QUALIFIED PERSON ?
129	(Yes) (No) (N/A)	HAS COMPETENT PERSON COMPLETED A DAILY INSPECTION?
130	(Yes) (No) (N/A)	HAS COMPETENT PERSON DEVELOPED A FALL PROTECTION PLAN, SUBMITTED/ACCEPTED BY GDA?
131	(Yes) (No) (N/A)	ARE KETTLES AT LEAST 25 FEET AWAY FROM BUILDINGS?
132	(Yes) (No) (N/A)	IS KETTLE ATTENDANT WEARING PROPER PPE AT ALL TIMES?
133	(Yes) (No) (N/A)	ARE TWO FIRE EXTINGUISHERS AT THE KETTLE?
134	(Yes) (No) (N/A)	ARE SKYLIGHTS AND ROOF PENETRATIONS COVERED OR BARRICADED APPROPRIATELY?
135	(Yes) (No) (N/A)	HAS THE ROOF BEEN EVALUATED FOR ITS ABILITY TO SUPPORT THE INTENDED CONSTRUCTION LOADS?
136	(Yes) (No) (N/A)	IF WARNING LINES ON LOW SLOPED ROOFS ARE USED, ARE THEY PROPERLY INSTALLED/MAINTAINED?
137	(Yes) (No) (N/A)	ARE FUEL CYLINDERS A MINIMUM OF 10' FROM OPEN FLAME?
		OTHER? EXTRA CREDIT?
EQUI	PMENT	
138	(Yes) (No) (N/A)	ALL MACHINERY OR EQUIPMENT INSPECTED DAILY, WHEN IN USE, BY COMPETENT PERSONS?
139	(Yes) (No) (N/A)	ARE OPERATORS TRAINED AND AUTHORIZED TO OPERATE POWERED INDUSTRIAL TRUCKS, LIFT TRUCKS, AND SIMILAR EQUIPMENT?
140	(Yes) (No) (N/A)	MOBILE EQUIPMENT EQUIPPED WITH BACKUP ALARMS? ROLLOVER CAGES/ MOVING PARTS ADEQUATELY GUARDED?
141		
-	(Yes) (No) (N/A)	ARE EQUIPMENT OPERATIONS MAINTAINING SAFE CLEARANCE FROM ELECTRICAL POWER LINES?
142	(Yes) (No) (N/A)	MODIFICATIONS MEET MANUFACTURER INSTRUCTIONS (I.E., LIFTING PERSONNEL WITH FORKLIFT - (NOT ALLOWED BY MANY MANUFACTURERS)?
143	(Yes) (No) (N/A)	ARE SAFETY LASHINGS PROVIDED FOR HIGH PRESSURE HOSE CONNECTIONS, I.E., AIR COMPRESSORS?
		ADE WORKERS OF FILE OF SUMS OPPOSE ASSOCIATED WITH MODILE CONTROLLED
144	(Yes) (No) (N/A)	ARE WORKERS CLEAR OF BLIND SPOTS ASSOCIATED WITH MOBILE CONSTRUCTION EQUIPMENT?
145	(Yes) (No) (N/A) (Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS?
145 146	(Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL?
145	(Yes) (No) (N/A) (Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS?
145 146	(Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL?
145 146 147	(Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL? WORKERS NOT EXTENDING OVER GUARDRAIL OF AERIAL LIFTS?
145 146 147 148	(Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A) (Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL? WORKERS NOT EXTENDING OVER GUARDRAIL OF AERIAL LIFTS? ARE ARTICULATING BOOM PLATFORMS (JLG TYPE) USED WITH FULL BODY HARNESS ATTACHED TO PROPER ATTACHMENT POINTS ON BOOM OR BASKET?
145 146 147 148 149	(Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL? WORKERS NOT EXTENDING OVER GUARDRAIL OF AERIAL LIFTS? ARE ARTICULATING BOOM PLATFORMS (JLG TYPE) USED WITH FULL BODY HARNESS ATTACHED TO PROPER ATTACHMENT POINTS ON BOOM OR BASKET? ARE DUMP TRUCK CHECKLISTS BEING USED AND COPIES KEPT ON SITE?
145 146 147 148 149	(Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL? WORKERS NOT EXTENDING OVER GUARDRAIL OF AERIAL LIFTS? ARE ARTICULATING BOOM PLATFORMS (JLG TYPE) USED WITH FULL BODY HARNESS ATTACHED TO PROPER ATTACHMENT POINTS ON BOOM OR BASKET? ARE DUMP TRUCK CHECKLISTS BEING USED AND COPIES KEPT ON SITE? INSPECTION, MAINTENANCE, AND REPAIRS TO CONVEYORS PERFORMED IAW MANUFACTURER'S RECOMMENDATIONS BY QUALIFIED PERSONNEL?
145 146 147 148 149 150	(Yes) (No) (N/A)	ARE DAILY WALK AROUND INSPECTIONS OF AERIAL LIFTS PERFORMED AND DOCUMENTED BY QUALIFIED OPERATORS? DO AERIAL LIFTS HAVE BASKET/PLATFORM WITH GUARDRAIL? WORKERS NOT EXTENDING OVER GUARDRAIL OF AERIAL LIFTS? ARE ARTICULATING BOOM PLATFORMS (JLG TYPE) USED WITH FULL BODY HARNESS ATTACHED TO PROPER ATTACHMENT POINTS ON BOOM OR BASKET? ARE DUMP TRUCK CHECKLISTS BEING USED AND COPIES KEPT ON SITE? INSPECTION, MAINTENANCE, AND REPAIRS TO CONVEYORS PERFORMED IAW MANUFACTURER'S RECOMMENDATIONS BY QUALIFIED PERSONNEL? EXPOSED MOVING MACHINERY PARTS MECHANICALLY OR ELECTRICALLY GUARDED?

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		CONTRACTOR SAFETY SELF- EVALUATION CHECKLIST				
TREE	MAINTENANCE	ND REMOVAL				
153	(Yes) (No) (No)	A) ALL TREE MAINTENANCE OR REMOVAL PERFORMED UNDER THE DIRECTION OF A QUALIFIED TREE WORKER?				
154	(Yes) (No) (No)	A) ONLY QUALIFIED LINE-CLEARANCE TREE TRIMMER OR LINE-CLEARANCE TRAINEE ASSIGNED TO WORK IN CLOSE PROXIMITY TO ELECTRICAL HAZARDS?				
155	(Yes) (No) (No)	A) TREE WORKERS IN A BUCKET OR WORK PLATFORM USING FALL PROTECTION				
156	(Yes) (No) (I	A) ALL TREE WORK OPERATIONS ABOVE 12 FOOT HAVE A 2ND WORKER IN THE AREA				
157	(Yes) (No) (I	A) PRIOR TO FELLING OPERATIONS HAS WORK AREA BEEN CLEARED AND ESCAPE ROUTE PLANNED?				
158	(Yes) (No) (I	ALL EMPLOYEES WORKING FROM THE UPHILL SIDE WHENEVER POSSIBLE?				
DEMO	LITION					
159	(Yes) (No) (No)	A) HAS DEMOLITION PLAN, BASED ON ENGINEERING, LEAD, AND ASBESTOS SURVEY BY A REGISTERED PROFESSIONAL ENGINEER BEEN ACCEPTED?				
160	(Yes) (No) (I	A) WASTE NOT BEING DROPPED > 6' UNLESS IN AN ENCLOSED CHUTE AND AREA SECURED FROM TRAFFIC?				
161	(Yes) (No) (I	A) FOR BUILDING DEMOLITION, HAS NOTIFICATION BEEN MADE TO STATE HAVING JURISDICTION?				
162	(Yes) (No) (I	A) ARE NAILS REMOVED FROM SCRAP LUMBER/MATERIALS?				
163	(Yes) (No) (I	A) FRAGMENTATION OF GLASS CONTROLLED?				
164	(Yes) (No) (I	A) MATERIAL CHUTES AT AN ANGLE GREATER THAN 45° FROM THE HORIZONTAL ENCLOSED?				
		OTHER? EXTRA CREDIT?				
ABATI	EMENT					
165	(Yes) (No) (No)	A) HAS ABATEMENT PLAN BEEN SUBMITTED AND ACCEPTED?				
166	(Yes) (No) (I	A) IS INDEPENDENT AIR MONITORING BEING PERFORMED AS REQUIRED INSIDE AND OUTSIDE BARRIERS?				
167	(Yes) (No) (I	A) IS CONTAINMENT IN PLACE WITHOUT INTEGRITY COMPROMISE?				
168	(Yes) (No) (I					
169	(Yes) (No) (I					
170	(Yes) (No) (I	A) HAS BASELINE BEEN PERFORMED AND NECESSARY FINAL CLEARANCE READINGS TAKEN?				
171	(Yes) (No) (I					
172	(Yes) (No) (I					
173	(Yes) (No) (I					
174	(Yes) (No) (I					
	() (-) (OTHER? EXTRA CREDIT?				
WATE	RFRONT ACTIV					
			CTION			
175	(Yes) (No) (I	WORK OVER OR NEAR WATER AND THE DISTANCE TO WATER SURFACE IS LESS THAN 25 FEET OR MORE AND THE WATER DEPTH IS LESS THAN 10 FEET ARE FALL PROTEIN REQUIREMENTS FOLLOWED? (PFDs NOT REQUIRED)	CHON			
176	(Yes) (No) (I	A) WORK OVER OR NEAR WATER AND THE DISTANCE TO WATER SURFACE IS 25 FEET OR MORE ARE FALL PROTECTION REQUIREMENTS FOLLOWED?				
177	(Yes) (No) (I					
178	(Yes) (No) (I					
179	(Yes) (No) (I					
180	(Yes) (No) (I					
181	(Yes) (No) (I					
	(100) (10) (1	, , , , , , , , , , , , , , , , , , , ,				
182	(Yes) (No) (I	IF DIVING, IS FIRST-AID KIT, OXYGEN RESUSCITATION SYSTEM, (30 MINUTE SUPPLY), AND A STOKES LITTER OR BACKBOARD WITH FLOATATION CAPABILITY ON SITE?				
183	(Yes) (No) (I	A) DOES DIVE TEAM CONSIST OF PROPER NUMBER AND QUALIFICATIONS FOR EMPLOYEES?				
184	(Yes) (No) (I					
185	(Yes) (No) (I					
	() (-) (OTHER? EXTRA CREDIT?				
	SCORING: Tot	applicable for each category = X (where X includes responses for category of "Yes" and "No" but does not include N/A)				
\vdash		with "Yes" responses for each category = Y *SCORE EQUATION = Y/X *				
\vdash		CH CATEGORY:				
		1. PREPARATORY PHASE: 7. LADDER SAFETY: 13.EQUIPMENT:				
		2. OFFICE TRAILER: 8. EXCAVATIONS: 14. TREE MAINTENANCE :				
\vdash		3. FIRE PREVENTION: 9. ELECTRICAL: 15. DEMOLITION:				
\vdash		4. PPE : 10. CRANES: 16: ABATEMENT:				
		5. SCAFFOLD SAFETY: 11. CONFINED SPACES: 17: WATERFRONT:				
\vdash		6. FALL PROTECTION: 12. ROOFING:				
\vdash		W. FALL FROTESTION. 12: ROOFING.				
	OVERALL BAT	IG OF CHECKLIST EQUALS LOWEST RATING FOR ANY ONE CATEGORY:				
\vdash						
\vdash	QUESTIONS A	SWERED "NO" ARE BE ENTERED INTO THE SITE SAFETY & OCCUPATIONAL HEALTH DEFICIENCY TRACKING SYSTEM (REFER TO EM 385-1-1 01.A.12.d)				
	COMMENTS:	ALTERATION OR CHANGING OF THIS FORM IS NOT AUTHORIZED				
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