

Form 1: Contractor Notification Project Hazard Assessment

The following hazard assessment is to be reviewed by the Project Manager and the Contractor/Vendor prior to initiating the project.

Project Name/Work Order #: Pipe repair and replacement. Project Dates: August 10, 2021

Contractor/Vendor (print name): Acme Supply PCC Project Manager (print name): Jane Smith

Description of the Project: Underground pipe repair

| Safety Issue/Description | Reviewed | N/A | Additional comments or information |
|--|----------|-----|---|
| Contractor Environmental, Health and Safety Contacts: | | | |
| Project Manager/Contact Information <u>Sara Acme 503-555-1212</u> | ✓ | | |
| Superintendent/Contact Information <u>Bill Acme 971-555-1212</u> | ✓ | | |
| EH&S Manager/Contact Information <u>Brad Lee 206-555-1212</u> | ✓ | | |
| Hazard Review and Notification: | | | |
| Impacted employees are informed of scope of work and associated hazards | ✓ | | |
| Contractor/Vendor must notify Project Manager of any accidents/incidents at the work site | ✓ | | |
| Contractor/Vendor must notify Project Manager of any regulatory inspections, complaints or consultations | ✓ | | |
| Provide safety and environmental updates during Owner, Architect and Contractor (OAC) Meetings | ✓ | | |
| Emergency Medical and First Aid: | | | |
| PCC Public Safety Emergency Phone: 971-722-4444 (non-emergency x4092) | ✓ | | |
| Contractor/Vendor is responsible for their own first aid personnel and supplies | ✓ | | |
| Review AED and eye wash/safety shower locations | ✓ | | |
| Infectious Disease Protections: | | | |
| Procedures and protocols for face coverings, distancing, pre-screening, as needed | ✓ | | |
| Contractor/Vendor has a site safety plan for infectious disease prevention | ✓ | | |
| Contractor/Vendor will designate a social distancing officer, if required | ✓ | | |
| Emergency Evacuation and Alarm System: | | | |
| Review map and evacuation routes for the campus/center | ✓ | | |
| Review emergency response for building alarms, fire or evacuation, active threats | ✓ | | |
| Work Zone Hazard Notification: | | | |
| Contractor/Vendor to provide all signs, barricades, or hazard warnings at the work site | ✓ | | <u>Excavation fenced and/or covered with road plates.</u> |
| Communication to affected employees regarding the signs or barricades in use | ✓ | | |
| Waste Management and Housekeeping: | | | |
| Contractor/Vendor is responsible for waste disposal: general, hazardous, and universal | ✓ | | |
| Discuss waste accumulation/storage areas | ✓ | | |
| Project Manager will state final cleanup expectations | ✓ | | |
| Spill and Release Prevention and Response | | | |
| Potential sources identified | ✓ | | <u>No bulk storage on site. Equipment and trucks have spill kits.</u> |
| Proper storage including containment provided | ✓ | | |
| Spill response supplies immediately available: absorbent material and secondary containers | ✓ | | |

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|--|-----------|-------------|--------|----------|-----|--|
| Stormwater | | | | | | |
| Stormwater management systems identified and reviewed. | | | | ✓ | | Competent Person: Bill Acme BMPs will installed 08/10/2021, First day of work. |
| Discuss erosion control and other protective measures implemented by Contractor/Vendor | | | | ✓ | | |
| Date for installation of Best Management Practices (BMPs). | | | | ✓ | | |
| Surrounding Area Impact | | | | | | |
| Potential Dust/Vapors/Fumes Sources | | | | ✓ | | Spoil piles covered. |
| Outdoor Air Quality/Indoor Air Quality Control Measures: substitution, ventilation, filtration, etc. | | | | ✓ | | |
| Noise/Vibration Sources | | | | ✓ | | |
| Noise and Vibration Control Measures: alternative methods, sound barriers, work hours, etc. | | | | ✓ | | |
| Monitoring | | | | ✓ | | |
| Personal Protective Equipment requirements: | | | | | | |
| Contractor/Vendor will provide PPE and related training for their employees | | | | ✓ | | List other PPE: High visibility vests |
| Check all required | Hand ✓ | Foot ✓ | Body | ✓ | | |
| Eye ✓ | Hearing ✓ | Respiratory | Head ✓ | | | |
| Equipment: | | | | | | |
| Discuss the equipment which will be used (PIT, scissor lifts, cranes, hoists, etc.) | | | | ✓ | | Excavator, trucks, plate compactor and welding equipment |
| Contractor/Vendor will provide their own equipment and training for their employees | | | | ✓ | | |
| Fall Protection: | | | | | | |
| An appropriate fall protection system will be implemented (guardrails, anchors, etc.) | | | | ✓ | | Competent Person: Bill Acme |
| Contractor/Vendor will provide appropriate fall protection PPE and training | | | | ✓ | | |
| Contractor/Vendor will provide an appropriate ladder/training for work requiring ladder usage | | | | ✓ | | |
| Scaffold Use: | | | | | | |
| Contractor/Vendor has a scaffold safety program | | | | | ✓ | Competent Person: |
| Safety program includes protocols for daily inspections | | | | | ✓ | |
| Excavation, Trenching, and Shoring: | | | | | | |
| Contractor/Vendor will locate underground utilities before work begins | | | | ✓ | | Competent Person: Bill Acme |
| Competent person will complete a soil classification | | | | ✓ | | |
| Shoring boards and protective systems have been inspected | | | | ✓ | | |
| Hazard Communication Program: | | | | | | |
| Discuss what PCC chemical hazards are present in the work area and workplace labeling | | | | ✓ | | Contractor/Vendor SDS submitted on: 08/05/2021 |
| Discuss what precautions are in place to lessen potential exposure (ventilation, etc.) | | | | ✓ | | |
| Discuss Contractor/Vendor chemicals and access PCC's SDS inventory | | | | ✓ | | |
| Discuss where and how Contractor/Vendor's chemicals will be stored and secured | | | | ✓ | | |

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|---|----------|----------------------------------|--------|-------------------|----------------------------------|-----|--|
| Hazardous Building Materials: | | | | | | | |
| Material | asbestos | lead | silica | mold | | ✓ | Additional analysis needed: Y/N |
| Project Manager to review previous testing information | | | | | | ✓ | |
| Contractor/Vendor will be performing abatement or encapsulation work | | | | | | ✓ | |
| Asbestos contractor approved by DEQ and ensures employees are certified | | | | | | ✓ | |
| Hot Work and Welding: | | | | | | | |
| PCC's Hot Work program has been reviewed | | | | | ✓ | | Contractor Hot Work Coordinator Bill Acme |
| Dual permitting paperwork has been reviewed/completed | | | | | ✓ | | |
| Review any work that impacts the building fire suppression system and/or alarms | | | | | ✓ | | |
| Contractor Representative Sara Acme | | Representative Signature | | <i>Sara Acme</i> | CCB Number: 7779311 | | |
| Project Manager Name Jane Smith | | Project Manager Signature | | <i>Jane Smith</i> | Date Reviewed: 08/08/2021 | | |