

# THE CITY OF REDLANDS



## CONTRACTOR SAFETY PROGRAM

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# CONTRACTOR SAFETY PROGRAM

## I. Policy

The purpose of this Contractor Safety Program (“CSP”) is to ensure, as best as reasonably possible, the protection and safety of all persons and property during construction activities undertaken by private contractors on behalf of the City of Redlands (“City”). The City has a comprehensive and structured approach in outsourcing services performed on City facilities by third-party persons and entities (“Contractor(s)”). The first phase of this comprehensive approach includes actively screening Contractors based on safety records, safety performance, and safety compliance. After the qualified Contractor is awarded a contract, the Contractor must then ensure compliance with all local, state, federal and Cal/OSHA regulations applicable to the contracted scope of work, and requirements set forth within this CSP. The Contractor, its agents, and personnel must adhere to the policies and procedures set forth by this CSP and all applicable laws and regulations.

## II. Authority

California Code of Regulations, Title 8, Section 336.10 “Determination of Citable Employer”  
California Code of Regulations, Title 8  
“Greenbook” Standard Specifications for Public Works Construction  
Redlands Municipal Code  
California Building Code

## III. Scope

This CSP applies to all Contractors who provide or render construction or improvement services for City-owned property and facilities.

The Contractor services covered under this CSP include, but are not limited to, the following:

- A. New construction;
- B. Remodeling;
- C. Facility maintenance or repair;
- D. Equipment installation or maintenance; and
- E. Services (i.e. janitorial, fleet operations, landscaping, etc.)

Consultants/ Professional service providers are exempt from having to submit a Safety Prequalification Questionnaire (“SPQ”), prior to the beginning of work, but they are expected to be compliant with industry best practices with regards to maintaining a safe work environment for their employees and others.

## IV. Definitions

- A. **Contract** – any written agreement between the City of Redlands and a Contractor, to perform a specified scope of work on City facilities. With respect to this policy, a contract includes, but is not limited to: awarded purchase orders, bids, and/ or project contracts.
- B. **Construction Work** – construction, alteration, and/or repair, including painting and decorating.
- C. **Contractor** – a person or entity (including all personnel) awarded a contract to perform work on City property or facilities.
- D. **D.A.R.T Rate** – Injuries and illnesses severe enough to warrant: Days Away, Restrictions and Transfers. The DART rate is calculated using the following formula: Number of OSHA Recordable injuries and illnesses that resulted in Days Away x 200,000/divided by total hours worked by all employees during the year covered.

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- E. **Designated Work Area** – an area where it is necessary to restrict or limit entry or access of nonessential personnel or the public. Examples include work areas involving remediation abatement, demolition, excavation, and overhead lifting.
  - F. **Facilities** – any building or property owned by the City of Redlands.
  - G. **Hazard** – source or situation with a potential for harm in terms of injury or health, damage to property, damage to workplace environment, or a combination of these.
  - H. **Job Hazard Analysis (“JHA”)** – a technique that focuses on job tasks as a way to identify hazards before they occur. It focuses on the relationship between the worker, the task, the tools, and the work environment. The objective is to eliminate the risk or to utilize control measures to reduce the risk.
  - I. **North American Industry Classification System (“NAICS”)** – is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy.
  - J. **Non-compliance** – any deviation from standards, practices, processes, procedures, regulations etc. that could either directly or indirectly lead to injury or illness, property damage, damage to the workplace environment, or any combination of these criteria.
  - K. **Notice of non-compliance** – form provided to the Contractor by the City alerting the contractor of non-compliance with City specifications, Cal/OSHA regulations, or any other generally accepted safe work practice.
  - L. **Non-compliant hazardous work condition** – any hazard that is considered to be non-compliant with State or Federal safety and health regulations, City specifications, or any inconsistency with generally accepted work practices.
  - M. **Personnel** – all Contractor employees, contractors, sub-contractors and agents provided access to City property or facilities.
  - N. **Recordable Incident** – any injury or illness resulting in death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, or loss of consciousness per OSHA Section 1904.7(a).
  - O. **Safety Tailgate** – informal safety meeting generally conducted at the job site prior to the commencement of a job or work shift.
  - P. **Services** – any and all, labor, duties, functions and activities required to be performed by the Contractor under the contract and any subsequent addenda.

## V. Responsibilities

### RISK MANAGEMENT

- A. Update, maintain, and administer this CSP;
- B. Maintain centralized records of training, site visit data, written programs, tailgate meetings, permits, and all other necessary contractor related documentation;
- C. Provide technical assistance to Engineering personnel;
- D. Attend Pre-construction meetings and progress meetings as needed;
- E. Provide assistance on safety inspections as needed;
- F. Review safety submittals;
- G. Provide guidance on pre-qualification determination; and
- H. Provide training to affected city personnel with responsibilities under this program.

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### PROJECT MANAGER (CITY)

The Project Manager has the authority to delegate any or all portions of this CSP to subordinates, but the Project Manager will be held accountable for their compliance. The Project Manager shall contact Risk Management, as necessary, for assistance in relation to this CSP.

- A. Ensure safety hazards are addressed in a timely manner;
- B. Communicate safety concerns during pre-construction meetings and progress meetings;
- C. Inform impacted employees of construction activities scheduled in their workarea;
- D. Enforce pre-qualification procedures in bidding process; and
- E. Ensure this CSP is properly executed.

### INSPECTOR (CITY)

The City of Redlands construction inspector is not a safety professional and will only provide "Notice of Non-Compliance" for obvious and serious non-compliant conditions.

- A. To the best of their abilities, inspect work sites for safety hazards;
- B. Communicate safety concerns to Contractor;
- C. Provide Contractor with "Notice of Non-Compliance" when serious conditions occur or repeat violations;
- D. Collect documentation needed for construction worksites;
- E. Submit documentation to Risk Management for recordkeeping;
- F. Maintain photo documentation of safety hazards;
- G. Never enter situations that can harm or endanger himself/ herself;
- H. Never use personal protective equipment (PPE) or enter situations, which they are not trained for;
- I. Contact Emergency Medical Services (911) and Risk Management in case of emergency; and
- J. Attend and communicate safety concerns in progress meetings.

### EMPLOYEES (CITY)

- A. Immediately notify the Project Manager, inspector, or Risk Management of any safety related concerns at a Contractor job site; and
- B. Contact Emergency Medical Services (911) and Risk Management in case of emergency.

### CONTRACTOR

Where relevant and applicable, the Contractor's responsibilities shall include:

- A. Compliance with requirements and responsibilities detailed within the Contractor Safety Program;
- B. Ensure all local regulatory requirements are met and all necessary permits are obtained before conducting work on behalf of the City;
- C. Designate a Project Safety Official by name who shall be available at all times to abate safety hazards;
- D. Ensure all personnel have the appropriate qualifications and training to perform the contracted work (Copies of current training documentation and certifications must be on file with the City);
- E. Inform City Project Manager or inspector of any job site safety hazards or concerns;
- F. Inform City Project Manager if any suspected asbestos-containing material is located;
- G. Conduct and submit Job Hazard Analysis (JHA) before work and as required by change of tasks;
- H. Conduct and submit Safety Tailgates on a bi-weekly basis;
- I. Provide all required PPE necessary to conduct work safely and in accordance with required local regulations;
- J. The safety of all individuals who enter work site;
- K. Spill cleanup;
- L. Immediately report any incidents, accidents, near misses, unsafe conditions, or unsafe acts involving any jobsite personnel;

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- M. Arrange for the proper storage and removal of waste generated prior to the completion of job, and provide confirmation that the materials have been removed or disposed of in a manner compliant with all applicable environmental regulations;
  - N. Removing all equipment used during work activities and ensuring proper housekeeping of designated work area at the end of each workday and upon completion of the job;
  - O. Contact Emergency Services (911) and Project Manager in the event of an emergency; and
  - P. For the actions of their subcontractors, as they may pertain to this CSP, including their adherence to its contents and review of this document.

#### PROJECT SAFETY OFFICIAL (CONTRACTOR)

- A. Shall be at the work site at all times;
- B. Must be thoroughly familiar with the Contractor's Injury and Illness Prevention Program (IIPP) and Code of Safe Practices;
- C. Shall be available at all times to abate any potential safety hazards; and
- D. Shall have the authority and responsibility to shut down an unsafe operation, if necessary.

## **VI. Program**

#### SAFETY PREQUALIFICATION PROCESS

- A. The safety prequalification process is intended to:
  - Provide the City with knowledge of past and current safety performance of Contractors working on City construction projects;
  - Improve Contractor compliance with City safety rules, including safe work practices required by applicable regulations and laws; and
  - Improve safety during Contractor activities.
- B. A copy of the SPQ shall be provided to each person or entity bidding on a project, as part of the bidding process.
- C. The completed questionnaire shall be returned and reviewed prior to awarding contract work, with supporting information provided as indicated by responses on questionnaire.
- D. The SPQ shall be submitted to:

35 Cajon St., Suite 4  
Redlands Ca, 92373  
Attention: Project Name-Contractor Name-SPQ
- E. The following criteria and information relating to the Contractor will be reviewed prior to awarding contract:
  - Contractor License;
  - Incident Rates;
  - OSHA Citations;
  - Safety Policies;
  - Safety Programs and Procedures;
  - Compliance History on City Projects; and
  - Certification Statement.
- F. Contractor must qualify in each section to be approved for award of a contract.
- G. If a Contractor fails to pass prequalification procedure, the City has the right to disqualify the Contractor's proposal.

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- H. All costs associated with compliance with City of Redlands prequalification requirements shall be at the sole expense of the Contractor.
  - I. If a Contractor provides information that is later determined to be false, or improperly withholds information, the Contractor will be immediately disqualified.
  - J. Any questions or information relating to filing this questionnaire may be answered by reaching:
    - Engineering: (909) 798-7698; or
    - Risk Management: (909) 798-7514

### DISQUALIFICATION APPEAL PROCESS

This provision is established pursuant to Public Contract Code section 20101(d) which requires every public agency that requires prospective bidders to prequalify pursuant to the law to establish “a process that will allow prospective bidders to dispute their proposed prequalification rating prior to selection of an alternate bidder.” If the City intends to disqualify a bidder based upon the bidder’s safety record, the City will notify the bidder in writing and provide the bidder with any supporting evidence that has been received from others or adduced as a result of an investigation by the City. The notice of intention shall be sent by certified mail with return receipt requested or by overnight mail via a delivery service that provides online tracking which identifies the date of the prospective bidder’s receipt of the notice, and shall include notice that the bidder has the right to, and may request a hearing to rebut any evidence used as a basis for disqualification and to present evidence to the City as to why the prospective bidder should be found qualified. Requests for a hearing must be made by written request to the City within ten calendar days of the date of the prospective bidder’s receipt of the City’s notice of intention. If the bidder does not request a hearing within the time allowed, the City’s determination shall stand unchallenged and become final.

Within seven calendar days of receiving the bidder’s request for a hearing, the City shall notify the bidder in writing of the date, time and place of the hearing. The hearing shall be held no sooner than ten (10) calendar days and no later than fifteen (15) calendar days after the notice is given. The notice shall inform the bidder of its right to present testimony and documents in support of its position.

The hearing shall be conducted before the Redlands City Manager, which may be continued from time to time as reasonably determined by the City Manager, but shall not exceed forty five (45) days. At the conclusion of the hearing, and after considering all testimony and documentation presented, the City Manager shall issue a written decision no later than five calendar days following the hearing. The City Manager’s decision shall be final and is not subject to further appeal to the City.

The bidder shall not be entitled to bid on any contracts with the City until it has met the safety pre-qualification standards. If the City Manager approves an appeal, the contractor will have been deemed to meet the qualification standards and it will be valid for one year. The bidder shall have the right to withdraw its application for prequalification or its appeal at any time before the City Manager’s decision becomes final. Such withdrawal will not preclude the bidder from re-applying for prequalification.

### CONSTRUCTION PROJECTS

- A. After a contract is awarded, the Contractor shall maintain, throughout the duration of the project, safety measures as necessary to protect the public and workers within, or in the vicinity of, the designated work zone. This includes an evaluation of the work to be performed and the hazards likely to be encountered. Contractors are expected to follow, at a minimum, all pertinent laws, rules and regulations for the location in which they will be working. Where applicable, Contractor Safety Programs will meet or exceed City programs/ procedures and are subject to review and approval by the City prior to contract execution.

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B. Job Hazard Analysis (“JHA”)

1. Prior to a notice to proceed a JHA must be completed utilizing the City’s form, or equivalent, to assess the hazards present in the designated work area. Any information requested on the City’s form, but not stated on the equivalent form utilized, shall be provided separately with the original submission.
2. All members of the construction unit must sign the JHA to acknowledge hazard abatement procedures.
3. JHA must be kept at job site accessible to all impacted personnel.
4. Failure to follow JHA procedures may lead to termination of the contract.

C. Personal Protective Equipment (“PPE”)

1. All required PPE must be worn at all times during work activities.
2. All mandatory PPE must be highlighted in the JHA.
3. PPE shall be provided by the Contractor.
4. Failure to follow PPE guidelines may lead to termination of the contract.

D. Safety Tailgates

1. Safety Tailgate Meetings must be held on a biweekly basis for all construction projects.
2. The first meeting shall take place on Day 1, Week 1 and every other week thereafter.
3. Tailgates shall be signed by all personnel and submitted to Construction Inspector for recordkeeping.
4. Tailgate topics should be specific to the scope of work of the project.

E. Injury Reporting

1. Contractors shall immediately report injuries or accidents to the Project Manager (regardless of severity). Additionally, contractors are responsible for and must also conduct accident investigations of any injuries that occur on site and provide results to the Project Manager.
2. Use the City Incident Investigation Form (Attachment E), or equivalent, to meet this requirement.

F. Spill Prevention

1. The Contractor is responsible for any spill within the confines of the project and those outside of the construction limits caused by the Contractor’s defective equipment, containers, or personnel.
2. Secondary spill containment systems shall be used to prevent contamination of the environment.

G. Construction in Occupied Buildings

1. When building occupants are present during construction projects additional safeguards must be implemented to eliminate exposures and complaints. Dust/ particulates from demolition, sanding and other construction activities must be controlled by adequate ventilation, or containment and negative air ventilation systems based upon the specific type of activity and particle. Similar controls must be utilized for odorous activities including, but not limited to, carpet adhesive, painting, welding, and coatings.
2. The Contractor shall ensure that the HVAC system is protected in order to prevent contamination. If an HVAC system is unprotected and contaminated by any construction/demolition materials, the Contractor shall be held responsible for the cost of cleaning the system and any subsequent repairs therein.
3. Negative air ventilation systems shall have appropriate filtration and be exhausted outside of the building.

## INSPECTIONS

- A. Follow up inspections will be executed to enforce compliance with safety and health requirements.
- B. Follow up inspections will be conducted as part of routine site inspections by construction inspector and Risk Management employees.



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- C. The SPQ aims to provide the City with knowledge of Contractor safety history and safety practices. This minimizes the need for increased frequency of inspections. In addition, the City will take the following guidelines into consideration when determining frequency of inspections.
1. Scale of project;
  2. The frequency with which the number and types of hazards change as the work progresses;
  3. More frequent inspections will be implemented in the beginning of the project; and
  4. When the Contractor has never worked for the City.

#### TRAINING/DOCUMENTATION

- A. Contractor will ensure that all personnel are properly trained for the scope of work they are assigned, as well as the equipment they will be utilizing.
- B. Documentation shall be on file with the City prior to project start.
- C. Personnel missing training documentation shall not be permitted to work on awarded City projects.
- D. Training requirements are mandated by Federal and State Regulations. This may include, but is not limited, to the programs listed in the SPQ.

#### NON-COMPLIANCE

- A. Contractor compliance issues shall be documented on the "Notice of Non-Compliance" form. A copy of this form shall be provided to Contractor for completion.
- B. Upon receipt of the completed "Notice of Non-Compliance" form, the Project Manager and Risk Management will evaluate, based on the incident, and identify, as appropriate, any additional corrective and/or preventive actions for completion.
- C. If immediate correction is not feasible, the project will be temporarily stopped until the issue is adequately resolved.
- D. City staff with authority to stop work are:
  1. Construction Inspector;
  2. City Project Manager;
  3. City Manager; and
  4. Risk Management staff.
- E. Any violation or deviation from safety rules, procedures, or regulations, based on evaluation, may be subject to any and all disciplinary actions listed as follows:
  1. Verbal warning
  2. Written warning-Notice of Non-Compliance (work may not continue until approved corrections are implemented);
  3. Dismissal of non-complying personnel; and/or
  4. Termination of Contract.

**The City of Redlands maintains the right to terminate any contract for the violation of safety issues without liability to the City.**

#### CITY PERSONNEL

- A. All affected City employees will be informed in advance of any construction related work or other contract work which has the potential for impacting their workplace. Notifications will be made to all affected employees via e-mail or written memo by the Project Manager or designee. Notifications must include the following information:
  1. Start and end dates of the work to be completed;
  2. Work areas to be affected;

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3. Description of work to be completed;
  4. Name and phone number of Project Manager;
  5. Name and phone number of Construction Inspector; and
  6. Name and phone number of Risk Management.
- B. Employees should be instructed to notify Project Manager regarding logistical issues or other concerns. Safety and Health concerns should be directed to either the Project Manager, Inspector, or Safety Specialist.

## **VII. Recordkeeping**

The City's Human Resources / Risk Management Department will maintain all records prepared in association with this CSP, with copies also placed on file with the office of the City Clerk.

## **VIII. Additional References**

[https://www.dir.ca.gov/title8/336\\_10.html](https://www.dir.ca.gov/title8/336_10.html)



## City of Redlands Acknowledgment of Receipt Statement

I acknowledge by signing this document, that I have received and reviewed the City of Redlands' Contractor Safety Program and understand that it contains important information on the City's policies and procedures regarding employee safety as it pertains to Contractor activities. Furthermore, I acknowledge that failure to comply with any of these procedures may lead to termination of the contract with the City.

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Contractor Title:

\_\_\_\_\_  
Contractor Name (Print)

\_\_\_\_\_  
Date Signed

If you have any questions regarding this document, please contact the Risk Management Division at (909) 798-7514.

## CITY OF REDLANDS SAFETY PREQUALIFICATION QUESTIONNAIRE

Omitting or reporting false information on this questionnaire may result in disqualification of bid. The City of Redlands reserves the right to conduct random or for-cause audits of information stated in this questionnaire. If deemed necessary, additional documentation may be requested by the City to verify responses on this questionnaire.

### SECTION 1 – GENERAL INFORMATION

Company Name:		
Contractor License #:		Expiration Date:
Address:		
City:		State:                      Zip Code:
Name of Person Submitting Application:		
Title:		Telephone #:
Email Address:		
Identify the highest ranking Safety/Health Professional in your Company:		
Name:		
Title:		Telephone #:

## SECTION 2 – INCIDENT RATES & WORKER’S COMPENSATION INFORMATION

### INCIDENT RATES

Provide your actual injury and illness data below:

Provide the NAICS Code Number that best represents your Firm: \_\_\_\_\_  
Provide any additional numbers here: \_\_\_\_\_

(Provide three full years of data)	Last Calendar	2 Years Ago	3 Years Ago
Number of hours worked by all employees:			
Total Recordable Incident Rate*:			
D.A.R.T. Rate*:			
Total Number of Fatalities:			

**Incident Rate** = [(Total Recordable Cases X 200,000 hours)/ Number of hours worked by all employees]

**D.A.R.T. Rate** = [(Total Number of entries for Days Away, Restricted and Job Transfer X 200,000 hours)/ Number of hours worked by all employees]

If your latest incident rates and D.A.R.T. rates are greater than 100% of the industry average for all your NAICS code Numbers Listed, your bid may be disqualified.

The industry average can be found at [www.bls.gov](http://www.bls.gov)

## WORKERS’ COMPENSATION INFORMATION

### 1. Provide your Workers’ Compensation Experience Modification Rate (EMR) Data:

	Policy Year	EMR	
Current EMR*			* If your current EMR is greater than 1.25, initialing here certifies that you will provide a competent, full- time person or representative responsible for safety for all City projects: _____  * Initialing here certifies that your firm does not have an EMR: _____ (Submit a copy of your firm's Loss Run Reports for the last three years if your firm does not have an EMR.)  Name of your firm’s Workers’ Compensation carrier: _____  Phone Number of Workers’ Compensation carrier: _____
1 Year Ago:			
2 Years Ago:			
3 Years Ago:			

### 2. Is your firm self-insured for Workers' Compensation claims?

Yes  No

(If yes, please attach a copy of the latest Annual Report to the State of California Department of Industrial Relations and/or State of California Certificate of Self-Insurance.)

## SECTION 3– CITATION HISTORY

### 1. Has your firm received any regulatory citations in the last three years?

Yes  No

If yes, please answer the question below.

2. Were any of the confirmed (Closed) citations classified as Serious, Willful, Repeat, or Failure to abate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. If yes, please explain:		
4. Have you abated all of the citations issued to you in the last three years	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please explain abatement action plan:		

### SECTION 4 – SAFETY POLICIES

	Questions (Please check YES or NO)	YES	NO*
1.	Does your company provide and adhere to a written Illness Prevention Program (IIPP) (CCR Title 8 §3203(a))? If yes, a copy of the program will be required on-hand at the job site throughout the duration of the contract. Please attach a copy to your bid proposal.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does your company provide and conduct Tailgate Meetings, or equivalent with employees at least every 10 working days. (CCR Title 8 §1509(e))	<input type="checkbox"/>	<input type="checkbox"/>
3.	Does your company have a policy for disciplinary action for unsafe behavior ensuring employee compliance with safe and healthy work practices? (CCR Title 8 §3203(a)(2))	<input type="checkbox"/>	<input type="checkbox"/>
4.	Does your company provide and abide by a written Code of Safe Practices that relates to your firm's operations. (CCR Title 8 §1509(b)) If yes, a copy of the Code of Safe Practices will be required on-hand at the job site throughout the duration of the contract. Please attach a copy with your bid proposal.	<input type="checkbox"/>	<input type="checkbox"/>
5.	Does your company perform JHAs? (CCR Title 8 §1511(b))	<input type="checkbox"/>	<input type="checkbox"/>
6.	Does your company provide training and retraining programs for ensuring employee compliance with safe and healthy work practices? (CCR Title 8 §3203 (a)(2), (a)(7))	<input type="checkbox"/>	<input type="checkbox"/>
7.	Does your company provide training and retraining programs for ensuring employee compliance	<input type="checkbox"/>	<input type="checkbox"/>
*Please provide reason(s) for NO answer in the box below or on a separate sheet of paper.			

Failure to provide the above-referenced documents will result in the contractor's bid being disqualified.

### SECTION 5 – SAFETY PROGRAMS AND PROCEDURES

PLEASE ANSWER ALL QUESTIONS BY CHECKING YES OR NO, AND ATTACHING APPROPRIATE DOCUMENTS THAT MAY APPLY OR AS REQUESTED.

		YES	NO
1.	<b>Is Confined Space work anticipated in the scope of the work awarded? (If no, please proceed to Question 2)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
Copy of written Confined Space Entry Procedure		<input type="checkbox"/>	<input type="checkbox"/>
List of personnel authorized on jobsite to work in confined space(s)		<input type="checkbox"/>	<input type="checkbox"/>
List of personnel authorized on jobsite to serve as Rescue Team		<input type="checkbox"/>	<input type="checkbox"/>
Verification of personnel training (copies of certs, cards, etc.)		<input type="checkbox"/>	<input type="checkbox"/>

2.	<b>Is work requiring Lockout/Tagout protocols anticipated in the scope of the work awarded? (If no, please proceed to Question 3)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
Copy of written Lockout/Tagout (LOTO) Procedure		<input type="checkbox"/>	<input type="checkbox"/>
List of personnel authorized on jobsite to perform LOTO		<input type="checkbox"/>	<input type="checkbox"/>
Verification of personnel training (copies of certs, cards, etc.)		<input type="checkbox"/>	<input type="checkbox"/>

3.	<b>Is work requiring a personal lift anticipated in the scope of the work awarded? (If no, please proceed to Question 4)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
List of personnel authorized on jobsite to use lifts		<input type="checkbox"/>	<input type="checkbox"/>
Verification of personnel training (copies of certs, cards, etc.)		<input type="checkbox"/>	<input type="checkbox"/>

4.	<b>Is work requiring a forklift anticipated in the scope of the work awarded? (If no, please proceed to Question 5)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
List of personnel authorized on jobsite to use a forklift		<input type="checkbox"/>	<input type="checkbox"/>
Verification of personnel training (copies of certs, cards, etc.)		<input type="checkbox"/>	<input type="checkbox"/>

5.	<b>Is work requiring a crane anticipated in the scope of the work awarded? (If no, please proceed to Question 6)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
Copy of written Crane Program		<input type="checkbox"/>	<input type="checkbox"/>
Copy of all expected Crane operators' Certifications		<input type="checkbox"/>	<input type="checkbox"/>
List of personnel designated as Competent under Crane program		<input type="checkbox"/>	<input type="checkbox"/>
Verification of personnel training (copies of certs, cards, etc.)		<input type="checkbox"/>	<input type="checkbox"/>

NOTE: If awarded bid, more documentation may be required

<b>6.</b>	<b>Is Hot Work (as defined by OSHA) anticipated in the scope of the work awarded? (If no, please proceed to Question 7)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
	Copy of written Hot Work Procedure	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel authorized on jobsite to perform Hot Work	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>7.</b>	<b>Is Trenching/ Excavation work anticipated in the scope of the work awarded? (If no, proceed to Question 8)</b>	<input type="checkbox"/>	<input type="checkbox"/>
	Is a plan in place for the disposal of all material that cannot be returned to the trench/ excavation?	<input type="checkbox"/>	<input type="checkbox"/>
	Are appropriate materials for barricading or securing work area at jobsite?	<input type="checkbox"/>	<input type="checkbox"/>
	Has a permit from the Department of Industrial Relations for excavations deeper than 5 feet been obtained?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
	Copy of written Trenching/ Excavation Procedure	<input type="checkbox"/>	<input type="checkbox"/>
	Copy of Permit if trench is to exceed depth of 5 feet	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel designated as Competent under Trenching/ Excavation Program	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: If awarded bid, more documentation may be required

<b>8.</b>	<b>Is electrical work anticipated in the scope of the work awarded? (If no, proceed to Question 9)</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
	Copy of written Electrical Safety Program	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel designated as Competent under Electrical Safety Program	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>9.</b>	<b>Is work that may have an arc flash potential anticipated in the scope of the work awarded? (If no, proceed to Question 10)</b>	<input type="checkbox"/>	<input type="checkbox"/>
	Are all materials required to safely perform arc flash present?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
	Copy of Arc Flash Procedure	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel designated as Competent under Arc Flash Program	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>



<b>10.</b>	<b>Is work involving chemicals anticipated in the scope of the work awarded? (If no, proceed to Question 11)?</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please attach the following:		Attached?	
	Copy of written Hearing Conservation Program	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel working in high noise areas	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>11.</b>	<b>Is work involving chemicals anticipated in the scope of the work awarded? (If no, proceed to Question 12)?</b>	<input type="checkbox"/>	<input type="checkbox"/>
* Copies of SDS for Chemicals used must be kept at jobsite			
Please attach the following:		Attached?	
	Copy of written Hazard Communication Program	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel performing work with chemicals	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
<b>List trade names of all hazardous materials which you will be using on site:</b>			

<b>12.</b>	<b>Is work on or adjacent to public roadways anticipated in the scope of the work awarded. (If no, proceed to Question 13)</b>	<input type="checkbox"/>	<input type="checkbox"/>
	Do you have the appropriate provisions (signs, devices, barricades/)	<input type="checkbox"/>	<input type="checkbox"/>
Please attach the following:		Attached?	
	Please provide a list of personnel working in traffic areas.	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: If awarded bid, more documentation may be required

<b>13.</b>	<b>Is it anticipated in the scope of the work awarded that exposure to asbestos is possible? (If no, proceed to Question 14)</b>	<input type="checkbox"/>	<input type="checkbox"/>
Please attach the following:		Attached?	
	Copy of written procedure(s)	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel working with potential exposure to asbestos	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>14.</b>	<b>Is it anticipated in the scope of the work awarded that exposure to silica is possible? (i.e. sandblasting, concrete demolition, concrete saw cutting, surface grinding, etc.) (If no, proceed to Question 15)</b>	<input type="checkbox"/>	<input type="checkbox"/>
Please attach the following:		Attached?	
	Copy of Silica Control Plan	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel working with potential exposure to silica	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>15.</b>	<b>Is work at heights anticipated in the scope of the work awarded? (If no, proceed to Question 16)</b>	<input type="checkbox"/>	<input type="checkbox"/>
Please attach the following:		Attached?	
	Copy of written Fall Protection Program	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel designated as Competent under Fall Protection Program	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>16.</b>	<b>Is work requiring the use of respirators anticipated in the scope of the work awarded? (If no, proceed to Question 17)</b>	<input type="checkbox"/>	<input type="checkbox"/>
Please attach the following:		Attached?	
	Copy of written Respiratory Protection Program	<input type="checkbox"/>	<input type="checkbox"/>
	List of personnel using respirators	<input type="checkbox"/>	<input type="checkbox"/>
	Verification of personnel training (copies of certs, cards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

<b>17.</b>	<b>If the scope of work to be performed is not adequately represented by questions (1-16), please list any additional Health &amp; Safety concerns below.</b>

**SECTION 6 – COMPLIANCE HISTORY ON CITY PROJECTS**

In addition to the previous sections, Contractors that have previously been awarded work by the City, will be equally evaluated on their compliance history in relation to City projects.

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**SECTION 7 – CERTIFICATION STATEMENT**

I Certify under penalty of perjury that:

- a. the information contained herein is true and correct to the best of my knowledge, and
- b. no attempt has been made to give false or misleading information or to withhold any information.

Signature of Authorized Representative:

Title of Authorized Representative

Printed Name of Authorized Representative

Date Signed:

**NOTICE OF NON-COMPLIANCE**

Project: \_\_\_\_\_

Contractor: \_\_\_\_\_

Notice of Non-Compliance was issued to Contractor’s representative, \_\_\_\_\_,  
Name

on \_\_\_\_\_ at \_\_\_\_\_.

The following unsafe behaviors were observed at the Contractor’s job site:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the unsafe condition is not immediately corrected, the City of Redlands may take disciplinary action in accordance with the Contractor Safety Program guidelines.

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To be completed by Contractor

Corrective action plan to abate hazards:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Unsafe Condition Resolved: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Remarks:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Job Hazard Analysis

Project:			
Company:	Project Safety Official:	Project Manager (City):	
Scope of Work:		Location:	Date:

Tasks	Potential Safety Risks/Hazards	Safety Controls/Mitigat	Required PPE
			<input type="checkbox"/> Hard Hat <input type="checkbox"/> Safety Vest <input type="checkbox"/> Safety Glasses/Goggles
			<input type="checkbox"/> Safety Boots <input type="checkbox"/> Respirator <input type="checkbox"/> Safety Gloves
			<input type="checkbox"/> Face Shield <input type="checkbox"/> Fall Protection
			<input type="checkbox"/> Other: _____ _____ _____ _____

Signatures of Employees On-Site this JHA is applicable to:

Employee Signature:	Print Name:	Date:

### INCIDENT INVESTIGATION FORM

Date of Incident:	Time of Incident:	Date Reported:					
Lead Investigator:	Contact Information:						
Contractor:	Employee Name:						
Witness 1 Name:	Telephone:						
Witness 2 Name:	Telephone:						
Incident Site/ Location							
Incident Summary:							
Near Miss	Yes	No	Incident Severity:	Minor	Significant	Major	Critical
Root Cause(s):							
Corrective Actions:							