

Worksite Safety Inspection Checklist

Client: Advantage Energy Ltd

Location: null

LSD/UWI: null

Date: 2022-04-06

Site Supervisor: Form Loco

Supervisor Phone: asd

Job/Project#: asd

STARS Site # (if applicable): null

Scope of Work: asdsd

Hazard Identification and Communication	Y	N		Y	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	√	
The H2S personal gas monitors onsite have been bumped			√		

Job Site Management	Y	N	N/A		Y	N	N/A
Work area is clearly identified Appropriate access and egress routes are established	√			Is there emergency equipment on site?	√		
Appropriate access and egress routes are established	√			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	√						

Fire Extinguisher(s)	Y	N		Y	N
20 lb minimum fire extinguisher available	√		Fire extinguisher safety pins are 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	Y	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	Y	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	Y	N
Confined Space Permit Issued	√	
Ground disturbance checklist is in place		
Workers have applicable safety training and competent to perform the work		

Safety Watch in place		
Rescue Plan Available		

Hot Work	Y	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	Y	N	N/A		Y	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				Safety / buggy whip equipped on vehicle			
Daily pre-use vehicle 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							

Discrepancies

Signatures

Summit Supervisor Signature: Form Loco

Date: To be determined

Conducted by Signature: Form Loco

Date: 2022-04-06

Messages

date: 4/6/2022

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message: Created by brock@formloco.com