

# **Worksite Safety Inspection Checklist**

Date: 2022-07-19

Client: Advantage Energy Ltd Location: 321 LSD/UWI: 321

Site Supervisor: Alvin Supervisor Phone: 321

Job/Project#: 321 STARS Site # (if applicable): 321

Scope of Work: test

Hazard Identification and Communication	Υ	N		Υ	N
Site Hazard Assessment completed	√		Scope of work for the project clearly defined	√	
Daily safety meetings conducted and documented	√		Potential hazards and mitigation requirements identified in hazard assessment	√	
All site personal have the appropriate training and safety tickets	√		Summit Health and Safety manual available	√	
Occupational Health And Safety legislation available	√		All site personnel are wearing site-specific PPE	√	

Job Site Management	Υ	N	N/A		Υ	N	N/A
Work area is clearly identified	√			First Aid Kit available and stocked	√		
Site is free of trip hazards and other housekeeping concerns	√			Blankets and stretcher available	√		
All open excavations are clearly marked	√			Eye wash bottle available	√		
Public access to the site controlled	√			Spill kit available	√		
Prime contractor clearly identified with signage	√			The H2S personal gas monitors onsite have been bumped		√	
Is there emergency equipment on site	√						

Fire Extinguisher(s)	Υ	N		Υ	N
20 lb minimum fire extinguisher		√	Fire extinguisher safety pins are		

available	in place and secured to prevent an accidental discharge	
Fire extinguisher(s) tag attached - Inspected monthly and recorded	Fire extinguishers operating instructions on the name plate are legible and face outwards	
Fire extinguisher(s) visible and unobstructed	No signs of visible damage to fire extinguisher (rust, dents or other signs of damage)	
Fire extinguishers showing charge (gauge indicator must be in the green zone indicating it is fully charged)	External fire extinguisher certification within 12 months (must be certified by 3rd party annually)	

Emergency Response Planning	Υ	N	N/A		Y	N	N/A
Emergency Response Plan (ERP) onsite			√	STARS # (if applicable)			
Muster point(s) identified				ERP responder roles and responsibilities identified			
ERP includes directions to nearest hospital				Cellular or radio coverage confirmed. If no, what communication is in place?			

Ground Disturbance	Υ	N
Does the project involve ground disturbance If YES, complete the following		√
Ground disturbance checklist is in place		
1-Call notification has been registered		
All underground lines within 5 metres of the work area manually exposed		
30 metre search area around the work area clearly defined		
Third-party line locates completed within the search area	·	
All required crossing or proximity agreements in place		

Confined Space		N
Does the project involve Confined Space Entry?		√
Confined Space Permit Issued		
Workers have applicable safety training and competent to perform the work		
Safety Watch in place		
Rescue Plan Available		

Hot Work	Υ	N
Does the project involve Hot Work (work that could produce a source of ignition, such as a spark or open flame)		√

Hot Work Permit Issued	√	
Fire Hazards identified and controls in place	√	
Fire / Safety Watch Available	√	

Summit Vehicles & Equipment	Υ	N	N/A		Υ	N	N/A
Exterior of vehicle generally clean and free of visual defects			√	Headlights are in proper working condition	√		
Interior of vehicle kept tidy and clean	√			Signal lights are in proper working condition	√		
Vehicle windshield free of major chips and cracks	√			Emergency warning / strobe light equipped on vehicle	√		
Daily pre-use vehicle inspection completed	√			Safety / buggy whip equipped on vehicle	√		
Equipment pre-use inspection completed	√			First aid kit equipped in vehicle	√		
Cargo (internal and external) properly stowed and secured	√			Emergency survival kit equipped in vehicle	√		
Horn is in proper working condition	√						

## **Key Positive Findings**

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# Discrepancies

Description	Details
20 lb minimum fire extinguisher available	test
Emergency Response Plan (ERP) onsite	test
Fire Hazards identified and controls in place	
Fire / Safety Watch Available	

#### **Corrective Actions**

Description	Details	Date Requested	Date Completed	Person Responsible
No corrective actions				

## Signatures

Conducted by Signature: Form Loco Date: 2022-07-19

Summit Supervisor: Alvin Sign-off Date: To be determined

#### Messages

to: Alvin

date: 7/18/2022 6: 48: 54 PM from: Form Loco

message: Worksite Safety Inspection completed for Advantage Energy Ltd

321\nDiscrepancies Exist!