

INSERT COMPANY NAME & LOGO:

Prowess Utility Group Inc



PAGE 1 OF 2

TIME:

PROJECT NAME & NUMBER:

JOB BRIEFING / ROUTINE JOB HAZARD ANALYSIS (JHA) FORM

Complete with work crew at job-briefing before beginning work; Have all affected personnel sign-off in Block 9 of this form.

(1) JOB INFORMATION
Date: Job Number: Job Name:
Physical Address: Longitude: Latitude: Supervisor/Crew Lead:
(2) EMERGENCY PROCEDURES (LIST TELEPHONE NUMBERS AND ATTACH DIRECTIONS TO THE SITE.)
Are 911 systems functional with cell phone use?
Fall Protection Rescue Procedures to be used:
Ambulance: Fire: Police:
Local Hospital: Telephone Co: Utility (Water/Electric/Gas) Co:
Evacuation Point: Host Construction Coordinator & Cell Phone: Host Safety Coordinator & Cell Phone:
(3) JOB / TASKS FOR TODAY (Note: Any rigging with a payload weight of 10T - 50T = Medium Lift; or >= 50T= Heavy Lift; or a Critical Lift requires the submittal of an Engineer approved lift plan as required per contract requirements.)
CHECK TYPE OF WORK BEING PERFORMED:
Working at Height > 6 feet
Electrical General Construction Civil/Concrete/Masonry Scaffolding
Plumbing Painting HVAC/Mech. Welding Heavy Equipment Decommissioning Other:
(4) JOBSITE EXPOSURES, NOTE: ELECTROMAGNETIC INTERFERENCE (EMI), RADIO FREQUENCY (RF)
Hazard Identification: Items checked below relate to existing conditions or may be a result of site operations
Physical Hazards Health Hazards
Confined Space Permit Required Struck by/Contact With Chemical Exposure Silica Exposure (Concrete/Stone Cutting)
Electrical Overhead Work Cold Stress
Elevation / Site Terrain Slips, Trip, or Falls EMI/RF/Radiological/Laser Biological Hazards: Animals, Avian, Insects, Microbiological, etc.
Falls from Elevations Underground Utilities Heat Stress
Fire Hazards Vehicle Traffic High Noise (>85 dBA) Asbestos, Lead
Heavy Equipment Other: Lifting Hazards Other:
(5) HAZARD CONTROL MEASURES
PPE and Monitoring Equipment Inspections Safety Systems / Training
Fall Protection Tools/Equipment Barricades, Pedestrian Shelters, Banner of Notices, PPE, and Warning Signs
Gloves Rigging Excavation & Trenching Plan/Log
Hard Hat Safety Shoes/Boots Housekeeping Lock-Out / Tag-Out (De-energize, Guard, Identify, Tag or Tag & Lock)
Hearing Tag Lines Job Briefing Meeting
RF / Radiological Monitors Ground Fault Protection Pre-Approved Plans (Critical Lifts, Roped-Access, Suspended Personnel Lift)
Hazmat Suits; Level: D, C, B, A Gin Poles Color Coded Inspection Schemes for Rigging, Equip., Electrical Cords & Tools; Annotate Colors, Items, & Frequency.
Safety Glasses, Goggles, Face Shield Hoists Federal or Texas Manual on Uniform Traffic Control
Safety Vest: Class 1, 2, 3 Other: Permit Systems:
Air Monitoring: Confined Spaces: Is a Permit Required?
Oxygen Deficiency (< than 19.5%)
Oxygen Enrichment (> than 23.5%)
Flammable Gases/Vapors (> than 10% of LEL)
Airborne Combustible Dust (> than LFL)
Toxic Gases or Vapors (> than PEL)
Laser Safety:
X-Ray Monitoring:
Respirator: APR Supplied Air:
Half-Face Full-Face
Note Any Other Hazards or Safety Controls Here:

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PAGE 2 OF 2

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(6) COMPLETE FOR CIVIL WORK (PLEASE NOTE: ENGINEER APPROVED TRENCHING PLAN REQUIRED FOR TRENCHES > 5') [ ] NOT APPLICABLE

NOTE: Notify and confirm proper procedures, mitigation and/or protective steps taken with your company's designated Safety Representative & Site Manager before entering: any trench or any general excavation that is greater than 5' deep; or any Confined Space.

1. Describe type and depth of excavations [ ] Type A Soil/Rock [ ] Type B Soil/Rock [ ] Type C Soil/Rock: [ ] Dig-Tess / One Call

2. Cave-in / Engulfment control measures to be used if excavation will be greater than 5 feet and personnel are entering the trench. [ ] Sloping [ ] Benching [ ] Shoring [ ] Trench [ ] Shield/Box [ ] Ladder in Trench > 5 Feet & Every 25' [ ] Sump Pump [ ] LOTO:

3. Describe elevation/site terrain/environmental concerns or hazards:

4. Describe hazards with site/vehicle access (High Traffic, Heavy Haul, Boom Cranes, and Storage of Materials/HazMat:

5. Describe the type of electrical or gas concerns or hazards (e.g. Electrical/Gas/Fiber Optic Lines):

(7) FALL PROTECTION & USING SUSPENDED PERSONNEL PLATFORM (Complete for Working at Heights and Roped-Access) [ ] NOT APPLICABLE

Type of Elevated Work & Height:

Type of Tower or Building:

Describe the fall protection system to be used when working aloft. [ ] Lifeline [ ] Personal Fall Arrest [ ] Safety Monitor [ ] Qualified Climber [ ] Safety Net [ ] Ladder Safety Device [ ] Roped Access (Requires Roped Access JHA):

Fall protection to be used. [ ] Full Body Harness [ ] One Lanyard [ ] Two Lanyards (100%) [ ] Rope Grab [ ] Cable Grab [ ] Retractable Lifeline [ ] Ropes [ ] Ascenders/Descenders [ ] Anchorage Points, Belay, & Straps:

Has each employee inspected his or her fall protection equipment? [ ] Yes [ ] No

Hoisting Equipment to be used: < 20' Encroachment of Power Lines, [ ] Yes [ ] No; If yes, ID Voltage \_\_\_\_\_KV; De-energize/Test/Ground Lines [ ] Yes [ ] No

[ ] Suspended Personnel Platform/basket [ ] Forklift Platform [ ] Crane/Boom/Aerial Truck [ ] Scissor/Snorkel Lift [ ] Gin Pole [ ] Roped Access

Suspended Personnel Platform Checklist and/or Critical Lift Plan Completed? [ ] Yes [ ] No

(8) REVIEWS AND SIGNATURES

GC Superintendent /Foreman

Lower-tier Subcontractor Supervisor

Table with 4 columns: Name, Signature/Date, Name, Signature/Date. Rows for GC Superintendent and Lower-tier Subcontractor Supervisor.

(9) PROJECT PERSONNEL ACKNOWLEDGEMENT (ALL AFFECTED PERSONNEL SIGN AFTER JOB BRIEFING)

Table with 6 columns: Name, Company, CPR / First Aid (Yes/No), Name, Company. Multiple rows for personnel acknowledgment.