|  |
| --- |
| **Details** |

|  |  |  |  |
| --- | --- | --- | --- |
|  **Project(s):** |  | **Date:** |  |
| **Building:** |  | **Inspected By:** |  |
| **Location:** |  | **Reviewed with:** |  |
| **Contractor(s) Observed:**  |  |
| **Category : Sub-Category** |

|  |  |  |  |  |  |  |
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| 1. **Administration**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Documenting pre-construction meetings**
 |  |  |  |  |  |  |  |
| 1. **Safety Inspections frequently / daily**
 |  |  |  |  |  |  |  |
| 1. **PTWP’s submitted for all trades/ tasks**
 |  |  |  |  |  |  |  |
| 1. **Pre-Task Plans conducted daily**
 |  |  |  |  |  |  |  |
| 1. **SDS manual**
 |  |  |  |  |  |  |  |
| 1. **Orientations conducted**
 |  |  |  |  |  |  |  |
| 1. **OSHA 30 Certified Sub On-Site**
 |  |  |  |  |  |  |  |
| 1. **OSHA 10 Trained employees**
 |  |  |  |  |  |  |  |
| 1. **OSHA Posters / OSHA 300 log posted between February 1 to April 30**
 |  |  |  |  |  |  |  |
| 1. **Safety Committee meetings**
 |  |  |  |  |  |  |  |
| 1. **Safety manual**
 |  |  |  |  |  |  |  |
| 1. **State / Fed Posters (English / Spanish)**
 |  |  |  |  |  |  |  |
| 1. **Tool Box Talks (weekly)**
 |  |  |  |  |  |  |  |
| 1. **Visitor release sign-in form**
 |  |  |  |  |  |  |  |
| 1. **Pre-start Subcontractor Package Completed (certifications, competent persons, OCIP enrollment, EMR info, competent persons etc..)**
 |  |  |  |  |  |  |  |

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| 1. **Air Operations Area (AOA)**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **FOD: Containers Covered**
 |  |  |  |  |  |  |  |
| 1. **No more than 3-inch elevation drop**
 |  |  |  |  |  |  |  |
| 1. **Barricades lit (lights continuous burn) & separated 5 feet on center**
 |  |  |  |  |  |  |  |
| 1. **Barricades filled with water**
 |  |  |  |  |  |  |  |
| 1. **OFA (flagged or marked, clear)**
 |  |  |  |  |  |  |  |
| 1. **RSA (flagged, clear of objects at end of shift)**
 |  |  |  |  |  |  |  |
| 1. **Escort Procedures Followed**
 |  |  |  |  |  |  |  |
| 1. **SIDA training /Valid Driver’s license**
 |  |  |  |  |  |  |  |
| 1. **Excavation barricaded using lighted barricaded and lights on each end of each barricade**
 |  |  |  |  |  |  |  |
| 1. **Flaggers on Active Runways**
 |  |  |  |  |  |  |  |
| 1. **Flagmen wearing Correct PPE**
 |  |  |  |  |  |  |  |
| 1. **Flagmen have two flags for flagging/lighted batons at night**
 |  |  |  |  |  |  |  |
| 1. **Have lights been properly placed for nighttime flagging**
 |  |  |  |  |  |  |  |
| 1. **Properly placed MOT**
 |  |  |  |  |  |  |  |
| 1. **Light Buckets and Class II barricades**
 |  |  |  |  |  |  |  |
| 1. **Notify OPS working near secured area Potomac river (DCA only)**
 |  |  |  |  |  |  |  |
| 1. **Items placed 10 feet from perimeter fence.**
 |  |  |  |  |  |  |  |
| 1. **Proper procedures for closure/ OPS notified/Permission from OPS and Tower to close any area**
 |  |  |  |  |  |  |  |
| 1. **Notified OPS for inspection prior to opening closed area/FOD**
 |  |  |  |  |  |  |  |
| 1. **Travel areas (RW’s, TW’s, service road, Levy road if at DCA, and all roads used) free of debris, mud, gravel etc.**
 |  |  |  |  |  |  |  |
| 1. **Escorts following tower contact procedures during inclement weather.**
 |  |  |  |  |  |  |  |
| 1. **Parking unauthorized vehicles on AOA**
 |  |  |  |  |  |  |  |
| 1. **Operating unauthorized equipment on highways /AOA**
 |  |  |  |  |  |  |  |
| 1. **Reviewing SIDA rules with contractors**
 |  |  |  |  |  |  |  |

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| 1. **Concrete/Masonry**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Competent Person Provided**
 |  |  |  |  |  |  |  |
| 1. **Chemical resistant gloves worn**
 |  |  |  |  |  |  |  |
| 1. **Face shields /safety goggles worn**
 |  |  |  |  |  |  |  |
| 1. **Elevated work platform for wood cutting**
 |  |  |  |  |  |  |  |
| 1. **Cutting free hand prohibited**
 |  |  |  |  |  |  |  |
| 1. **Dust control implemented**
 |  |  |  |  |  |  |  |
| 1. **Rebar protected from impalement hazard**
 |  |  |  |  |  |  |  |
| 1. **Eyewash station available within 50 feet of work**
 |  |  |  |  |  |  |  |
| 1. **Fall protect plan submitted if working over six feet**
 |  |  |  |  |  |  |  |
| 1. **Masonry saws guarded**
 |  |  |  |  |  |  |  |
| 1. **Masonry saws used as intended purpose/wet or dry**
 |  |  |  |  |  |  |  |
| 1. **Dead man switches used on equipment/tools**
 |  |  |  |  |  |  |  |
| 1. **Cover closed on mortar mixer**
 |  |  |  |  |  |  |  |
| 1. **Compressor air hose nozzle has pressure reducer/chip guard**
 |  |  |  |  |  |  |  |
| 1. **Concrete buckets have positive safety latches**
 |  |  |  |  |  |  |  |
| 1. **Compressor air hoses equipped with positive fail safe joint connectors/OSHA safety valve**
 |  |  |  |  |  |  |  |
| 1. **Shoring adequate for concrete load**
 |  |  |  |  |  |  |  |
| 1. **Shoring plan submitted/ PE stamped**
 |  |  |  |  |  |  |  |
| 1. **Formwork designed, fabricated, erected supported, braced properly**
 |  |  |  |  |  |  |  |
| 1. **Shoring has been inspected**
 |  |  |  |  |  |  |  |
| 1. **Forms and shores prohibited to remove until determined by break test of sufficient strength**
 |  |  |  |  |  |  |  |
| 1. **Fall protection required when climbing rebar or form work**
 |  |  |  |  |  |  |  |
| 1. **Signs posted for stripping operations**
 |  |  |  |  |  |  |  |
| 1. **Protruding nails removed or bent down**
 |  |  |  |  |  |  |  |

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| 1. **Confined Space**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **CSE Competent Person on Site**
 |  |  |  |  |  |  |  |
| 1. **Permit required? Confined space permits visible at the point of entry**
 |  |  |  |  |  |  |  |
| 1. **Atmospheric conditions tested at 4 feet**
 |  |  |  |  |  |  |  |
| 1. **IDLH atmosphere conditions exist rescue on stand by**
 |  |  |  |  |  |  |  |
| 1. **Attendant / entrant communication**
 |  |  |  |  |  |  |  |
| 1. **Electrical / fire prevention**
 |  |  |  |  |  |  |  |
| 1. **Entry supervisor / monitor**
 |  |  |  |  |  |  |  |
| 1. **Harness / extraction equip**
 |  |  |  |  |  |  |  |
| 1. **Area secured / confined space signage posted**
 |  |  |  |  |  |  |  |
| 1. **Regular inspection / 4 gas air monitor**
 |  |  |  |  |  |  |  |
| 1. **Gas meter calibrated / field check prior to entry**
 |  |  |  |  |  |  |  |
| 1. **Rescue plan / emergency #'s / training**
 |  |  |  |  |  |  |  |
| 1. **Respiratory equipment / training / physician pulmonary testing done / fit test**
 |  |  |  |  |  |  |  |
| 1. **Training documentation**
 |  |  |  |  |  |  |  |
| 1. **Ventilation adequate / mechanical ventilation needed**
 |  |  |  |  |  |  |  |
| 1. **Permit filled out correctly**
 |  |  |  |  |  |  |  |
| 1. **Housekeeping in/ around confined space**
 |  |  |  |  |  |  |  |
| 1. **Gas powered tool prohibited in a confined space**
 |  |  |  |  |  |  |  |
| 1. **Welding tanks prohibited in confined space**
 |  |  |  |  |  |  |  |

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| 1. **Cranes and Hoisting Equipment**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Competent Person Provided**
 |  |  |  |  |  |  |  |
| 1. **Airport Operations/FAA approved location, time, & height of crane. Light (night) & flag provided as required by FAA**
 |  |  |  |  |  |  |  |
| 1. **Anti -Two Block device**
 |  |  |  |  |  |  |  |
| 1. **Boom angle indicator**
 |  |  |  |  |  |  |  |
| 1. **Certification of crane operator (NCCCO)**
 |  |  |  |  |  |  |  |
| 1. **Riggers and Signal man certified by Crane Tech, NCCCO, or Crane Institute of America**
 |  |  |  |  |  |  |  |
| 1. **All rigging shall be American made. Chinese rigging is prohibited**
 |  |  |  |  |  |  |  |
| 1. **Crane pad checked for load bearing/ testing soil analysis results submitted**
 |  |  |  |  |  |  |  |
| 1. **Crane supported and level w/ proper compaction of soils under crane support**
 |  |  |  |  |  |  |  |
| 1. **Daily inspections current**
 |  |  |  |  |  |  |  |
| 1. **Distance from power lines / de-energized 20 ft. or greater w/ higher voltages, (see chart)**
 |  |  |  |  |  |  |  |
| 1. **Fire extinguisher in crane (tagged & charged)**
 |  |  |  |  |  |  |  |
| 1. **Certified VDOT flagman identified/trained. Class E reflective pants for night required**
 |  |  |  |  |  |  |  |
| 1. **Lift plan on file**
 |  |  |  |  |  |  |  |
| 1. **Critical lift plan /PE stamped**
 |  |  |  |  |  |  |  |
| 1. **Tandem Lift, (2 operators – 1 coordinator)**
 |  |  |  |  |  |  |  |
| 1. **Load chart posted**
 |  |  |  |  |  |  |  |
| 1. **Loads properly rigged / Master Rigger on critical lifts, class 2 rigger on all lifts**
 |  |  |  |  |  |  |  |
| 1. **Means of communication**
 |  |  |  |  |  |  |  |
| 1. **Operator appears competent**
 |  |  |  |  |  |  |  |
| 1. **Operator manual in crane**
 |  |  |  |  |  |  |  |
| 1. **Outrigger extended / adequate cribbing/ min. 6x6 blocking over 30 tons, or approved engineered mats by the PSM**
 |  |  |  |  |  |  |  |
| 1. **Rigging inspected / rated/ American made only**
 |  |  |  |  |  |  |  |
| 1. **Rigging tags legible**
 |  |  |  |  |  |  |  |
| 1. **Safety latches used**
 |  |  |  |  |  |  |  |
| 1. **Swing radius barricaded/ No Danger/Caution Tape**
 |  |  |  |  |  |  |  |
| 1. **Tag lines used**
 |  |  |  |  |  |  |  |
| 1. **Weight of load field verified**
 |  |  |  |  |  |  |  |
| 1. **Annual crane inspection current / third party inspection after assembly available**
 |  |  |  |  |  |  |  |
| 1. **Proper hand signals being used**
 |  |  |  |  |  |  |  |
| 1. **Distance / Radius of crane pick field verified**
 |  |  |  |  |  |  |  |

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| 1. **Electrical**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Cords in good condition / proper size minimum 12 AWG**
 |  |  |  |  |  |  |  |
| 1. **Cords protected from traffic / water**
 |  |  |  |  |  |  |  |
| 1. **Elect Hot Work Procedures**
 |  |  |  |  |  |  |  |
| 1. **Electrical room protected and locked**
 |  |  |  |  |  |  |  |
| 1. **Energized parts protected**
 |  |  |  |  |  |  |  |
| 1. **GFCI's used / tested monthly**
 |  |  |  |  |  |  |  |
| 1. **LO/TO procedures followed**
 |  |  |  |  |  |  |  |
| 1. **Proper temp lighting**
 |  |  |  |  |  |  |  |
| 1. **Proper use temp power boxes**
 |  |  |  |  |  |  |  |
| 1. **Electrical panels 3 feet clearance**
 |  |  |  |  |  |  |  |
| 1. **Signage present Authorized personnel only**
 |  |  |  |  |  |  |  |
| 1. **Arc Flash Exposure, NFPA 70**
 |  |  |  |  |  |  |  |

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| 1. **Environmental**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Airborne contaminants**
 |  |  |  |  |  |  |  |
| 1. **Concrete cut wet & vacuumed**
 |  |  |  |  |  |  |  |
| 1. **Hazard Material storage/use/disposal**
 |  |  |  |  |  |  |  |
| 1. **Nuisance dust**
 |  |  |  |  |  |  |  |
| 1. **Spill containment adequate, reported.**
 |  |  |  |  |  |  |  |
| 1. **Granite / Silica dust controlled**
 |  |  |  |  |  |  |  |
| 1. **SWPP Plan Available**
 |  |  |  |  |  |  |  |

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| 1. **Excavation**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Competent person present**
 |  |  |  |  |  |  |  |
| 1. **Access/Egress (ladder, ramp, stair) with 25' laterally**
 |  |  |  |  |  |  |  |
| 1. **Utilities marked and checked prior to excavating. GIS plans,contract drawings, and as-builts checked.**
 |  |  |  |  |  |  |  |
| 1. **Utilities visually located by hand digging using non-conductive tools, potholing or hydro excavating**
 |  |  |  |  |  |  |  |
| 1. **Airports Authority Excavation Permit filled out**
 |  |  |  |  |  |  |  |
| 1. **Daily inspections doc**
 |  |  |  |  |  |  |  |
| 1. **Excavation > 20' engineered.**
 |  |  |  |  |  |  |  |
| 1. **Employees protected from cave in when entering or exiting the excavation.**
 |  |  |  |  |  |  |  |
| 1. **Perimeter protection/barricade snow fence 6 feet back/ lights**
 |  |  |  |  |  |  |  |
| 1. **Sloped, benched, or shored correctly**
 |  |  |  |  |  |  |  |
| 1. **Spoil piles 2' from edge**
 |  |  |  |  |  |  |  |
| 1. **Surface encumbrances removed or supported**
 |  |  |  |  |  |  |  |
| 1. **Surface traffic exposure/hard barricade in place**
 |  |  |  |  |  |  |  |
| 1. **Water entering excavation / dewatering in place**
 |  |  |  |  |  |  |  |
| 1. **Employees prohibited from being under overhead loads (e.g. pipes)**
 |  |  |  |  |  |  |  |
| 1. **Proper Shoring provided if needed**
 |  |  |  |  |  |  |  |
| 1. **Additional Lighting provided at night**
 |  |  |  |  |  |  |  |
| 1. **Excavation protected with a guardrail system when sheer waals of trench/excavation is over 6 feet.**
 |  |  |  |  |  |  |  |
| 1. **Trench box data available**
 |  |  |  |  |  |  |  |
| 1. **Trench box free of defects / structurally sound**
 |  |  |  |  |  |  |  |
| 1. **Trench box pins in place / secured**
 |  |  |  |  |  |  |  |
| 1. **Trench box open ends are shielded or sloped 11/2:1 ( all soils are classiefied as “C” Type at the airports)**
 |  |  |  |  |  |  |  |
| 1. **Trench box 18 inches above grade**
 |  |  |  |  |  |  |  |

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| 1. **Fall Protection**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Exterior/interior guardrails**
 |  |  |  |  |  |  |  |
| 1. **Fall protection at 6' (Mandatory)**
 |  |  |  |  |  |  |  |
| 1. **Fall protection plan/submitted**
 |  |  |  |  |  |  |  |
| 1. **Floor/wall openings protected**
 |  |  |  |  |  |  |  |
| 1. **Floor covers adequate for loads imposed upon them, marked, secured, and labeled. Can hold 2 x load of heaviest equipment in work area**
 |  |  |  |  |  |  |  |
| 1. **Impalement Protection**
 |  |  |  |  |  |  |  |
| 1. **Proper anchorage points**
 |  |  |  |  |  |  |  |
| 1. **Roof edge protected**
 |  |  |  |  |  |  |  |
| 1. **Safety harness and correct fall arrest systems used under 181/2 feet (retractable only)**
 |  |  |  |  |  |  |  |
| 1. **Retractable lanyard/ Swing Fall Hazard**
 |  |  |  |  |  |  |  |
| 1. **Fall protection used within 5 years of manufacturer issue date/tags legible**
 |  |  |  |  |  |  |  |
| 1. **Horizontal life lines designed system or approved by PE**
 |  |  |  |  |  |  |  |
| 1. **Ladder openings properly protected**
 |  |  |  |  |  |  |  |
| 1. **Vertical Lifelines Set-up and used properly (no slack in line from anchorage point)**
 |  |  |  |  |  |  |  |
| 1. **Lifelines protected from abrasion**
 |  |  |  |  |  |  |  |
| 1. **Controlled Access Zone / Warning lines / Safety Monitor systems are prohibited.**
 |  |  |  |  |  |  |  |

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| 1. **Fire Protection**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Emergency vehicle access maintained**
 |  |  |  |  |  |  |  |
| 1. **Fire Hydrant shall be protected and access maintained**
 |  |  |  |  |  |  |  |
| 1. **Fire extinguisher charged and inspected**
 |  |  |  |  |  |  |  |
| 1. **Fire Extinguisher kept in cabinet or mounted to wall**
 |  |  |  |  |  |  |  |
| 1. **Fire extinguishers located at each level at stairways and at storage sheds**
 |  |  |  |  |  |  |  |
| 1. **Fire extinguisures visible accessable and located 30 feet from hot work being performed**
 |  |  |  |  |  |  |  |
| 1. **Fire extinguishers at fuel dispensing/storage areas >25 feet <75 feet from site**
 |  |  |  |  |  |  |  |
| 1. **Other fire exstinbguishers accessable within a travel distance of 75 feet.**
 |  |  |  |  |  |  |  |
| 1. **Valid Hot Work Permitobtained and posted at the Hot Work site location. Outage form shall also be posted**
 |  |  |  |  |  |  |  |
| 1. **Fire watch 30 min after hot work completed. Firewatch shall be identified by different color hard hat or a mutually agreed upon by the contractor and the Airports Authority**
 |  |  |  |  |  |  |  |
| 1. **Combustibles removed 35 feet away from Hot Work**
 |  |  |  |  |  |  |  |
| 1. **Proper signs posted in storage areas such as “No Smoking”**
 |  |  |  |  |  |  |  |
| 1. **UL Approved Safety cans used for fuel containment. . Plastic gas cans are prohibited**
 |  |  |  |  |  |  |  |
| 1. **UL Approved safety fuel cans shall have spring loaded cap and flash arrestor screens**
 |  |  |  |  |  |  |  |
| 1. **Fuel dispensing / fuel storage fire extinguisher located > 25’, <75’**
 |  |  |  |  |  |  |  |
| 1. **Compressed gasses shall be capped, secured from falling, and protected from vehicle impact. Shall not be stored in the building**
 |  |  |  |  |  |  |  |
| 1. **Compressed gases shall be stored in storage cages outside the building with proper signage**
 |  |  |  |  |  |  |  |
| 1. **Trash containers shall be emptied at the end of each shift (mandatory)**
 |  |  |  |  |  |  |  |
| 1. **Trash dumpsters shall be covered and secured at all times with a flame retardant cover**
 |  |  |  |  |  |  |  |
| 1. **Smoking is prohibited on site. Smoking is only allowed in areas approved by the Airports Authority Fire Marshall.**
 |  |  |  |  |  |  |  |
| 1. **Only “Green” Fire Hydrants can be used by the contractor as the Red Fire Hydrants are for the dedicated fire system.**
 |  |  |  |  |  |  |  |

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| 1. **Hand and Power Tools**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Anti-whip connections attach to pressurized lines/Pinned**
 |  |  |  |  |  |  |  |
| 1. **Auto shut off/safety switches**
 |  |  |  |  |  |  |  |
| 1. **Cord in good condition**
 |  |  |  |  |  |  |  |
| 1. **Ground prong in place where applicable**
 |  |  |  |  |  |  |  |
| 1. **Guards in place**
 |  |  |  |  |  |  |  |
| 1. **Information label on tool**
 |  |  |  |  |  |  |  |
| 1. **Proper tool for the job**
 |  |  |  |  |  |  |  |
| 1. **Tool used for its intended purpose**
 |  |  |  |  |  |  |  |
| 1. **Tool in good condition**
 |  |  |  |  |  |  |  |
| 1. **Strain relief functioning**
 |  |  |  |  |  |  |  |
| 1. **Powder actuated tool used properly/training**
 |  |  |  |  |  |  |  |
| 1. **Unspent powder actuated shots disposed properly (water can)**
 |  |  |  |  |  |  |  |
| 1. **Powder actuated tool training documented**
 |  |  |  |  |  |  |  |
| 1. **Powder actuated tool secured in SIDA area (if approved by Airport Operations)**
 |  |  |  |  |  |  |  |
| 1. **Powder actuated tool shots shall be lead free and low velosity**
 |  |  |  |  |  |  |  |
| 1. **Using work bench waist high for cutting operations**
 |  |  |  |  |  |  |  |
| 1. **Chop saw mounted to work bench**
 |  |  |  |  |  |  |  |
| 1. **Trash receptacle next to work bench**
 |  |  |  |  |  |  |  |

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| 1. **Hazard Communication**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Copy of Hazard Communication Program**
 |  |  |  |  |  |  |  |
| 1. **Employees trained in global harmonization system**
 |  |  |  |  |  |  |  |
| 1. **Inventory list / Hazardous Inventory List**
 |  |  |  |  |  |  |  |
| 1. **Safety Data Sheets (SDS) attached to PTWP at work site location where work is being performed**
 |  |  |  |  |  |  |  |
| 1. **Proper labels on containers / Placards posted.**
 |  |  |  |  |  |  |  |
| 1. **SDS readily available**
 |  |  |  |  |  |  |  |
| 1. **MWAA FD provided copies of SDS**
 |  |  |  |  |  |  |  |

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| 1. **Housekeeping**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Work Areas kept clean**
 |  |  |  |  |  |  |  |
| 1. **Clear access to building / site**
 |  |  |  |  |  |  |  |
| 1. **Proper material storage**
 |  |  |  |  |  |  |  |
| 1. **Slip, trip, fall hazards addressed**
 |  |  |  |  |  |  |  |
| 1. **Trash in protected container**
 |  |  |  |  |  |  |  |
| 1. **Walkways clear / unobstructed**
 |  |  |  |  |  |  |  |
| 1. **Electrical cords off ground / out of water**
 |  |  |  |  |  |  |  |
| 1. **Work stations elevated**
 |  |  |  |  |  |  |  |

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| 1. **Ladders**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Three Points of contact using ladder**
 |  |  |  |  |  |  |  |
| 1. **Working off top two steps prohibited**
 |  |  |  |  |  |  |  |
| 1. **Metal Ladders and Platform ladders prohibited**
 |  |  |  |  |  |  |  |
| 1. **Bottom of ladder clear of debris**
 |  |  |  |  |  |  |  |
| 1. **Defective ladder**
 |  |  |  |  |  |  |  |
| 1. **Extension ladder secured and 3 feet past landing**
 |  |  |  |  |  |  |  |
| 1. **Step ladder locked properly**
 |  |  |  |  |  |  |  |
| 1. **Extension ladder taken apart for single ladder prohibited**
 |  |  |  |  |  |  |  |
| 1. **Transferring from step ladder prohibited is prohibited**
 |  |  |  |  |  |  |  |
| 1. **Job Built ladder built correctly**
 |  |  |  |  |  |  |  |
| 1. **Ladder corral installed at ladder points on above level**
 |  |  |  |  |  |  |  |

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| 1. **Maintenance of Traffic**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| **A. Drive through observations** |  |  |  |  |  |  |  |
| 1. **Difficult or unexpected maneuvers**
 |  |  |  |  |  |  |  |
| 1. **Adequate signs / warning of hazards**
 |  |  |  |  |  |  |  |
| 1. **Traffic control devices visible**
 |  |  |  |  |  |  |  |
| 1. **Road conditions ok, pot holes, ruts, etc.**
 |  |  |  |  |  |  |  |
| 1. **MOT Plan followed**
 |  |  |  |  |  |  |  |
| **B. Signage** |  |  |  |  |  |  |  |
| 1. **Clearly visible and understandable**
 |  |  |  |  |  |  |  |
| 1. **Sign support adequate / ballast needed**
 |  |  |  |  |  |  |  |
| 1. **Proper size, color, shape, location**
 |  |  |  |  |  |  |  |
| 1. **Temporary vs. permanent is evident**
 |  |  |  |  |  |  |  |
| **C. Portable changeable message signs** |  |  |  |  |  |  |  |
| 1. **Appropriate message, concise text**
 |  |  |  |  |  |  |  |
| 1. **Visible, not blocked, proper height**
 |  |  |  |  |  |  |  |
| 1. **PCMS delineated (barrels / cones)**
 |  |  |  |  |  |  |  |
| **D. Arrow Panel** |  |  |  |  |  |  |  |
| 1. **Placed in proper location / protected**
 |  |  |  |  |  |  |  |
| 1. **All bulbs working and aligned properly.**
 |  |  |  |  |  |  |  |
| 1. **Arrow board dims at night**
 |  |  |  |  |  |  |  |
| **E. Drums & cones** |  |  |  |  |  |  |  |
| 1. **Proper taper length**
 |  |  |  |  |  |  |  |
| 1. **Correct spacing and aligned properly**
 |  |  |  |  |  |  |  |
| 1. **Clean & proper reflective bands**
 |  |  |  |  |  |  |  |
| 1. **Additional devices required**
 |  |  |  |  |  |  |  |
| 1. **Proper ballast to prevent turnover**
 |  |  |  |  |  |  |  |
| **F. Traffic barriers** |  |  |  |  |  |  |  |
| 1. **Proper adjustments, clean, no damage**
 |  |  |  |  |  |  |  |
| 1. **Proper flairs / attenuator**
 |  |  |  |  |  |  |  |
| 1. **Barrier pinned as required**
 |  |  |  |  |  |  |  |
| 1. **Warning lights / reflectors clean**
 |  |  |  |  |  |  |  |
| **G. Type III barricades** |  |  |  |  |  |  |  |
| 1. **Properly placed, clean & free of defects**
 |  |  |  |  |  |  |  |
| 1. **Directional chevrons in proper direction**
 |  |  |  |  |  |  |  |
| **H. Flaggers** |  |  |  |  |  |  |  |
| 1. **Adequate advanced sign placement**
 |  |  |  |  |  |  |  |
| 1. **Proper sign spacing**
 |  |  |  |  |  |  |  |
| 1. **Flagger provided / positioned correctly**
 |  |  |  |  |  |  |  |
| 1. **Flagger highly visible, proper PPE**
 |  |  |  |  |  |  |  |
| 1. **Flagger properly trained and certified**
 |  |  |  |  |  |  |  |
| **I. Street controls** |  |  |  |  |  |  |  |
| 1. **Roads clean free of stones/ gravel**
 |  |  |  |  |  |  |  |
| 1. **Steel plates secured**
 |  |  |  |  |  |  |  |
| **J. Work Zones** |  |  |  |  |  |  |  |
| 1. **Evidence of accidents (properly reported)**
 |  |  |  |  |  |  |  |
| 1. **Adequate acceleration / deceleration lanes**
 |  |  |  |  |  |  |  |
| 1. **Tools, equipment, materials off roadway**
 |  |  |  |  |  |  |  |
| 1. **TMA within 80 - 120 feet of workers**
 |  |  |  |  |  |  |  |
| 1. **All workers protected by TMA**
 |  |  |  |  |  |  |  |
| 1. **MOT Plan Followed**
 |  |  |  |  |  |  |  |

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| 1. **Medical / Emergency**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Potable drinking water**
 |  |  |  |  |  |  |  |
| 1. **1st aid kit**
 |  |  |  |  |  |  |  |
| 1. **1st Aid/CPR on site**
 |  |  |  |  |  |  |  |
| 1. **Emergency numbers posted**
 |  |  |  |  |  |  |  |
| 1. **Emergency products supplied**
 |  |  |  |  |  |  |  |
| 1. **Emergency Eyewash available and inspected**
 |  |  |  |  |  |  |  |
| 1. **Map to medical facility / bi-lingual**
 |  |  |  |  |  |  |  |
| 1. **Project Emergency / Crisis Mgmt. Plan**
 |  |  |  |  |  |  |  |
| 1. **Team contact numbers Posted**
 |  |  |  |  |  |  |  |

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| 1. **Motorized Equipment**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Spotter(s) Present and controlling/ shall be identified by a different color hard hat**
 |  |  |  |  |  |  |  |
| 1. **Back up alarm functioning/ or spotter if alarm not working**
 |  |  |  |  |  |  |  |
| 1. **Flagman / correct PPE / trained**
 |  |  |  |  |  |  |  |
| 1. **Glass free of obstructions**
 |  |  |  |  |  |  |  |
| 1. **Horn functioning**
 |  |  |  |  |  |  |  |
| 1. **Operator appears competent**
 |  |  |  |  |  |  |  |
| 1. **Seat belts used**
 |  |  |  |  |  |  |  |
| 1. **Training docs available**
 |  |  |  |  |  |  |  |

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| 1. **PPE**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Face Shields/Safety Goggles (all air Tools, above shoulder work, power tools grinders circular saws)**
 |  |  |  |  |  |  |  |
| 1. **Safety Glasses / clean scratch free, appropriate for area-no dark tint in building(s)**
 |  |  |  |  |  |  |  |
| 1. **Gloves/ appropriate for task/ cut resistant gloves 3 plus for cutting activities or working with sharp metals/ no gloves rotary tools. Kevlar sleeves shall be worn when working around sharps**
 |  |  |  |  |  |  |  |
| 1. **Long Hair protected**
 |  |  |  |  |  |  |  |
| 1. **Hard Hats / reflective for road exposure 360 degrees / brim forward / no bump caps allowed. The persons name shall be on the front of the hardhat**
 |  |  |  |  |  |  |  |
| 1. **Hearing protection as required per task**
 |  |  |  |  |  |  |  |
| 1. **Metatarsal protection**
 |  |  |  |  |  |  |  |
| 1. **Proper Clothing for task / Class 3 vest, etc.**
 |  |  |  |  |  |  |  |
| 1. **Respiratory protection (must be properly fitted and approved by physician)**
 |  |  |  |  |  |  |  |
| 1. **Visitor PPE available**
 |  |  |  |  |  |  |  |
| 1. **Work Boots / minimum ankle high**
 |  |  |  |  |  |  |  |
| 1. **Flaggers Class 3 vest and class E pants for night work**
 |  |  |  |  |  |  |  |
| 1. **Hot Work PPE shall be non-flammable.: Class 3 vest prohibited when welding**
 |  |  |  |  |  |  |  |
| 1. **Appropriate face protection for task / goggles, face shield**
 |  |  |  |  |  |  |  |

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| 1. **Scaffolds**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Competent Person identified and available**
 |  |  |  |  |  |  |  |
| 1. **Bracing and pins in place**
 |  |  |  |  |  |  |  |
| 1. **Compatible components used**
 |  |  |  |  |  |  |  |
| 1. **Base plates used in stairwells / wheels prohibited**
 |  |  |  |  |  |  |  |
| 1. **Guardrails in place / 4’ and above / toe boards required**
 |  |  |  |  |  |  |  |
| 1. **Inspected daily (Green or Red Placard signed)**
 |  |  |  |  |  |  |  |
| 1. **Outriggers installed based on height base ratio**
 |  |  |  |  |  |  |  |
| 1. **Properly secured to structure at proper height to base width at 4:1 ratio**
 |  |  |  |  |  |  |  |
| 1. **Proper access to platforms**
 |  |  |  |  |  |  |  |
| 1. **Proper loading of materials**
 |  |  |  |  |  |  |  |
| 1. **Safe work distances**
 |  |  |  |  |  |  |  |
| 1. **Sills, plates, jacks installed**
 |  |  |  |  |  |  |  |
| 1. **Surface in safe condition**
 |  |  |  |  |  |  |  |
| 1. **Wheels locked**
 |  |  |  |  |  |  |  |
| 1. **Scaffold properly decked, fully planked, no more than inch opening**
 |  |  |  |  |  |  |  |
| 1. **PFAS when erecting and dismantling scaffold / approved by manufacturer of scaffold to tie off.**
 |  |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| 1. **Scissor / Aerial Lifts**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Competent Person Provided**
 |  |  |  |  |  |  |  |
| 1. **Equipment loaded properly**
 |  |  |  |  |  |  |  |
| 1. **Gate or chain secured**
 |  |  |  |  |  |  |  |
| 1. **Harness and tie off according to MFGR’s requirements/fall restraint required**
 |  |  |  |  |  |  |  |
| 1. **Nothing to increase height to reach work**
 |  |  |  |  |  |  |  |
| 1. **Operating on flat surface**
 |  |  |  |  |  |  |  |
| 1. **Operator trained and documentation available**
 |  |  |  |  |  |  |  |
| 1. **Safe work distances / avoid pinch points**
 |  |  |  |  |  |  |  |
| 1. **Operating surface free of holes / openings / debris**
 |  |  |  |  |  |  |  |
| 1. **Retract boom to ground to move lift**
 |  |  |  |  |  |  |  |
| 1. **Climbing rails of lift prohibited**
 |  |  |  |  |  |  |  |
| 1. **Hoisting materials on top rail prohibited / Only MFGR approved attachment for material lifting**
 |  |  |  |  |  |  |  |
| 1. **Anti crash bar/ guard on controls**
 |  |  |  |  |  |  |  |
| 1. **Operator and occupants trained/certified compliant with ANSI Standard 92A**
 |  |  |  |  |  |  |  |

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| 1. **Site / Public Protection**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Adequate lighting**
 |  |  |  |  |  |  |  |
| 1. **Barricades installed properly**
 |  |  |  |  |  |  |  |
| 1. **Company rep present / available**
 |  |  |  |  |  |  |  |
| 1. **Excavations protected with pinned barricades**
 |  |  |  |  |  |  |  |
| 1. **Falling object / overhead protection provided**
 |  |  |  |  |  |  |  |
| 1. **Perimeter fences secured / in good condition**
 |  |  |  |  |  |  |  |
| 1. **Public protection signage**
 |  |  |  |  |  |  |  |
| 1. **Security system in place**
 |  |  |  |  |  |  |  |
| 1. **Street closure identified**
 |  |  |  |  |  |  |  |
| 1. **Traffic Control plan in place**
 |  |  |  |  |  |  |  |

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| 1. **Steel Erection**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Competent Person identified and available**
 |  |  |  |  |  |  |  |
| 1. **Anchorage points meet requirements**
 |  |  |  |  |  |  |  |
| 1. **Controlled access zone/ safety monitor, warning lines prohibited**
 |  |  |  |  |  |  |  |
| 1. **Erector notified of modification**
 |  |  |  |  |  |  |  |
| 1. **Fall protection training provided**
 |  |  |  |  |  |  |  |
| 1. **Falling object protection**
 |  |  |  |  |  |  |  |
| 1. **Christmas Treeing prohibited**
 |  |  |  |  |  |  |  |
| 1. **Proper anchorage of columns / beams (4 for columns and 2 for beams)**
 |  |  |  |  |  |  |  |
| 1. **Site layout / sequence plan**
 |  |  |  |  |  |  |  |
| 1. **Structural flooring requirements posted**
 |  |  |  |  |  |  |  |
| 1. **P.E. approved concrete strength available**
 |  |  |  |  |  |  |  |
| 1. **Steel cable guardrails has Mesh from toe board to top rail**
 |  |  |  |  |  |  |  |
| 1. **Guardrails installed after decking in place**
 |  |  |  |  |  |  |  |
| 1. **All penetrations > 2” protected**
 |  |  |  |  |  |  |  |

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| 1. **Welding and Cutting**
 | **CONTRACTOR OBSERVED** | **COMPLIANT / NON-COMPLIANT****OBSERVATIONS** | **ACTION TAKEN Y / N** | **ISSUE OPEN / CLOSED** | **NEAR MISS** | **COMMENTS/ PHOTOS/ ADDITIONAL INFORMATION** |
| 1. **Cylinders upright / capped / secured**
 |  |  |  |  |  |  |  |
| 1. **Flash arrestors on torch hoses at regulators and torch. (Need Both)**
 |  |  |  |  |  |  |  |
| 1. **Fire extinguisher present / inspected**
 |  |  |  |  |  |  |  |
| 1. **Bottles protected from point of operation**
 |  |  |  |  |  |  |  |
| 1. **Flash protection available/Screens shall be non flammable fire retardent**
 |  |  |  |  |  |  |  |
| 1. **Gauges working properly**
 |  |  |  |  |  |  |  |
| 1. **Leads in good condition / protected / out of water**
 |  |  |  |  |  |  |  |
| 1. **Proper PPE in use / welding helmet attached to hardhat**
 |  |  |  |  |  |  |  |
| 1. **Proper Storage of Cylinders / Separated properly**
 |  |  |  |  |  |  |  |
| 1. **Torch hoses good condition**
 |  |  |  |  |  |  |  |
| 1. **Weld machine ventilated / grounded per MFGR**
 |  |  |  |  |  |  |  |
| 1. **Welding terminals protected with boot caps**
 |  |  |  |  |  |  |  |
| 1. **No welding near intake vents**
 |  |  |  |  |  |  |  |
| 1. **Hot Work Permit and Outage Posted**
 |  |  |  |  |  |  |  |
| 1. **Compressed gas cylynders stored in storage cages outside with proper signage**
 |  |  |  |  |  |  |  |