

APPENDIX 'E'

SAMPLE JOB PLAN

5. HAVE WE CONSIDERED (It is critical that we make note of any **changes** that may occur during the work cycle)

People	Procedures	Hardware/Equipment	Environment	Workers Affect on Environment
<input type="checkbox"/> Person in charge <input type="checkbox"/> Qualification of personnel <input type="checkbox"/> Other work groups/contractors <input type="checkbox"/> Communication <input type="checkbox"/> Worker fatigue <input type="checkbox"/> Pedestrian control <input type="checkbox"/> General public <input type="checkbox"/> Traffic control <input type="checkbox"/> Safety watcher	<input type="checkbox"/> Limits of approach <input type="checkbox"/> De-energize/Isolation of apparatus <input type="checkbox"/> Safety hold off/Blocking required <input type="checkbox"/> Switching orders <input type="checkbox"/> Adequate cover-up <input type="checkbox"/> Grounding apparatus and vehicles <input type="checkbox"/> Work permit/Clearance to work <input type="checkbox"/> Permit checklists (soft dig, confined space, etc.) <input type="checkbox"/> Review rescue procedures <input type="checkbox"/> Spiking/Stethoscoping	<input type="checkbox"/> Inspection of equipment <input type="checkbox"/> Inspection of tools & PPE <input type="checkbox"/> Inspection of vehicles <input type="checkbox"/> Condition of structures <input type="checkbox"/> Safe loads for rigging <input type="checkbox"/> Adequate cover-up <input type="checkbox"/> Specialized tools - calibrated/tested & up-to-date	<input type="checkbox"/> Environment checklist <input type="checkbox"/> Underground locates <input type="checkbox"/> Weather conditions <input type="checkbox"/> Soil conditions/Shoring <input type="checkbox"/> Lighting conditions <input type="checkbox"/> Adjacent structures/Vegetation <input type="checkbox"/> Housekeeping <input type="checkbox"/> Emergency plan/procedure <input type="checkbox"/> Open excavations/Trench	<input type="checkbox"/> Cause erosion <input type="checkbox"/> Release/spills (liquids/gases/solids) <input type="checkbox"/> Waste disposal (liquids/solids) <input type="checkbox"/> Noise <input type="checkbox"/> Fire <input type="checkbox"/> Species at risk (plant and animal) <input type="checkbox"/> Disturbing waterways/drainage/wetlands/burial grounds <input type="checkbox"/> Wildlife Habitat

WHAT ARE THE CHANGES?	HOW WILL THIS AFFECT YOUR WORK?

6. PERSONS WORKING ON THE JOB

Designated person in charge (Print Name):	<input type="text"/>	Crew cell no.:	<input type="text"/>	Designated person in charge (Signature):	<input type="text"/>	Date:	<input type="text"/> yyyy mm dd
Alternate person in charge (Print Name):	<input type="text"/>	Crew cell no.:	<input type="text"/>	Alternate person in charge (Signature):	<input type="text"/>	Date:	<input type="text"/> yyyy mm dd

Print Full Names of Crew Members:

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

yyyy mm dd	Initial/Sign off for Tailboard Discussion

7. OTHER CREWS AND VISITORS
 Be aware of **all** work crews in the area.

Multi-crew job coordinator	<input type="text"/>	Cell phone:	<input type="text"/>
WHAT OTHER CREWS ARE ON SITE	PERSON IN CHARGE	HOW WILL THEIR JOB AFFECT YOURS	

Any visitors to your site shall read and sign your Plan.

WORKSITE VISITOR SIGN OFF	DATE yyyy mm dd	WORKSITE VISITOR SIGN OFF	DATE yyyy mm dd

8. WHEN WORKING IN AREAS ZONED AGRICULTURAL

YES	NO	Bio Security Elevated Risk Factors
		A. Confirmed presence of invasive species
		B. Extremely wet conditions with disturbed soil
		C. Work involves close contact with livestock
		D. Sensitive area regarding project or customer
<p>If you answered yes to any of these questions, complete an action plan to mitigate environmental risk.</p>		