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COMPANY POLICY STATEMENT

Hudson Bay Insulation Company is dedicated to providing a safe and healthy work environment free of hazards for all employees. We consider the prevention of accidents to be an integral part of our operations. To accomplish this, HBIC has adopted the following policies.

- Safety, in all operations, is of the utmost importance.
- The Company will comply with all laws, ordinances and project requirements.
- Every employee will have a safe and healthy place in which to work.

To maintain these objectives, it is the responsibility of the Corporate Officers, Project Managers, Superintendents, Safety Representatives and Foremen:

- To maintain and reinforce a comprehensive safety program at all times.
- To make every reasonable effort to maintain a neat, clean, safe and healthy working environment.
- To comply with all federal, state and project requirements for accident / incident prevention and working conditions.
- To insure that all employees use the safety equipment required and adheres to established rules of conduct and safety in their assignments.

Hudson Bay Insulation Company recognizes and accepts responsibility for the prevention of accidents in the workplace. A thorough understanding of, and compliance with, safety policies, practices and procedures is the best insurance an employee can have against accidents. I ask for your commitment to these principals to assure the safety of yourself and your co-workers.

Sincerely,

James E. King
President
SAFETY REPRESENTATIVES

Safety Director: Scott Bee
Office: (206) 763-9484
Cell: (206) 387-3121
Email: scottb@hudsonbayins.com

Vice President of Administration: Lisa King
Office: (206) 763-9484
Cell: (206) 999-0119
Email: lisa@hudsonbayins.com

Mailing Address:
Hudson Bay Insulation Co.
P.O. Box 80424
Seattle, WA 98108

Physical Address:
12302 NE Marx St
Portland, OR 97230

Portland Phone: (503) 688-1496

On Site Safety Representative:
Job/Project ________________________________
Safety Representative ________________________________
Cell phone number ________________________________
SAFE WORK PRACTICES

The following general safe work practices apply to all Hudson Bay Insulation Company (HBIC) projects and its employees. Additional rules may be added based upon Project Specific Hazards or Requirements.

It is important to remember that rules cannot be created to cover every condition on a construction site. The most important element in prevention of injuries is a positive safety attitude.

- Follow all HBIC project safety policies and procedures.
- Report any accident / incident to your supervisor and the safety department immediately.
- Report any unsafe conditions to your supervisor immediately.
- Always wear the appropriate work clothing, footwear and Personnel Protective Equipment (PPE).
- Safety glasses and gloves will be worn at all times.
- All employees must be familiar with emergency procedures and locations of fire extinguishers and first aid supplies.
- Compliance with HBIC’s Alcohol and Drug Policy is mandatory.
- Use provided handrails while ascending or descending stairs and equipment.
- Never violate any warning signs or barricades.
- If you are not sure how to perform your assigned task safely, stop and contact your immediate supervisor.
- No fighting, horseplay, stealing or running.
- Help promote good housekeeping, this includes proper disposal of job debris, lunch, or other personal items brought to the job.
- Operate only the equipment that you have been trained and authorized to use.
- Do not walk or stand under suspended loads.
SAFE WORK PRACTICES

- Think before you lift...
  - Plan the lift
  - Mover close to the Load
  - Keep your back straight
  - Bend your knees & lift with your legs
  - Do not lift and twist in the same motion
  - If the load is too heavy get help from a co-worker

- Always use equipment and material in accordance with the manufacturers’ specifications.

- Smoking is permitted in designated areas only.

- SDS (Safety Data Sheets) are available to all employees, contact the supervisor for copies.

Failure to abide by the safety policies and procedures will be subject to disciplinary action up to and including immediate termination.
SAFETY CONCERNS

It is Hudson Bay Insulation Company’s intent to have all employees involved in safety. It is requested and HBIC supports and encourages employees to report all incidents or situations, which they believe or perceive, could cause injury or illness.

Safety Concerns may be reported to any of the following personnel:

- Direct Supervisor
- Branch Manager: Brad Carbaugh
- Division Superintendents: Nino Tretter and Aaron Garcia
- Safety Representatives: Scott Bee or Lisa King
- Company Principle: Jim King

All concerns will be documented and the division superintendent and/or safety representatives are responsible to report back to the employee any resolution of the concern.

All near misses and hazardous conditions will be reported to the general/mechanical contractor’s superintendent.

HBIC employees will conduct weekly Safety Meetings specific to HBIC and our scope of work. Topics are provided in the Safety & Risk Management Plan or shall be based on current activities relevant to the work at hand. This time shall also be used to discuss specific situations, tasks, working conditions and to provide feedback from the employees to the foreman.

All safety complaints, inspections and citations will be addressed and coordinated through the safety department. If a regulatory agency cites a HBIC employee or a jobsite of which HBIC employees are working on. The safety department will fully cooperate with that agency and its representatives to seek resolution. All complaints, inspections and citations will be kept on file at Hudson Bay Insulation Company’s main office.
These procedures shall be used for the prevention of accidents, creating a safe and healthy place to work, maintaining safe equipment, creating a proper safety reporting and records system, and creating a safety program that meets or exceeds all federal, state or local laws and ordinances.

The **Safety Director** shall be responsible for the conformance of all employees to the safety rules as set forth in current federal, state and local legislation and all company safety or health requirements. The Safety Director shall also be responsible for the following procedure requirements:

- Conduct safety orientation for new employees.
- Instruct employees on safe work procedures by means of safety meetings, policies and training.
- Conduct weekly site safety audits and inspections.
- Provide safety and first aid education materials and instructions.
- Approve procurement of first aid and safety equipment.
- Approve procurement of major repairs of equipment to meet safety requirements.
- Enforcement of corrected action on reported unsafe job conditions.
- Enforcement of disciplinary action for reported safety violations by employees and extent of action to be taken for second reported violation.
- Establish methods and procedures for project specific drug testing, outside of company drug-free work place policy.
SAFE WORK RESPONSIBILITIES

The **Project Foremen** shall be responsible for conformance of all job site personnel assigned to them, to all safety rules as set forth in current federal, state and local legislation in addition to company required safety and health requirements. The Project Foremen shall also be responsible for the following procedural requirements:

- Instruct employees on safe work procedures by means of safety meetings, pre-task planning and training.
- Ensure availability of and proper use of all necessary PPE and first aid supplies.
- Identify unsafe acts and potential unsafe conditions on the jobsite.
- Completion of Employee information report to the Superintendent.
- Conduct weekly on-site Toolbox Talks and Safety Meetings.
- Maintain all field reports as per job specifications.
- Supervise corrective measures for all reported unsafe conditions.
- Report equipment repair as needed to the Safety Director.
- Report all accidents to Superintendent or Safety Director immediately.
- Issuance of personal safety equipment required by job site conditions and the enforcement of their use by company personnel.

The **Employee** shall be responsible for conformance to all safety rules as set forth in current federal, state and local legislation and company required safety policies and procedures and health requirements. The Employee shall also be responsible for the following procedure requirements:

- Adhere to all safety policies and procedures as set forth by HBIC.
- Utilize all necessary Personal Protective Equipment (PPE) and safety devices.
- Report all unsafe conditions to HBIC supervision and or safety department.
- Perform all work according to Company’s safe work practices.
- Refrain from all unsafe acts that may endanger you, co-workers, the public, or property.
SAFE WORK RESPONSIBILITIES

- Participate in safety meetings, tool box talks and other gatherings that provide the opportunity to discuss and provide feedback regarding safety issues and workplace conditions.
- Attend Company developed training and job focused instruction sessions.
SUBSTANCE ABUSE-FREE WORKPLACE PROGRAM

Construction is widely recognized as an inherently dangerous, high-risk industry in terms of occupational injuries, injury to owners, future tenant, the general public and damage to property. Nevertheless Hudson Bay Insulation Co. is committed to providing its employees with a safe, healthful and productive work environment.

Hudson Bay Insulation Company seeks to maximize the accuracy, efficiency and integrity of each employee’s work as well as eliminate the risk of unnecessary and costly errors or mistakes. Any increase in those risks resulting from an employee’s or fellow employee’s substance abuse is therefore a threat to a safe and productive work environment.

- Construction is intensely regulated by a variety of local, state and federal regulations and statutes. As established by law, it is the employer’s duty to provide and maintain a safe and accident free workplace. This program enhances our team efforts in carrying out this responsibility and also maintains an efficient work force by ensuring an environment is free from the influences of substance abuse. Under this program, each job applicant and employee will be treated fairly and in a nondiscriminatory manner.

- In accordance with Hudson Bay Insulation Company’s Substance Abuse Policy, employees are required to report to work in appropriate mental and physical condition to perform their jobs in a satisfactory manner. While on Hudson Bay Insulation premises, client premises, at any other location conducting company business or at company sponsored events during normal working hours; no employee may use, purchase, possess, transfer or be under the influence of alcohol, controlled substances, illegal drugs or other job impairing substances. Use of medications taken in accordance with a lawful prescription or use of non-prescribed medications in standard dose recommendations is permitted only if it does not impair an employee’s ability to perform the essential functions of the job effectively and in a safe manner that does not endanger other individuals in the workplace.

- When approved by management, moderate use of alcohol may be allowed at Hudson Bay Insulation Co. sponsored social events outside of normal working hours and away from construction work sites. Designated drivers and other means of transportation shall be used to ensure that no person under the influence of alcohol leaves a Hudson Bay Insulation Co. sponsored event operating a motor vehicle.

- Hudson Bay Insulation Co. reserves the right to require additional safeguards that serve the best interest of the employees and the program.
• Hudson Bay Insulation Company requires that all employees participate in the application of this program.

• An employee shall have the right to use the grievance/arbitration system to challenge any aspect of the Substance Abuse-Free Workplace Program.
Hudson Bay Insulation Company strongly supports a substance abuse-free, healthful and safe workplace. To promote this goal, employees are required to report to work in appropriate mental and physical condition to perform their jobs in a satisfactory manner.

While on Hudson Bay Insulation premises, client premises, at any other location conducting company business or at company sponsored events during normal working hours; no employee may use, purchase, possess, transfer or be under the influence of alcohol, controlled substances, illegal drugs or other job impairing substances. Use of medications taken in accordance with a lawful prescription or use of non-prescribed medications in standard dose recommendations is permitted only if it does not impair an employee’s ability to perform the essential functions of the job effectively and in a safe manner that does not endanger other individuals in the workplace.

In addition, employees are expected to abide by the procedures set forth in Hudson Bay’s Insulation Substance Abuse-Free Workplace Program. Violations of this policy may lead to disciplinary action, up to and including immediate termination of employment, and/or required participation in a substance abuse rehabilitation or treatment program. Such violations may also have legal consequences.

Employees with questions or concerns about substance dependency or abuse are encouraged to discuss these matters with their supervisor or the Human Resources Department to receive assistance or referrals to appropriate resources in the community.

Employees with questions on this policy or issues related to substance abuse in the workplace should raise their concerns with their supervisor, the Safety Director or the Human Resources Department without fear of reprisals.

Hudson Bay Insulation, hereinafter referred to as the Company, shall be defined in this policy to include corporations, partnerships, and sole proprietorships. The nature of the construction industry requires that all employees be in a condition to perform their jobs safely and efficiently, free from any impairment caused by alcohol or drugs.
Hudson Bay Insulation, in conjunction with the International Association of Heat & Frost Insulators and Allied Workers Local 36, subscribes to a Drug-Free Workplace Policy which is administered by a Third Party Administrator. The Company, other contractors signatory to or working under Local 36’s insulator’s agreement, and the International Association of Heat and Frost Insulators and Allied Workers Local 36, hereinafter referred to as the Union, are firmly committed to eliminating all of the problems associated with employee alcohol and drug abuse.

The Company also recognizes the need to avoid unnecessary intrusion into employee’s private lives and to assure employee privacy and confidentiality to the greatest extent possible. In addition, the Company acknowledges that some cases of substance abuse must also be dealt with as illnesses requiring medical treatment, not only as personnel problems. Lastly, the Union, signatory contractors and the Company believe that the goals of its alcohol and drug policy should include education, prevention, and rehabilitation. To achieve these objectives, all employees of the Company must adhere to each of the following rules and regulations:

Rules

The use of alcohol or drugs by employees during working hours or on the job site or on company property (including company vehicles) is absolutely prohibited. Any employee who violates this policy may be required to undergo rehabilitation and/or may be subject to discipline under the terms of this policy and/or the collective bargaining agreement.

- The term "use" means consuming, possessing, selling, concealing, distributing or arranging to buy or sell, being under the influence, or reporting for duty under the influence of alcohol or drugs to any degree.

- The term "alcohol or drugs" means any form of alcohol and/or other intoxicating substance, including legal drugs obtained illegally.

- The term "under the influence" means having a verified positive test.

- In the event that any person taking medically authorized or prescribed drugs is to be tested for alcohol or drugs pursuant to this policy, that person must be prepared to substantiate authorization from his health care provider to use the prescription drugs.
• The term "working hours" means all the time in which employees are engaged in work duties or subject to the control of the company, and also includes scheduled breaks and travel to work or from one workplace to another.

• The term "company property" means all facilities, job sites, vehicles, and equipment that are owned, leased, operated, or utilized by the company or its employees for work-related purposes, including parking areas and driveways, as well as lockers, toolboxes, or other storage areas used by the employees. It also includes other public or private property, facilities, vehicles, and equipment located away from the company facility if the employee is present on such property for a work-related purpose.

• An employee's private property, such as lunch boxes, tool boxes, back packs, purses, and the like that are brought by the employee onto company property or used for work-related purposes, may only be inspected for reasonable suspicion (see below).

• Events attended voluntarily are not considered to be covered under this policy.

Consequences of Violations

If an employee tests positive or refuses to test (including invalid urine specimens, adulteration or substitution), he or she will be removed from the job.

Management shall require that employees who have tested positive for alcohol or drugs or who refuse to test complete three conditions before returning to work:

1. Evaluation by a qualified counselor,

2. Agreement to participate in education and/or counseling as recommended by the evaluator, and

3. A negative return-to-duty test.

The Program Administrator will monitor the return-to-work process. With a work release from the evaluator and a negative test, the employee may return to work if a job is available.
SUBSTANCE ABUSE POLICY

Any person who has violated this policy shall be subject to discipline. Discipline of bargaining unit members shall be in accordance with the collective bargaining agreement.

Reasonable Suspicion Testing

The term "reasonable suspicion" shall for the purposes of this policy be defined as specific, articulable observations concerning work performance, appearance, behavior or speech of the employee which would cause a trained person to believe the employee may have used controlled substances or misused alcohol.

Examples of observations which might lead to a reasonable suspicion determination are slurred speech, staggering, the odor of alcoholic beverage, unusual sleepiness, aggressive behavior, unusual agitation, or the presence of drugs or drug paraphernalia. These observations must be documented by a Company representative as part of a reasonable suspicion determination. When reasonable suspicion exists that an employee is in violation of this policy, the employee shall be required by management to submit to drug and/or alcohol testing. In the event of a positive test result or refusal to test, the employee shall be required to participate in a return-to-duty process. If an employee refuses to participate in the testing as outlined in the policy or if an employee's test results are positive and the employee refuses to seek rehabilitation or completion of a rehabilitation program, that employee is subject to prompt termination.

Other Testing

Other types of testing permitted under this policy, as defined in the Administrative Rules, include pre-duty, periodic, post-accident, return to duty, job site and random testing.

All new employees shall be tested if they have no verification card. All employees are subject to quarterly random testing regardless of current verification card status.

Many general contractors have drug and alcohol testing policies which cover all individuals who work on the specific contractor's job site. If a general contractor has a stricter drug testing policy and requires our employee to test under that policy, it will take precedence for that test.
Drug-Related Convictions

All employees must notify management of any criminal conviction for any drug-related offense occurring in the workplace, no later than five (5) days after such conviction.

Self-Referral

If an employee suspects that he/she has an alcohol or drug problem, the employee is expected to seek assistance for that problem, either from an Employee Assistance Program, his/her Union health and welfare trust or another competent resource.

Reporting Use of Medications

Use of prescribed medicine according to the healthcare provider’s instructions is not a violation of this Policy. However, it is a violation of Federal law and of this Policy to use other people’s prescription medications. It is also a violation of this Policy to use medications in a way that is not consistent with the healthcare practitioner’s directions.

Employees who take prescription medications with warning labels (regarding dizziness, drowsiness, or other impairment while using the medicine) are required to:

- Discuss use of the medicine with their doctors, given the nature of their jobs, and
- Inform Company management that they are using a medication with a warning label. Employees are not required to identify the name of the drug or the reason for using the drug.

The notifications must be in writing, addressed to the designated Company representatives, Lisa King or Ken Gritter.
Management may change an employee's employment status or job duties at its discretion. With proper notification of prescription medication use, management will work with the employee to determine the next steps to protect the safety of the employee and the workplace.

Medical marijuana is not a prescription medicine. While its use may be authorized under state laws, it is prohibited under Federal law. Medical marijuana use is not acceptable under this Policy.

Applicants and employees have the opportunity to discuss positive drug test results due to prescription medications with the Company's Medical Review Officer (MRO) before results are reported to the Company.

Confidentiality

The Company shall take reasonable measures to safeguard the privacy of employees in connection with this policy, including maintaining the confidentiality of employees who come forward to discuss alcohol or drug abuse affecting them. Any person employed by the Company who voluntarily seeks assistance or rehabilitation for alcohol or drug related problems shall be granted amnesty and discipline is waived for drug-related issues so long as the person continues to participate satisfactorily in the rehabilitation or counseling program.

Compliance with State & Federal Law

Nothing in this policy is intended, nor shall it be construed, to authorize any action that is unlawful under federal or state law.

Amendments

Any amendments to this policy shall be the unanimous product of the Company, the Union, the Mechanical Insulation Industry and the Labor-Management Committee, and will automatically become an amendment to the company policy upon written notice.
PROCEDURES
All employees of Hudson Bay Insulation Company will comply with the guidelines outlined in OR OSHA Division 3, Subpart L, 1926.453, Aerial Lifts, and OAR 437-003-0073, when operating boom supported elevating platforms and scissor lifts – self-propelled elevating work platforms.

The information in these statutes may be found in the jobsite foreman’s reference manual.

**Training Requirements (1926.453)**

Only trained and authorized personnel will be permitted to operate the work platform. Before using the work platform, the operator will:

- Read and understand the manufacturer’s operating instructions and safety rules, and be trained by a qualified person on the contents of the manufacturer’s instructions and safety rules.
- Read and understand all decals, warnings, and instructions on the work platform.

On a daily basis before use, the work platform will be inspected, operators will:

- Inspect for defects such as cracked welds, hydraulic leaks, damaged control cables, loose wire connections, and tire damage.
- Inspect functional controls for proper operation.
- Annotate any suspect items discovered and a determination will be made by a qualified service person as to whether they constitute a safety hazard. All unsafe items shall be corrected before further use of the work platform.
- The inspection must be recorded on the aerial lift daily inspection log.

Before the work platform is used, the operator shall survey the area for hazards such as:

- Un-tamped earth fills.
- Ditches.
- Drop-offs or holes.
- Bumps and floor obstructions.
- Debris.
- Overhead obstructions and high-voltage conductors.
- Other possible hazardous conditions.
Requirements for Operations

The work platform will be used only in accordance with the manufacturer’s operating instructions and safety rules, ANSI A92.3-1990, and these standards:

- Only trained and authorized personnel shall be permitted to operate the work platform.

- Before each elevation of the work platform, the operator will:
  - Check for overhead obstructions and high-voltage conductors. A minimum distance of ten (10) feet from energized high-voltage conductors shall be maintained at all times between the conductors and the operator and platform equipment.
  - Ensure that the work platform is elevated only on a firm and level surface.
  - Ensure that the load and its distribution on the platform are in accordance with the manufacturer’s rated capacity. The manufacturer’s recommended load limits shall never be exceeded.
  - Ensure that outriggers and stabilizers are used if the manufacturer’s instructions require their use.
  - Ensure that guardrails are properly installed, and gates or openings are closed.

- Before and during driving while the platform is elevated, the operator will:
  - Be required to look in the direction of, and keep a clear view of, the path of travel and assure that the path of travel is firm and level.
  - Maintain a safe distance from obstacles, debris, drop-offs, holes, depressions, ramps, or other hazards to safe elevated travel.
  - Maintain a safe distance from overhead obstacles.

- The operator will limit travel speed according to conditions. Conditions to be observed are: Ground surface, congestion, slope, location of personnel, and other factors that may create a hazard of collision or injury to personnel.

- Stunt driving and horseplay is not permitted.

- Personnel will maintain a firm footing on the platform while working thereon. Safety harness and connecting devices attached to manufacturer-approved anchorage points will be used in cases where employees need to leave the platform to access work. Free climbing is only allowed in the set up and disassembly of fall arrest system.
• Use of railings or planks, ladders or any other device on the work platform for achieving additional height shall be prohibited.

• The operator will immediately report defects or malfunctions which become evident during operation and shall stop use of the work platform until correction has been made.

• Altering or disabling of safety devices or interlocks is prohibited.

• Care shall be taken to prevent ropes, electric cords, hoses, etc., from tangling with the work platform when the platform is being elevated, lowered, or moved.

• Work platform rated capacities shall not be exceeded when loads are transferred to the platform at elevated heights.

• The operator shall ensure that the area surrounding the work platform is clear of personnel and equipment before lowering the platform.

There are two types of personnel lifts, boom lifts and scissor lifts.

Boom Lift Requirements

Fall Protection

• Operators will wear a full body harness with back D-ring used to attach a lanyard from the harness back D-ring to the manufacturer supplied tie off point.

• Operators will not attach lanyards to the platform handrail or any other area of the lift other than the approved tie off point.

• When leaving or entering the platform in the raised position the employee shall be protected from a fall hazard by using a full body harness with back D-ring and lanyard. The attachment of the harness must be to an approved anchorage point and not to the platform. Once secured to the platform anchorage point, the employee may detach from the outside anchorage. This will require a double lanyard system.

• If standing on the rails of the boom lift platform fall protection is required using an outside anchorage point.
Guardrail requirement

- A guardrail or other structure shall be provided around the upper periphery of the basket.
  - Top Rail shall be at least 36” (inches) in height.
  - Mid Rail shall be directly between the top and bottom rails.
  - Bottom Rail or Toeboard shall surround the exterior of the platform.

- Guardrail and midrail chains, or the equivalent, may be substituted across an access opening. Toeboards may be omitted at the access opening.

- The work platform shall have a minimum width of 18” (inches).

Scissor Lift Requirements

Fall Protection

- When leaving or entering the scissor-lift platform in the raised position the employee shall be protected from a fall hazard via a full body harness with back D-ring and connecting device attaching harness to an approved anchorage point outside of the lift platform. Free climbing is only allowed in the set up and disassembly of fall arrest system.

- Do not attach lanyard to the scissors-lift handrail or any other area of the lift unless the manufacturer specifies an anchorage point inside the scissor-lift.

- Gate chain shall be closed to prevent falling through the gate opening when the lift is in use.

Guardrail requirement

- A guardrail or other structure shall be provided around its upper periphery.
  - Top Rail shall be at least 36” (inches) in height.
  - Mid Rail shall be directly between the top and bottom rails.
  - Bottom Rail or Toeboard shall surround the exterior of the platform.

- Guardrail and midrail chains, or the equivalent, may be substituted across an access opening. Toeboards may be omitted at the access opening.

The work platform shall have a minimum width of 18” (inches).
Hudson Bay Insulation employees are not to remove, touch or make friable any asbestos-containing material. The following information is for informational purposes only so that Hudson Bay employees can understand the process for their own protection. If you find any material that may contain asbestos, stop all work and all employees leave the area and notify the Safety Director immediately.

**General Information**

The Safety Director is responsible for establishment, implementation and maintenance of all aspects of this program. Asbestos is a naturally occurring material once used widely in the construction industry. Its ability to withstand high temperatures and resist many chemicals made it useful for hundreds of applications; however, the widespread use of asbestos has left a dangerous legacy. The improper handling of asbestos-containing material may release harmful amounts of fiber. When inhaled, asbestos has been shown to cause the following diseases: Asbestosis, Lung Cancer and Mesothelioma. If you have any concerns about material that you encounter and believe may be or contain asbestos, work activity must stop until a determination of what the material is has been made.

The Safety Director shall be contacted before any work begins on any project known to involve asbestos or has had asbestos removed. Remodeling and tie-in with existing buildings built prior to 1976 will probably contain asbestos. If you are working in a building that has or is perceived to have asbestos, you must follow and document the following procedures:

- No one is allowed to work in a building until a “Good Faith Survey” is received from the General Contractor, Owner or Developer. Copies must be posted at the site and put in the main job file.
- Make sure that the work crew(s) are aware that there may be asbestos present and to be on the lookout for it.
- If encountered, evaluate, and, if possible, seal off the area. Shut down the HVAC system to affected areas. Protect your crew as well as the general public from the spread of contamination.
- Notify your Project Manager and the Safety Director, who will notify the Owner.
- Document who found the material, who was exposed, where, time, who was contacted and what procedures were used.
- Do not attempt to remove, encapsulate or cover up asbestos encountered, no matter how little there is.
In order to comply with governmental regulations and to ensure that information is available about the dangers related to temporary cord sets and receptacles, and to electrical equipment and tools used in connection with construction, the following Assured Equipment Grounding Program (AEGP) has been established. All HBIC employees will abide by the following program.

The procedure described herein is suitable for compliance with the requirements of OAR 437-003-0404, Branch Circuits. It is the policy of the undersigned to establish and implement an Assured Grounding Conductor Program covering:

- Cord Sets and receptacles not a part of the permanent wiring of buildings or structures, and;
- All electrical equipment and tools used in connection with processes of construction or alterations.

Ground Fault Circuit Interrupters (GFCI) are required by the captioned codes for all 120 volt, single phase, 15-20 ampere receptacle outlets which are not a part of the permanent wiring of a building or structure of/or on a construction project. As an alternative to the Ground Fault Circuit Interrupter requirement, it will be the policy of the undersigned to instruct employees not to use any equipment that does not meet the requirements of the Assured Grounding Program.

**Job Site Information:**

Employer: **Hudson Bay Insulation Company**

Name or Location of jobsite:______________________________________

Person to implement the procedure:__________________________________

The person named above shall be designated as being competent, pursuant to OAR 437-003-0404. This person shall be capable of identifying hazards relating to grounding and shall have the authority to make any corrections such that each item on a given job site is adequately grounded.
ASSURED GROUNDING PROGRAM

Procedure

All equipment to be used on the construction site shall be tested, identified and coded using the following procedures with the exception of "double insulated" systems, which need not be tested.

Testing

- All equipment shall be tested before first use for grounding and continuity of the circuitry.
- Equipment returned to service following repairs shall be tested for continuity before being used.
- These tests shall be done quarterly, at intervals not exceeding once every three months.
- Tested equipment shall be identified by use of color coding.
- Equipment shall be visually inspected before use each day for external defects, including: deformed or missing pins, insulation damage and indications of possible internal damage. Equipment shall not be used until repaired, re-tested and results recorded.

Recording

The aforementioned tests shall be recorded on the attached schedule and retained at the job site.

Use of Electric Circuit Testing Devices

A suggested testing procedure is as follows:

- **Receptacles**: Use receptacle tester to determine correct connections to terminals.
• **Cord Sets:** First, plug the cord set into a properly wired receptacle, which has been tested as above. Then, plug receptacle tester into the cord connector (female device) of cord set to determine both continuity of grounding conductor and correct connections to terminals.

• **Cord and Plug Connected Equipment:** Use continuity tester. Connect or touch one terminal of continuity tester to the metal frame of the equipment or tool and the other terminal to the grounding prongs of the attachment cap plug at the end of the cord. An audible (bell) or visual (light) signal of the tester indicates that this is continuity of the grounding conductor. Although not required by OSHA, it is suggested that this test also be made between the metal frame and each of the other two prongs of the attachment plug. If there is a signal for this test, it indicates a possible ground fault and the tool should be checked further.

### ASSURED GROUNDING COLOR CODING SCHEME

<table>
<thead>
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<th>Month</th>
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<tbody>
<tr>
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<td>December</td>
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</table>
The following Exposure Control Program (Bloodborne Pathogens) has been established to protect every Hudson Bay Insulation Company from the dangers of various microorganisms that may be present in human blood and bodily fluid that can cause disease. All HBIC employees will abide by the Exposure Control Program in accordance with OR OSHA Division 2, Subpart Z, 1910.1030 and OAR 437-002-0360.

HBIC shall make available the Hepatitis B vaccine and vaccination to all employees who have occupational exposure and post-exposure medical evaluation who have had an occupational exposure incident.

All medical evaluations and procedures, including the Hepatitis B vaccine and vaccination series will be made at no cost to the employee, made available to the employee at a reasonable time and place and performed by or under a licensed physician or healthcare professional or facility.

Hepatitis B Vaccinations shall be made available within 10 working days of exposure; unless the employee previously received the complete Hepatitis B vaccinations series and antibody testing reveals that the employee is immune, or the vaccine is contraindicated for medical reasons.

- HBIC shall not make participation in a prescreening program a prerequisite for receiving the Hepatitis B vaccine.
- If the employee initially declines the vaccination, but at a later date (while still covered under the standard) decides to accept the vaccination, the employer shall make it available.
- HBIC shall ensure that employees, who decline the vaccinations offered, sign a statement in Appendix A to 1910.1030.
- If a routine booster is recommended by the US Public Health Service, such boosters shall be made available at no cost to the employee.

General Information

The Safety Director is responsible for the establishment, implementation and maintenance of all aspects of this Exposure Control Program, and will review these procedures in accordance with the regulations and update them as required.

Exposure Determination

Affected employees are those who are considered exposed, or will potentially be exposed, to blood and/or other potentially infectious materials.
This includes:

- Employees who have potential for exposure through the ordinary course of their work in an occupied or previously-occupied medical facility (e.g., craftsmen assigned to work on a project in a hospital, clinic, medical laboratory or dental office).

- Employees for whom any exposure would be through tasks that may arise as a collateral function of their job performance (e.g., designated first aid responders who provide first aid/CPR in response to an emergency).

**Methods of Compliance**

**Body Substance Isolation:**

- *All human body fluids will be treated as if known to be infectious for blood borne pathogens.*

**Engineering and Work Practice Controls**

- Employees who work in areas where exposure may occur during their ordinary course of work in an occupied or previously-occupied medical facility will be provided site-specific training and instruction on the proper safe work necessary for that project. A written site-specific plan may be developed for each project. If needed this plan will be based on information obtained from the medical provider-client related to site-specific procedures and concerns.

- Employees who are first aid responders will be informed that, while they may be required to maintain current first aid/CPR certifications under the DOSH regulations, they are not required to provide first aid/CPR unless they so desire. Regardless of whether required to or not, all employees who provide first aid/CPR must use safe work practices and personal protective equipment to minimize their risk of exposure.

If an exposure occurs employees will be directed to:

- Wash their hands with soap and running water as soon as possible following the exposure (Since hand washing facilities are not always available, antiseptic towelettes/cleanser will be provided in all first aid kits for immediate use until they can get to hand washing facilities)
• Report the incident as soon as possible to their supervisor and Safety Department and fill out an Employee Incident report.

• Report to our designated medical provider for evaluation and treatment.

• Complete HBIC Incident Report

Following a report of an exposure incident, HBIC shall make immediately available to the exposed employee, a confidential medical evaluation and follow up including at least the following:

• Documentation of the routes of exposure and the circumstances under which the exposure occurred.

• Identification and documentation of the source individual, unless the employer can establish that identification is not feasible or prohibited by state or local law.

  o The source individual’s blood shall be tested as soon as feasible and after consent is given in order to obtain HBV, HCV and HIV infection information. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual’s consent is not required by law, the source individual’s blood (if available) will be tested. When the source individual is already known to be infected with HBV, HCV or HIV, testing of the source individual is not necessary.

  o Results of the source individual’s test shall be made available to the exposed employee, and they shall be informed of the applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

**Personal Protective Equipment**

• Personal protective equipment appropriate to minimize potential exposure will be provided. Additionally, a biohazard bag, household bleach (or another type of disinfectant approved for use by the medical provider-client) and utility gloves will be available if area or equipment cleanup is needed.
• At projects where exposure during the ordinary course of work in an occupied or previously occupied medical facility may occur, the type and use of equipment will be determined based on the project with input from the medical provider-client related to the site-specific procedures and concerns. The site-specific written plan will document the type, use and handling of the equipment, and training of employees.

• The following personal protective equipment will be provided in each first aid kit. Disposable gloves; disposable CPR masks and antiseptic towelettes, biohazard bags and instant sanitizers.

Housekeeping

Waste disposal:

The following are considered regulated wastes which may require special disposal procedures:

• Contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state, compressed items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling contaminated sharps (anything that is able to puncture the skin that has blood or bodily fluid on it).

• Pathological or microbiological wastes containing blood or other potentially infectious materials (skin, tissue or fluids).

Jobsite cleanup:

Regardless of the source of the waste, employees will be directed to do the following to isolate the exposure area:

• First, cordon off the area or isolate the equipment to minimize any danger of exposure to others.

• Second, contact the general contractor site safety manager designated on the written site-specific plan for instruction and guidance on proper procedures until he/she can arrange for proper clean-up and disposal.
For supplies used and waste generated on the jobsite, employees will be directed to do the following:

- First, cordon off the area or isolate the equipment to minimize any danger of exposure to others.

- Second, put on protective gloves and goggles and disinfect the equipment/area with diluted household bleach (1:16 dilution = 1 cup of bleach to 1 gallon of water).

- Third, if disposal of waste is necessary, place in a plastic bag or puncture-proof container to avoid further contamination when disposing in the regular trash container, transfer to emergency medical personnel or an approved disposal site.
  
  o **DO NOT** dispose of contaminated waste into a garbage bin, refuse bin or similar. This will minimize further exposure to those who have access to those sites.
This Confined Space Policy complies with OR OSHA and OAR regulations and provides information about the dangers related to working in spaces having limited means of egress.

**Definition of a Confined Space**

A confined space is any space that has adequate size and configuration for employee entry and:

- Has limited means of ingress or egress and;
- Is not designed for continuous employee occupancy. (A vault designed to be worked in to service its contents is not considered designed for continuous employee occupancy.)
- A PERMIT-REQUIRED confined space must contain or have the potential to contain a hazard capable of causing death or serious physical harm, in addition to having the configuration of a confined space.

**Types of Confined Spaces**

Confined spaces include, but are not limited to:

- storage tanks
- boilers
- vent ducts
- stacks
- tanker cars
- process vessels
- Sewers
- exhaust ducts
- underground utility
- hopper cars
- bins
- tunnels
- pipelines
- vaults - silos
- Degreasers

Open top spaces or containers more than four (4) feet in depth, such as:

- pits
- vessels
- tubs
- Trenches
- vaults
General Information

Employees shall follow the chain of responsibility as follows:

Safety Director

- Is responsible for the establishment, implementation and maintenance of all aspects of this Confined Space Policy.
- May review all completed entry permits to ensure the program is functioning properly (this review is not required prior to entry).
- Will review these procedures periodically and update them as required.
- Will assure all records related to Confined Space Entry will be maintained a minimum of one year.

Foreman/ Superintendent / Supervisor

- Prior to start of any work performed as part of a project at a specific site, will formulate a Confined Space Plan.
- Is responsible for ensuring that employee assignments are made within the person’s training and skill level.
- Must approve, prior to entry, all employee confined space entry.
- Will require an attendant during the confined space entry.
- Is responsible for providing any equipment or tools that are required.

Employee

- Is to apply all of their training and experience in an effort to keep themselves safe.
- At no time attempt to do something for which they have not been trained and in which they do not feel safe.
- Is required to follow the site-specific confined space procedures and obey all restrictions.
Roles and Responsibilities

Entry Supervisors

Entry supervisors shall know the hazards faced during the initial entry, and throughout the work process. This will include information as to signs, symptoms, and consequences relating to any exposure to substances that may be found inside the confined space. They shall verify that the confined space permit is filled out in full and all tests have been completed as required, and all equipment specified on the permit is in place and operable before allowing entry into the confined space. They shall verify that rescue services are available and that the means of contacting them is operable. They shall terminate the permit at the completion of the shift, or when conditions not covered on the permit arise. They shall cause the removal of any unauthorized personnel from the confined space or immediate area outside, while entries are in progress.

Authorized Entrants

The authorized entrants are required to abide by the following rules. Know the area you are going to enter and any of the hazards that you may encounter during your course of work. Stay in communication with the ATTENDANT the entire time you are in the confined space, or on designated preset intervals. Exit the confined space at the first sign of any symptom, sign or change in behavior to yourself or co-workers, or when directed to exit by the ATTENDANT and/or ENTRY SUPERVISOR. Inform the ATTENDANT of these symptoms or conditions when exiting. Utilize all personal protective equipment required by the confined space entry permit, keep all cords and hoses out of harm’s way, and abide by all aspects of this procedure while conducting any confined space work.

Attendant (ATTENDANT)

The ATTENDANT shall know the hazards faced during the initial entry, and throughout the work process. This will include information as to signs, symptoms, and consequences relating to any exposure to substances that may be found inside the confined space. They shall be aware of possible behavioral effects these substances may cause to the entrants. They must remain outside the entrance to the confined space while work inside is in progress, and maintain a record of all authorized entrants. Any unauthorized entrants must be immediately removed from the area and reported to the entry supervisor. Communication shall be maintained at all times with the authorized entrant. If for some reason communication fails, an evacuation shall be implemented and the confined space permit shall be reevaluated by the entry supervisor and new procedures implemented to correct the problem.
This is also true if any condition arises that may pose a threat to the workers inside. Attendants shall not perform any duties that interfere with their primary job of monitoring and protecting the entrants inside the confined space.

**Rescue**

- Use non-entry retrieval systems or methods to rescue entrants in a permit-required confined space unless this:
  - Would increase the overall risk of injury to entrants or
  - Wouldn't contribute to the rescue of the entrant.

- Make sure each entrant uses a chest or full-body harness, with a retrieval line attached to the harness at one of the following locations: At the center of the employee’s back, near shoulder level. Above the employee’s head. At another point which presents a profile small enough for the successful removal of the employee.

- Attach the retrieval line to a mechanical device or fixed point outside the space, so rescue can begin as soon as necessary.

- Make sure a mechanical device is available to retrieve entrants from vertical spaces more than 5 feet (1.52 m) deep.

**Note:**
When you can demonstrate that the use of a chest or full-body harness isn't feasible or creates a greater hazard, then you may use wristlets or another method shown to be the safest and most effective alternative.

**Confined Space Hazards**

- **Toxic Atmospheres:** If the contamination is below the Permissible Exposure Limits (PEL) as defined in OR OSHA Division 2, Subpart J, 1910.146, the entry may be made without a respirator. Atmospheres where contamination is above the PEL, but below values immediately dangerous to life or health (IDLH) may be entered with approved respiratory protective equipment, although it is to be avoided if possible. Atmospheres at or above IDLH will not be entered by employees.
- Oxygen Deficiency: The minimum oxygen level must be 19.5%. At levels below this, no entry is permitted without being equipped with air supplied breathing equipment.

- Flammable Gases or Vapors: Atmospheres that contain or could contain flammable gases or vapors shall not be entered if the concentration of the gas or vapor in any part of the area is more than 0% of the lower explosive limit (LEL).

- Mechanical / Electrical Hazards: Confined spaces containing parts which may move or which contain agitators, fans or other power driven parts that could be hazardous will not be entered until such parts are controlled and isolated.

**Preparation of Confined Spaces**

The following steps are necessary to prepare the space before anyone enters. The entry supervisor shall check to see that each precautionary step has been taken.

- All departments likely to be affected by service interruptions must be notified.

- Barriers must be erected at the confined space to prevent inadvertent entry.

- The following signage must be posted near the confined space area:
  - Permit, properly completed, posted near the entry. The permit is valid only until completion of the job or end of the shift, whichever comes first. All permits shall be retained and filed with the permanent job records.
  - Posters warning of Permit-Required Confined Space operations.
  - Hot work permits, if applicable. This is separate from the confined space permit.
  - Posted emergency response phone numbers or radio contact procedures. This may be part of the permit.

- Blind or disconnect and cap all input lines, so that no hazardous materials can enter the space.

- Complete lockout/tagout procedures.
• Empty the space of any materials that may be hazardous. If necessary, clean and purge hazardous residue in the space.

• Prior to entry, atmospheric testing will be conducted. Results will be recorded in the air sampling log.

• Verify that the training of entry Supervisor, attendant, and entrant is documented and current.

Entry Requirements

• Atmospheric testing. Test the air in all areas and elevations before entry. Monitor continuously or retest periodically for as long as the space is occupied and as is appropriate for the hazard involved.
  
  o Oxygen. Allowable limits are between 19.5 and 23.5 percent.
  
  o Flammables. For gases, the lower flammable limit (LFL) must be lower than 0%. For dust, do not exceed the LFL.
  
  o Toxicity. List and test for any toxic materials that could be present and their permissible exposure limits (PEL).

• If the air is unsafe according to any of these tests, the hazard must be controlled before entry is allowed. The priority of controls is first engineering, second administrative, and last, personal protective equipment.

• Evaluate for heat stress potential. Mitigate as necessary.

• Appropriate personal protective equipment such as respirators, goggles, gloves, shoes, and coveralls shall be used as required.

• If continuous visual communications between the attendant and entrant will be difficult or impossible, choose and list on the entry permit the devices to be used. Test this equipment before entry. List any special procedures necessary.

• List any special light sources, spark-proof tools and other electrical equipment that must be on hand before entry begins. Flammable gas presence above 1% of LFL requires continuous monitoring of gas levels and elimination of any source of ignition.
Emergency and Rescue Procedures

- The safest ways of leaving a space when conditions deteriorate are: Self-rescue, when an entrant evacuates the space with no help at the first sign of trouble.

- Only workers trained in rescue can enter the space for the purpose of rescue.

- Attendant personnel shall not leave their post unless the confined space entry operation is complete, all personnel have exited, and the space is secure. For rescue operations, they shall:
  - Notify rescue personnel via their radio/phone voice/visual signal communications. No communication links are permitted, which require leaving their attendant post.
  - Attempt rescue via established ‘non-entry’ rescue procedures.
  - Maintain count of all personnel entering the confined space.
  - List on the entry permit all of the necessary emergency equipment or devices such as rescue and communication equipment and verify its working order prior to space entry.
  - Review the Emergency Response Plan prior to any entry.

Post-Entry Considerations

- The Supervisor who authorized the entry shall be responsible for:
  - Verifying all personnel are no longer in the confined space;
  - Determining that all equipment used during the entry has been removed from the confined space;
  - Removal of entry permit and forwarding it to the office for filing.

Training

- All employees and supervisors involved in confined space entry shall be instructed on the proper procedures to be followed. Documentation of the training is to be maintained.

- Standby Personnel must be trained in First-Aid and CPR.
All employees and supervisors involved in confined space entry rescue shall be trained in the use of self-contained breathing apparatus if needed.

Training in the use of testing equipment must be conducted unless you choose to employ an industrial hygiene consultant for testing of the confined space.
DISCIPLINARY PROCEDURES

In an effort to maintain a work environment free of accidents and incidents, Hudson Bay Insulation Company requires all employees to adhere to its Safety Requirements. Employees found to be in non-compliance with the safety policies and procedures of HBIC will be counseled or disciplined up to and including termination.

The following actions are subject to disciplinary procedures included but not limited to, are; horseplay, fighting, failure to wear PPE, gross negligence, substance abuse and working in an unsafe manner that may cause harm to themselves or co-workers.

First Violation:

The employee will be given a verbal warning of the violation. A notice of the violation will be documented in the employee’s permanent file and sent to the safety department. The superintendent or a safety representative will thoroughly explain the violation and assist the employee in any way possible, to include retraining, to prevent a reoccurrence of the violation.

Second Violation:

The employee will be given written notification of the violation; a copy will be maintained in the employee’s permanent file and also with the safety department. The employee will be subject to mandatory layoff based upon the following table. The level of severity will be determined by the superintendent and the Safety Director.

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<thead>
<tr>
<th>Level</th>
<th>Duration</th>
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<td>Minor</td>
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<tr>
<td>Moderate</td>
<td>Three (3) days</td>
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<tr>
<td>Severe</td>
<td>Five (5) days</td>
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Third Violation:

The employee will be given written notification of the violation; a copy will be maintained in the employee’s permanent file and also with the safety department. Employee will be terminated.
Note: Management reserves the right to terminate employment after the first or second violation, dependent upon the severity of the infraction and the impact upon others.

HBIC has a **ZERO TOLERANCE** policy for some actions including but not limited to; failure to use adequate fall protection where the situation may present severe bodily harm or death, acts of violence in the workplace and non-adherence of the drug-free workplace policy.

Each violation will be explained and documented in detail to the employee in the presence of a witness. The witness should be a foreman, superintendant, project manager or a safety department representative. All possible steps will be taken to insure the employee understands company policies and procedures.

**Sub-Tier Subcontractors:**

Sub-Tier Subcontractors to Hudson Bay Insulation Company shall adhere to HBIC Safety Requirements. Non-compliance with the safety policies and procedures of HBIC will result in a written warning and appropriate correction and if necessary immediate restriction from the jobsite until conditions are corrected.

Subcontractors shall submit a written report to HBIC’s safety department of all incidents/accidents including near misses within 24 hours of the occurrence.

Subcontractors shall submit, in writing all weekly safety meeting minutes/toolbox talks for the duration of which they are on the jobsite, or as directed by the Project Master Contract.

The following actions are subject to disciplinary procedures included but not limited to, are; horseplay, fighting, failure to wear PPE, gross negligence, substance abuse and working in an unsafe manner that may cause harm to themselves or co-workers.
**ELECTRICAL SAFETY**

All electrical equipment must be inspected prior to use, identify any hazards and ensure that it has the proper certification from a recognized agency such as UL. Maintain and use all guards, inspect flexible cords and cables to ensure proper insulation and grounding is in place to prevent electric shock.

Never work on or around energized parts or equipment. If work is required in these areas follow the proper procedures to de-energize all of the exposed electrical components including the use of our Lock Out Tag Out Program.

Verification that all exposed electrical components and equipment have been de-energized shall be completed before proceeding with work. Always treat these components and equipment as if it is a live circuit.

All employees need proper training prior to working around potential electrical hazards. This training will be provided by or facilitated by the Safety Director. Thereafter refresher training or retraining will be provided as needed.

All Work required on energized parts of equipment will be subcontracted to licensed qualified contractors. Shields, guards or barriers are to be installed by a qualified licensed contractor and used when working in enclosed or confined spaces with electrical hazards.

Ensure a safe distance of 10 feet from exposed overhead energized lines or cables is maintained for all personnel, equipment and vehicles. Use of visual markers may be used to help maintain the safe work zone.

Do not enter or work in the areas that are or become inadequately illuminated where electrical hazards could exist.

Only non conductive ladders are to be used on Hudson Bay Insulation Company projects.
A copy of the jobsite specific Emergency Plan shall be available at every jobsite.

**In the event of a serious injury or accident, immediately call 911 or appropriate number.**

**Emergency Procedures:**

An emergency is any situation that poses an immediate threat to life and property. Some examples are: Fire, flood, windstorm, explosion, serious injury, collapse of equipment/structure, toxic fumes. Hudson Bay Insulation Company shall notify the General Contractor/Customer of any emergency situations arising at the job site.

Superintendants and jobsite foremen shall direct all HBIC personnel during unforeseen emergencies. These responsibilities are very important since the loss of life, jobs and extensive damage may result unless employees react quickly and effectively.

In the event of a serious injury which requires outside medical assistance, employees will follow these procedures:

- Dial emergency services – 911 or appropriate number – to request medical assistance
- Contact the HBIC jobsite supervisor and appropriate jobsite safety personnel
- Ensure that emergency service route is clear and easy to follow, post other employees at entrance sites to aid in the response.
- Contact Scott Bee 206-387-3121 or Lisa King 206-999-0119, immediately following the arrival of medical services.

1.) In the event a fire is discovered.

The first step is to SOUND THE ALARM. The person who discovers the fire is supposed to:

Give a verbal alarm by shouting **FIRE, FIRE**, and then call **911**. Upon calling the person shall state their name, the company’s name, where in the building the fire is located, and the address of the job site.
**EMERGENCY PROCEDURES**

After giving the alarm - **and not before** - the individual has to make the decision whether to fight the fire. The wisdom of doing so depends on the circumstances. If it does seem feasible to try to extinguish the blaze, the individual should know what equipment is available to him/her and how to use it. It is important that everyone know where fire extinguishers are located.

If the individual discovering the fire can put it out, or get it under control, he or she should do so. One thing every employee should be made aware of is: **No one should try to fight a fire alone.** If the fire can be extinguished with a fire extinguisher, employees are encouraged to do so as long as there are two or more people present. If the heat, smoke or exertion weakens the individual, help will be needed fast. The second individual can come to his rescue and perhaps attack the fire with another extinguisher.

2.) Evacuation and Gathering Points

In the event of an emergency, all employees will evacuate the building and gather at the designated rally point. The supervisor or jobsite foreman will conduct a “head count” to ensure that all HBIC employees are accounted for. Once the “head count” is complete, the supervisor or jobsite foreman will report to the Mechanical and/or General Contractor representatives and defer to jobsite specific protocol.

Under **NO** circumstances may any employee leave the site or re-enter the building during an emergency. All HBIC employees must be accounted for and direction given from the Mechanical or General Contractor to leave the site or return to work.

The Supervisor or the Foreman is the designated individual for emergency evacuation operations. All employees must know their recommended evacuation route and an alternative in case the emergency blocks their prime route. They must know the designated assembly area so that head counts can be taken to account for all personnel and receive further instructions from Mechanical or General Contractor.
3.) Cooperation with Emergency Personnel

Hudson Bay Insulation Co. employees will cooperate with emergency personnel in whatever capacity is needed, whether guiding emergency personnel to the fire, or medical personnel to the site where injuries have occurred, by keeping other individuals out of the area, or staying out of their way completely.

After the occurrence of the emergency, Hudson Bay Insulation Company will ensure that all proper incident reports that are required to be submitted to General Contractor/Client, are completed and submitted in the required time.

4.) Communications with media and HBIC employees

If an emergency has occurred, it is important that HBIC employees make no comments to the news media. All communication to the media will be made through a coordinated effort of the management teams of the General Contractor/Client and HBIC.

Hudson Bay Insulation Co. will assign an individual who will be responsible for communication of facts to our employees. Their responsibilities will include contact with the media as well as communication to employees and Clients.

5.) Natural Disaster

In the event of a major catastrophe the General Contractor Management Team is responsible for execution of properly securing safety of project and jobsite personnel. One or some of the steps to be followed are:

1.) Call assistance from outside, 911 or appropriate number
2.) Stop work
3.) If necessary, call for project site evacuation
4.) Issue instructions to supervisors and employees
5.) Set up security control at the emergency area

6.) Inclement Weather

Certain precautions and procedures should be followed when inclement weather is imminent. The jobsite foreman or superintendent shall closely monitor working conditions at the jobsite, evaluating dangers that may exist, be it ice, snow or windstorms. If for any reason, the weather conditions could result in injury or unsafe working conditions, immediate and appropriate action will be taken, up to and including the stoppage of work. All precautions must be taken to protect the safety of our employees and minimize damage. The Project Foreman shall make an effort to determine that employees have a safe route home.
FALL PROTECTION

Fall Protection is required when Hudson Bay Insulation Employees or subcontractors are working within 6’ (feet) of an unprotected edge that is 6’ (feet) or greater above the next lowest surface. Guardrails or a barrier preventing exposure will eliminate the fall hazard.

All employees must comply with the site fall protection policy. Failure to adhere to the fall protection policy may be grounds for immediate termination of the offending employee.

In accordance with OR OSHA Division 3, Subpart M, 1926.501-503 and OAC 437-003-1501, the following Fall Restraint / Fall Arrest Program is hereby formulated for Hudson Bay Insulation Company for use at all jobsites.

Identify all Fall Hazards

According to Subpart M 1926.502 and 437-003-1501, a fall hazard is defined as “any occurrences when the distance from the worker’s support to the level where a fall would stop exceeds six (6) feet”.

Therefore, a written description must be made of all fall hazards in each work area. These include the following items and are defined in 1926.501 and 437-003-1501:

a) Leading Edges     f) Open-Sided Floors
b) Perimeter Edges   g) Stairways
c) Elevator Openings  h) Aerial Lifts
d) Stairway Openings  i) Scaffolds
e) Vent, Mechanical Openings  j) Other

While it is evident that fall protection remediation is the responsibility of the general contractor for items ‘a’ through ‘g’ listed above, if methods of fall arrest / restraint are not provided, HBIC must immediately notify the general contractor of the location and deficiency. Also, prior to work commencing in the subject area, these deficiencies must be corrected.
For those fall hazards that we generate and work with, generally items ‘h’ and ‘I’ above, and any others that are present in the work area when work commences, must be incorporated in the fall protection plan.

**Fall Protection Work Plan**

All fall protection work plans should prepare for any fall protection / fall arrest situation that may arise.

In general, the Fall Protection Work Plan shall contain:

- Identification of all fall hazards in the work area where employees are assigned.
- A description of the method of fall arrest or fall restraint to be provided.
- A description of the correct procedures for the assembly, maintenance, inspection and disassembly of the fall protection system to be used.
- A description of the correct procedures for handling, storage and security of tools and materials.
- A description of the method of overhead protection for workers who may be in, or pass through the area below the work site.
- A description of the method for prompt, safe removal of injured workers.

Prior to permitting employees into areas where fall hazards exist, the employer shall ensure that employees are trained and instructed in all items above. This training shall be documented by executing the fall protection work plan for their assigned work area(s).

**Fall Protective Systems**

A fall-protection system refers to equipment designed to control fall hazards. All fall protection systems either prevent a fall from occurring or safely arrest a fall. Types of fall-protection systems include the following:
Guardrail Systems

- Top edge height of guardrail systems shall be 42”, plus or minus 3”.
- Guardrails shall have a midrail and toe board.
- Guardrail systems shall be capable of withstanding a 200-pound force in any outward or downward direction.
- Wood top rails and posts shall be at least 2”x4” and posts shall be spaced not more than 8’ on center.
- Wire rope used for a top rail must be at least ¼” diameter and be flagged at not more than 6’ intervals with high-visibility material.
- When guardrail systems are used at hoisting areas, a chain, gate or removable guardrail section shall be placed across the access opening when hoisting operations are not taking place.

Warning Lines

- Warning lines may be used for roofing work. Roofing work does not include construction of the roof deck or leading edge work.
- A warning line system shall not be used as fall protection on roof slopes greater than 2 in 12.
- Warning lines shall be erected not less than 10’ from roof edge.
- Warning lines shall be flagged with high-visibility material at not more than 6’ intervals.
- Height of warning line shall be 34” to 39”, and capable of withstanding a 16 pound force when applied horizontally at the stanchion.

Safety Monitoring System

- Safety monitoring systems shall only be used for roofing work. Roofing work does not include construction of the roof deck or leading edge work.
FALL PROTECTION

- At no time shall the Safety Monitoring Systems be used as a means for fall protection without prior approval of the Safety Director.

Warning Lines Used for Other Than Roofing Work

- Warning lines may be used to mitigate the fall hazards by eliminating exposure.

- When a safe work distance is designated, which may also include some sort of warning line or other barricade, it must be one that eliminates the potential for the worker to stumble and fall over the unprotected edge but at a minimum 10 feet.

- There should also be a margin of error included in the distance since there is not a positive means of stopping the worker’s forward momentum toward the unprotected edge.

- Factors that might enter into such an evaluation could include weather conditions, lighting, the slope and condition of the walking surface, the kind of work being performed, materials being handled, the height of the worker above the work surface (such as working from a ladder), housekeeping, training, experience, how much time the job takes, or the distance that the worker stays away from any open sides or edges.

- The guiding principle to follow when evaluating warning or barricade lines is that the distance from the unguarded edge of the work surface must be great enough to remove the worker from exposure to a fall hazard.

- Factors to evaluate in determining the allowable use and correct location of barrier lines include such things as the kind of fall hazard present, the work being done and the exposure to the hazard, the pitch of the work surface, whether the deck is secure or not, the degree of slickness of the walking surface, weather conditions and environmental conditions (ice, moss, rain, wind, lighting, sun glare, etc.), what equipment is being used, access and egress protection, training, and supervision.

- Warning lines should be constructed the same as for roofing work.
FALL PROTECTION

Safety Net Systems

- Safety Net systems consist of mesh nets, including panels, connectors, and other impact absorbing components.
- If safety nets are needed, the designated competent person will oversee the installation and performance requirements of the system.

Covers

- Floor and roof openings shall be protected by a standard guardrail system or covered. The cover shall be clearly marked “hole” or “cover” and be secured to prevent accidental displacement. Covers shall be capable of supporting at least twice the weight of employees, equipment or material that may be imposed on them at any one time.
- In the instance of discovering a hole or penetration being left uncovered by another trade, immediately stop work and contact the jobsite foreman and/or general contractor.

HBIC personal fall protection consists of two types:

Fall Restraint

Fall restraint prevents an employee access to an open edge or other fall hazard areas like over water or dangerous equipment. The following items are required in a Fall Restraint System:

- A full body harness, with back D-ring providing the only allowable lanyard attachment point.
- A rope or lanyard attaching the harness to an anchorage point.
  - The rope or lanyard may only be long enough to allow free movement but not allow the worker access to access the fall hazard area.
- An approved Warning Line shall be used.
  - A warning line system shall be erected along all unprotected edges of the work area that could expose employees to falls of 6’ (feet) or greater to the next lowest level.
FALL PROTECTION

- The rope, wire or chain warning line shall be erected not less than 6’ (feet) form the edge of an unprotected edge.

- The rope, wire or chain warning line shall be flagged at no more than 6’ (feet) intervals with highly visible materials.

Fall Arrest

Fall Arrest is the combination of approved safety equipment and components used to arrest or stop a free fall. The following items are required for a Fall Arrest System:

- A full body harness, with a back D-ring providing the only allowable lanyard attachment point shall be used.

- An approved shock-absorbing lanyard shall be used for connecting the employee’s harness to an approved anchorage point.

- A self-retractable lifeline may also be used in place of a shock absorbing lanyard if attached directly to the harness’s back D-ring and **not used with any other type of lanyard**.
  - A self-retractable lifeline shall only attach to the worker’s back D-ring found on the back of a full body harness.
  - A self-retractable lifeline may not be used with any other type of lanyard, i.e., daisy chaining them together.
  - All fall protection components that have attachments are required to have a double locking snap-hook.
  - Lanyards **shall not** be wrapped around beams, posts, or be in contact with sharp edged material.
  - Use beam straps with D-rings only.
  - Lanyards and harnesses will be inspected daily.

- An approved anchorage point shall be used for attaching lanyards.
  - The lanyard shall be attached to anchorage points capable of withstanding 5,000 pounds.
FALL PROTECTION

- Self-retractable lifelines require a 3,000 pound anchorage point.
  - Horizontal lifelines may be used for anchorage points for no more than 2 employees at any one time.
    - The cable shall be at least 3/8” (inch) and have the appropriate number approved cable clamps per cable used.
    - 3/8” (inch) cable requires at least two 3/8” (inch) cable clamps.
    - ½” (inch) cable requires at least three ½” (inch) cable clamps.

PROCEDURES

All components of PFAS shall be inspected before usage for damage and serviceability. Refer to manufactures instructions for inspection procedures. Lanyards, Harnesses, Lifelines and Retractable Lanyards shall be checked quarterly by job foreman or superintendent and marked with colored tape according to the Assured Grounding Program.

Handling, Storage and Securing of Tools and Materials:

The handling, storage and securing of tools and materials in and around work areas is of the utmost importance in insuring a safe work place. When transporting material and its storage, the guidelines of the OAR must be followed to the letter.

The securing of tools and materials on elevated work platforms will be as follows:

- Tool belts will be used to carry hand tools to the elevated work surface.
- Tools too large for the tool belt will be raised by rope and pulley.
- When hand tools are used, they will be returned to the tool belt immediately after use.
- Large tools will be secured to the guardrails with the cable provided.
• Insulation material will be raised to a stationary work platform by rope and pulley.
• Moveable elevated work platform will be loaded at ground level. No more material will be kept on the platform than can be secured inside the guardrails one stack high.

**Overhead Protection**

Overhead protection is required whenever an elevated work platform exists. These requirements will consist of the following elements:

• No one is allowed to work below an elevated platform.
• Warning signs will be posted to limit access to areas under elevated work platforms.
• Hard hats are required at all times.
• Toeboards will be used on all elevated work platforms.

**Rescue Plan**

Employees who use personal fall arrest systems must be able to rescue themselves if they are suspended after a fall or they must be promptly rescued. Employees may be trained in self-rescue or aided-rescue.

If an insulation crewmember is injured, please refer to the emergency procedures in this manual.

**Employee Training and Documentation**

Hudson Bay Insulation Company shall provide a training program for each employee who might be exposed to fall hazards. The program shall enable each employee to recognize the hazards of falling and shall train each employee in the procedures to be followed in order to minimize these hazards.
HBIC shall assure that each employee has been trained in the following areas:

- The nature of fall hazards in the work area.
- The correct procedures for erecting, maintaining, disassembling, and inspecting the fall protection systems to be used.
- The use and operation of guardrail systems, personal fall arrest systems, safety net systems, warning line systems, safety monitoring systems, personal fall restraint systems, slide guard systems, positioning devices, and other protection to be used.
- The limitations on the use of mechanical equipment during the performance of roofing work.
- The correct procedures for the handling and storage of equipment and materials and the erection of overhead protection; and
- The role of employees in the fall protection plan.

CERTIFICATION OF TRAINING

The written certification record shall contain the name of the employee trained, the date(s) of the training, and the signature of the person who conducted the training. Master records will also be kept on file with Hudson Bay Insulation Company.

RETRAINING

When the employer has reason to believe that any affected employee who has already been trained does not have the understanding and skill required, the employer shall retrain each such employee. Circumstances where retraining is required include, but are not limited to, situations where:

- Changes in the workplace render previous training obsolete; or
- Changes in the types of fall protection systems or equipment to be used render previous training obsolete; or
- Inadequacies in an affected employee's knowledge or use of fall protection systems or equipment indicate that the employee has not retained the requisite understanding or skill.
Every Hudson Bay Insulation Company employee is responsible for maintaining high standards of housekeeping and assuming full responsibility for maintaining a safe, hazard free, and healthful work environment as established by applicable fire codes, general safety requirements and as identified in HBIC site specific safety plan.

All firefighting equipment shall be periodically inspecting by the jobsite supervisor, and maintained in good operation condition. All defective equipment shall be tagged and immediately removed from service and replaced with serviceable equipment.

**Housekeeping**

- Remove trash from inside of buildings and away from buildings daily and/or whenever the accumulation of material is sufficient to constitute a fire hazard, whichever is sooner. Avoid accumulation of flammable rubbish and waste materials.

- All spills of potentially flammable chemicals will be absorbed with the appropriate absorbent materials as outlined in applicable Material Safety Data sheets. Under no circumstances are wood, sawdust or shavings to be used as an absorbent for spilled flammable liquids or petroleum lubricants.

- Burning of rubbish is prohibited.

**Refueling of Equipment**

- Any fuel-powered equipment such as air compressors, hoists, pumps, etc., shall be located in a well-ventilated area, exhausting outside the structure and away from combustible materials.

- Fuel-powered equipment are to be fueled outside and clear of structures with engines shut off and allowing enough time prior to refueling for system to cool down.

- Use of electrical or air-driven equipment in the structure is preferred and whenever appropriate ventilation cannot be accomplished.

**Heating Devices**

- Open flame devices, sources of heat and spark-producing equipment will not be used in areas around flammable materials.
• All open flame devices used in construction work must have a fire watch attendant, unless equipped with combustion safety controls. A 2-A:10-B:C type fire extinguisher shall be located at each site where open flame devices are in use.

• Propane, acetylene, oxygen and butane tanks will be removed from the buildings, identified as empty and stored in a secured upright position. Oxygen tanks will be stored in a separate area from other flammable compressed gases.

Flammable Liquids

• All flammable liquids, chemical fuels, resins, lubricants, and solvents shall be segregated, labeled and stored in an approved location with approved spill control and containment facilities. Non-compatible materials will not be stored in the same area.

• Flammable liquid containers shall be kept covered at all times when not in use.

• Flammable liquids will not be stored in the work area, except for quantities necessary to accomplish the task. All flammable waste will be stored and labeled in an appropriate covered container.

Electrical Equipment

• All electrical equipment shall be inspected in accordance with the assured equipment grounding conductor program as outlined in Hudson Bay Insulation Company’s Safety Plan and/or as established on the project.

• Overloading extension cords and electrical receptacles is not permitted.

• All cords and wiring will be protected from mechanical damage by forklifts, manlifts, articulated lifts, etc., by keeping them out of the ingress and egress paths.

Spray Painting, Flammable Resins and Chemicals

• Notify the owner / general contractor prior to the application of flammable coatings or cleaning materials.
FIRE PROTECTION & PREVENTION

- No spray painting or applications of chemicals which may give off flammable vapors are permitted within fifty (50) feet of open flame devices or other possible ignition sources.

- Exhaust fans and/or blowers shall be used to ventilate any areas where hazardous vapors may accumulate.

**Ingress and Egress**

- Ingress to all construction areas will be coordinated through the general contractor.

- The contractor’s Safety Manager and the on-site safety monitor will coordinate the fire prevention plan for the project.

- Ingress and egress routes will be maintained free of all debris for all construction employees throughout all phases of construction.

**Emergency phone numbers:**

- The emergency telephone numbers for the project site shall be prominently displayed by or on the inside lid of the job box.

This plan is not all inclusive but is intended to be a guide for HBIC Project Managers and Superintendents to develop a “site specific” fire protection plan. The plan should be developed and implemented as soon as practical after arrival on site. For complete information on fire prevention and protection requirements refer to Code of Federal Regulations 29 Part 1926, OR OSHA Division 3, Subpart F, 1926.150 through 1926.159 Fire Protection and Prevention.
Hudson Bay Insulation Company provides ANSI approved First Aid Kits and supplies on all job sites. Kits should be stored in a job box easily accessible to all employees. Periodically assess to ensure the availability of adequate first aid kit supplies and replenish as needed.

Employees that travel to and from short duration job sites shall have and maintain a first aid kit inside their company vehicle.

In the absence of medical assistance that is reasonably accessible in terms of time and distance to the worksite, a person who has a valid certificate in first aid shall be available to render first aid. Certificate in first aid training will be obtained from the U.S. Bureau of Mines, the American Red Cross, or equivalent training documentary evidence is maintained in our offices.

When potential exposure to injurious corrosive materials exists, a suitable facility shall be provided for quick drenching or flushing of eyes or body where the eyes or body of any person may be exposed.

Emergency Injury Requirements
When an injury occurs on site:
1. Assess the seriousness of the injury.
2. Stabilize the condition of the injured person as much as you can.
3. Send someone to call for help.
4. Have a runner stationed at the entrance to the site and place other runners at key points along the route to guide emergency medical personnel to the proper location.

When to call for emergency medical assistance:
Conditions that require emergency medical assistance are listed below. Many other kinds of conditions may also require emergency assistance. Emergency medical help is required if the injured person:
1. Is unconscious or disoriented.
2. Is unable to walk or is trapped in machinery or debris.
3. Is bleeding severely from deep cuts or gashes.
4. Has sustained head injuries.
5. Has sustained crushing injuries.
6. Was injured by contact with electricity.
7. Has a fracture or possible fractures.
8. Has dislocated joints or possible dislocations.
9. Was injured by chemical releases or accidents.
10. Has experienced a fall.
11. Has a burn other than minor burns, burns on the face, or scalding burns.
12. Has a difficulty breathing or chest pain.
13. Responds with intense or unexpected symptoms following a minor injury.
What HBI can do in an emergency
Hudson Bay Insulation Co. (HBI) provides first aid, medical services and arranges for emergency transportation for employees with on-the-job injuries or illnesses. Medical resources available to HBI employees include:

1. Occupational medical clinics are available to all employees on HBI projects for the treatment of occupational injuries and sudden serious illnesses.
2. All foreman and supervisors on HBI projects are certified in first aid and CPR. Other employees on the site may also have these skills. Training is often conducted onsite for interested employees.

Transportation of injured or ill employees
Non-Emergency
HBI will transport employees with non emergency injuries to and from the medical facility.

Emergency
Because the efficient and thoughtful handling of seriously injured or ill employees minimizes confusion and offsets negative reactions that can follow a serious accident, it is best to call 911 for Medic One immediately. The 911 unit will arrange for transportation to a medical facility as appropriate.

Injury management
An employee who has sustained an on-the-job injury or illness may return to work if a release from the attending physician has been obtained. All employees must submit to a drug test.
An employee who is restricted to specific tasks due to casts, braces, or other medical devices, such as crutches, may return to work following the case being reviewed by:

1. The HBI safety director
2. The HBI superintendent
3. The employee’s physician

Note: Employees will be returned to work as soon as is medically possible.

Treatment at a non-referred medical facility
Any employee who obtains outside medical treatment for an alleged on the job injury or illness must report to HBI the injury or illness and the name of the attending physician no later than the first weekday following treatment. Failure to report this information may result in the denial of workers compensation benefits.

Medical records keeping
HBI’s safety director is responsible for ensuring that the appropriate safety related reports concerning occupational injuries and illnesses are filled out, filed, and maintained. Copies of the following must be immediately forwarded to the safety director.
First Aid

Reports and OSHA/DOSH forms
The following reports and records must be filled out, filed, and maintained:

1. Supervisor’s Report of Accident is to be completed for all injuries sustained by crafts people requiring a physician’s attention. A copy of the completed report is sent to the HBI safety director and Human Resources.
2. Employer’s Accident Investigation Report is to be completed by the Safety Director within 24 hours of the incident. Original will be maintained by Human Resources.
3. OSHA 300 Log and Summary of Occupational Injuries and Illnesses will be maintained at Human Resources and posted in the main office.

Accident reporting and investigation
Each occupational injury or illness that results in treatment by a physician must be thoroughly investigated and monitored. In addition, certain first aid cases as well as non-injury and near miss incidents with a potential for serious injury must also be investigated.

The purpose of accident investigation is to identify contributing causes so future incidents of a similar nature can be prevented. These contributing factors also have a bearing on legal liability issues. Investigations should be directed toward fact finding, not fault finding.

The investigation should begin as soon as possible after the necessary notifications (i.e. Labor and Industries, HBI Safety Director) have been accomplished. All accident reports are submitted to the project superintendent and forwarded to the HBI Safety Director for investigation.

Concluding the investigation
At the conclusion of a major accident investigation, a meeting is held to assure that the causes of the accident have been determined and that proper corrective actions have been initiated. Personnel who must attend this meeting include:

1. The HBI Project Manager
2. The HBI Superintendent
3. The HBI Jobsite Foreman
4. The HBI Safety Director

Injury Prevention
If all the facts involved in an accident are known, it should not be difficult to determine what actions are necessary to prevent injury to other employees with similar duties or exposure to similar conditions. Following prescribed safety protocols will help deter incidents.
Only trained and competent operators are approved by Hudson Bay Insulation Company to operate a powered industrial truck (forklift) as defined in OR OSHA Division 3, Subpart O, 1926.602. Which requires that any employee that operates a powered industrial truck (forklift) of any size must first complete a training program?

TRAINING PROGRAM CONTENT – FORKLIFT OPERATORS SHALL RECEIVE INITIAL TRAINING ON THE FOLLOWING TOPICS:

- Operating instructions, warnings, and precautions for the types of forklift the operator will be authorized to operate.
- Differences between the forklift and the automobile.
- Forklift controls and instrumentation, where they are located, what they do, and how they work.
- Engine or motor operation.
- Steering and maneuvering.
- Visibility (including restrictions due to loading).
- Fork and attachment adaptation, operation, and use limitations.
- Vehicle capacity and how to use the load chart.
- Vehicle stability.
- Any vehicle inspection and maintenance the operator will be required to perform.
- Refueling and/or charging of batteries.
- Operating limitations.
- Any other operating instruction, warnings, or precautions listed in the operator’s manual for the type of vehicle the operator is being trained to operate.
Workplace Topics – Site Specific

- Changing surface conditions where the vehicle will be operated.
- Composition of loads to be carried and load stability.
- Load manipulation, stacking, and un-stacking.
- Pedestrian traffic.
- Narrow and restricted areas where the forklift will be operated.
- Ramps and sloped surfaces that could affect the vehicle's stability.
- Hazardous locations where the vehicle will be operated.
- Closed environments and other areas where insufficient ventilations could cause the buildup of carbon monoxide or diesel exhaust.
- Other unique or potentially hazardous environmental conditions in the workplace that could affect safe operation.

Refresher Training

Operator evaluations shall be conducted at least every three years by persons who possess the knowledge, training, and experience to evaluate operators in their competence. Refresher training may be required if:

- An operator has been observed operating a forklift in an unsafe manner.
- An operator is involved in an accident or near miss incident.
- An operator is assigned to operate a different type or size of forklift or a condition in the workplace changes which could affect the safe operation of the forklift.

Documentation

It is required by law that any operator that is trained and or evaluated in forklift operation be “certified” by documentation of such.
HBIC will ensure trained operators receive a forklift card which includes the following:

- The name of the operator being trained.
- The date the training was conducted.
- The date the operator was evaluated.
- The name and signature of the trainer.

**Reasons for Refresher Training**

- The operator has been observed to operate the vehicle in an unsafe manner.
- The operator has been involved in an accident or near-miss incident.
- The operator has received an evaluation that reveals that the operator is not operating the truck safely.
- A condition in the workplace changes in a manner that could affect safe operation of the truck.

Refresher training must be completed according to the above requirements AT LEAST ONCE EVERY THREE YEARS even if the type of forklift and the work environment is unchanged.
Hazard Communication – SDS

Hudson Bay Insulation Company has established this written Hazard Communication Program in order to comply with OR OSHA Division 3, Subpart D, 1926.59 and OR OSHA Division 2, Subpart Z, 1910.1200.

Both the State of Oregon and the Federal Government have recently made effective laws that establish a worker’s right to health information regarding the possible hazards of materials in the workplace. These regulations, commonly referred to as “worker’s right-to-know”, require that product health and safety information be provided through product labels, Safety Data Sheets (SDS), and education and training of workers. These requirements fall upon the manufacturers, distributors and end users of such materials.

HBIC, as end users of materials that fall into this category, will make available all pertinent information on all hazardous materials that will be used in the course of business. The SDS catalog will be updated to include any new hazard information.

The written program will be available to all employees and interested parties at our office located at 12225 NE Marx St Portland OR 97230.

Informing Contractors

It is the responsibility of the project manager to provide contractors / subcontractors with the following information:

- Hazardous chemicals to which they may be exposed while on the jobsite.

- Precautions the employees may take to lessen the possibility of exposure by usage of appropriate protective measures.

Hazardous Non-Routine Tasks

Periodically, employees are required to perform hazardous non-routine tasks. Before starting work on such projects, each affected employee will be given information by their supervisor about hazardous chemicals to which they may be exposed during such activity.
This information will include:

- Specific chemical hazards.
- Protective / Safety measures the employee can take.
- Measures the company has taken to lessen the hazards including ventilation, respirators, and presence of another employee and emergency procedures.

**Employee Training and Information:**

The Company Safety Director is responsible for the employee training program. This person will ensure that all elements specified below are carried out. Prior to starting work, each new employee of HBIC will receive information and training, if necessary, on the following:

- An overview of the state requirements for Hazard Communication, OR OSHA Division 2, Subpart Z, 1910.1200.
- Location and availability of Hudson Bay Insulation Company’s written hazard program.
- Chemicals present in their workplace operations.
- Methods and observation techniques used to determine the presence or release of hazardous chemicals in the work area.
- How to lessen or prevent exposure to these hazardous chemicals through usage of control / work practices and personal protective equipment.
- Emergency procedures to follow if they are exposed to these chemicals.
- Location of SDS file and location of hazardous chemical list.

Each employee will sign a form stating that they have reviewed this Company’s policy and written material on Hazard Communication.

The Safety Director is responsible for ensuring that a SDS on any new chemical(s) is made available.
Container Labeling:

Warehouse (shipping / receiving) personnel will verify that all containers delivered to our jobsites will:

- Be clearly labeled as to the contents;
- Have appropriate hazard warning;
- List the name and address of the manufacturer.

Safety Data Sheets (SDS):

Scott Bee, our Safety Director, will be responsible for monitoring the SDS system for the company. This person will review incoming data sheets for new and significant health / safety information and will see that any new information is passed on to the affected employees. Copies of SDS’s for all hazardous chemicals to which employees of this company may be exposed will be kept at the office located at 12225 NE Marx St Portland OR 97230. In some cases this information is also available on individual jobsites.
Hudson Bay Insulation Company has established the Hearing Conservation Program to provide protection from noise-induced hearing loss for those employees who may be assigned to work in areas having an eight (8) hour time weighted average (TWA) noise level which may exceed the OAR 437-002-0095 permissible exposure level (PEL) of 85 dBs. Employee participation in this program is mandatory.

**Audio Metric Testing:**

Baseline audio grams may be obtained for each employee who will be assigned to a shop or area where noise levels may exceed the OAR 437-002-0095 PELs of 85 dBs TWA and an annual audio metric test will be obtained for each employee thereafter for comparison with the baseline audio gram. The results of all audio metric testing will be made known to the employee or his/her representative. Any employee who demonstrates a Standard Threshold Shift or for whom a medical referral has been recommended will be required to follow the procedures listed below:

- Required to use hearing protection at all times on company premises.
- Employees who demonstrate an STS will be refitted and retrained in the use of protectors and provided with hearing protectors offering greater attenuation if necessary.
- The employee will be informed in writing within twenty one (21) days of the existence of an STS.
- The employee will be referred for an audiological evaluation, if additional testing is considered necessary by the testing entity.
- Employees will be referred, at no cost to the employee, for an ontological evaluation if the testing entity observes a medical pathology of the ear, which is aggravated by the wearing of hearing protectors.
- The employee will be informed of the need of an ontological examination if a medical pathology of the ear unrelated to the use of hearing protectors is suspected by the testing entity.
- Employees with a confirmed STS will be recorded on the OSHA Form 300. Note: A confirmed STS exists when the annual audiogram shows an employee has suffered an STS and Hudson Bay Insulation obtains a retest within thirty (30) days which indicates the shift is persistent.
• If Hudson Bay Insulation does not retest within thirty (30) days, then it is presumed the employee has had an STS.

**Noise Monitoring:**

The Safety Director will conduct monitoring of all production areas, by individual or representative noise exposure measurements, to ensure that those areas where noise levels exceeding OAR permissible exposure levels are identified and warning signs are posted if required. The noise monitoring shall be conducted and documented whenever there is a substantial change in equipment, area use, or work practices that may generate additional noise.

**Training:**

The Safety Director will conduct the training of all employees, either personally or through a qualified training entity, who may be exposed to noise levels above the OAR permissible exposure level of 85 dBs TWA. All training records will be kept on file at the corporate office.

The training will be repeated on an annual basis and shall insure that an exposed employee understands:

• The effects of noise on hearing.

• The purpose of hearing protectors: the advantages, disadvantages and attenuation of various types of protectors and instructions as to the selection, fitting, use and care.

• The purpose of audio metric testing and an explanation of the test procedures and results.

• Their right to access their records and to a copy of the appropriate Hearing Conservation Standard.

• Which production areas of Hudson Bay Insulation were monitored and found to have noise levels above the WISHA permissible exposure levels.
HEAT STRESS

The purpose of this policy is to provide a safe and healthful working environment and protect Hudson Bay Insulation Company employees who are exposed to temperature extremes, radiant heat, humidity, or limited air movement, from heat related illnesses and ensure compliance with the Outdoor Heat Exposure Program.

The following requirements apply only to outdoor work environments from May 1 through September 30 annually and only when employees are exposed to outdoor heat at or above the applicable temperature table listed below.

### Outdoor Temperature Action Levels

<table>
<thead>
<tr>
<th>All other clothing</th>
<th>89 degrees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Double-layer woven clothes including coveralls, jackets and sweatshirts</td>
<td>77 degrees</td>
</tr>
<tr>
<td>Nonbreathing clothes including vapor barrier clothing or PPE such as chemical resistant suits</td>
<td>52 degrees</td>
</tr>
</tbody>
</table>

### Policy

The workplace will be evaluated to determine if Hudson Bay Insulation Company employees are at risk from heat related illnesses during temperature extremes and hot weather while working. If it is determined that employees are at risk they will be trained to be aware of heat related illnesses, how to prevent heat related illnesses, the symptoms of heat related illnesses, and procedures to take if symptoms are present.

Hudson Bay Insulation Company will implement this Heat Stress Program when employees are at risk of heat related illnesses while they are working and are exposed to a combination of environmental risk factors such as temperature extremes, radiant heat, humidity, limited air movement, protective clothing, workload severity and duration.
HEAT STRESS

Training

Each year prior to the month of May, all employees that are exposed to outdoor heat at or above those listed in Table 1, will be provided training on signs and symptoms of outdoor heat exposure and on company policies to prevent heat-related illness.

Employee training: Training in the following topics will be provided to all supervisory and non-supervisory employees:

- Environmental and personal risk factors for heat illness.
- Procedures for identifying, evaluating, and controlling exposures to the environmental and personal risk factors for heat illness.
- The importance of frequent consumption of water.
- The importance of acclimatization.
- The different types of heat illness and the common signs and symptoms of heat illness.
- The importance of immediately reporting to the employer or designee symptoms or signs of heat illness.
- Procedures for responding to symptoms of possible heat illness, including how emergency medical services will be provided should they become necessary.
- Procedures for contacting emergency medical services, and if necessary, for transporting employees to a point where they can be reached by medical service personnel.
- How to provide clear and precise directions to the work site.
Prior to assignment to supervision of employees working in the heat, training on the following topics will occur:

- The information provided for employee training.
- Procedures the supervisor will follow to implement controls as determined by the employer.
- Procedures the supervisor will follow when an employee exhibits symptoms consistent with possible heat illness, including emergency response procedures.

**Controls for reducing heat exposure**

Hudson Bay Insulation Company will reduce the potential for heat stress to occur. This could be a work/rest regimen, starting jobs earlier and ending earlier to avoid the hot times of the day, provisions for gaining access to shade, identifying the onset of heat related symptoms and the methods used to cool an employee off, etc.)

**Provisions for water**

On days when the temperature is at or above those listed in table listed above, employees will be provided a sufficient quantity of drinking water which is readily accessible at their work location. The water quantity will be sufficient to allow each employee to drink at least a quart or more of water each hour.

**First Aid awareness and actions in the event of a heat related illness:**

The following chart helps employees recognize the main types of heat related illnesses, symptoms, and the appropriate treatment to reduce the effects of the heat related illness.
First Aid awareness and actions in the event of a heat related illness:

<table>
<thead>
<tr>
<th></th>
<th>Symptoms</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Heat cramps</strong></td>
<td>• muscle spasms in legs or abdomen</td>
<td>• move person to a cooler location&lt;br&gt;• stretch muscles for cramps&lt;br&gt;• give cool water or electrolyte-containing fluid to drink</td>
</tr>
<tr>
<td><strong>Heat Exhaustion</strong></td>
<td>• headaches&lt;br&gt;• clumsiness&lt;br&gt;• dizziness/lightheadedness/fainting&lt;br&gt;• weakness/exhaustion&lt;br&gt;• heavy sweating/clammy/moist skin&lt;br&gt;• irritability/confusion&lt;br&gt;• nausea/vomiting&lt;br&gt;• paleness</td>
<td>• move person to a cooler place (do not leave alone)&lt;br&gt;• loosen and remove heavy clothing that restricts evaporative cooling&lt;br&gt;• if conscious, provide small amounts of cool water to drink&lt;br&gt;• fan person, spray with cool water, or apply a wet cloth to skin to increase evaporative cooling&lt;br&gt;• call 911 if not feeling better within a few minutes</td>
</tr>
<tr>
<td><strong>Heat stroke</strong></td>
<td>• sweating may or may not be present&lt;br&gt;• red or flushed, hot dry skin&lt;br&gt;• bizarre behavior&lt;br&gt;• mental confusion or losing consciousness&lt;br&gt;• panting/rapid breathing&lt;br&gt;• rapid, weak pulse&lt;br&gt;• seizures or fits.</td>
<td>• call 911&lt;br&gt;• move person to a cooler place (do not leave alone)&lt;br&gt;• cool worker rapidly&lt;br&gt;• loosen and remove heavy clothing that restricts evaporative cooling&lt;br&gt;• fan person, spray with cool water, or apply a wet cloth to skin to increase evaporative cooling</td>
</tr>
</tbody>
</table>
Definitions

“Heat Related Illness” (HRI) - means a serious medical condition resulting from the body’s inability to cope with a particular heat load, and includes heat cramps, heat exhaustion, heat syncope and heat stroke.

“Environmental risk factors for heat illness” - means working conditions that create the possibility that heat illness could occur, including air temperature, relative humidity, radiant heat from the sun and other sources, conductive heat sources such as the ground, air movement, workload severity and duration, protective clothing and personal protective equipment worn by employees. These conditions will be considered when determining that Hudson Bay Insulation Company is implementing controls and methods to reduce the potential for heat related illness.

“Personal risk factors for heat illness” - means factors such as an individual’s age, degree of acclimatization, health, water consumption, alcohol consumption, caffeine consumption, and use of prescription medications that affect the body’s water retention or other physiological responses to heat.

“Shade” - means blockage of direct sunlight. Canopies, umbrellas and other temporary structures or devices may be used to provide shade. Some shade producing areas are not adequate to cool the body; for instance, a car sitting in the sun does not provide acceptable shade to a person inside it, unless the car is running with air conditioning.

“Heat exhaustion” - results from loss of fluid through sweating when a worker has failed to drink enough fluids or take in enough salt or both. The worker with heat exhaustion still sweats but experiences extreme weakness or fatigue, giddiness, nausea, or headache. The skin is clammy and moist, the complexion pale or flushed, and the body temperature normal or slightly higher.

Treatment is usually simple: the victim should rest in a cool place and drink an electrolyte solution such as “Gatorade®”. Severe cases involving victims who vomit or lose consciousness may require longer treatment under medical supervision.
“Heat cramps” - painful spasms of the muscles, are caused when workers drink large quantities of water but fail to replace their bodies' salt loss. Tired muscles -- those used for performing the work -- are usually the ones most susceptible to cramps. Cramps may occur during or after working hours and may be relieved by taking liquids by mouth or saline solutions intravenously for quicker relief, if medically determined to be required.

“Fainting” - (heat syncope) may be a problem for the worker not acclimatized to a hot environment who simply stands still in the heat. Victims usually recover quickly after a brief period of lying down. Moving around, rather than standing still, will usually reduce the possibility of fainting.

“Heat rash” - also known as prickly heat, may occur in hot and humid environments where sweat is not easily removed from the surface of the skin by evaporation. When extensive or complicated by infection, heat rash can be so uncomfortable that it inhibits sleep and impedes a worker's performance or even results in temporary total disability. It can be prevented by resting in a cool place and allowing the skin to dry.
Each Hudson Bay Insulation Company employee shall conform to the guidelines as:

- All places of employment shall be kept clean to the extent that the nature of the work allows.
- To facilitate cleaning, every floor, working surface and passageway shall be kept free from protruding nails, splinters, loose boards or openings.
- Cleaning and sweeping shall be performed in such a manner as to minimize the contamination of the air with dust.
- In areas where workers may pass or perform duties, all debris and accumulations of material shall be removed. Hoses and electrical conductors across aisles or passageways shall be covered or suspended overhead so that there is no tripping hazard.
- Where mechanical handling equipment is used, sufficient safe clearances shall be allowed for aisles, at loading docks, through doorways and wherever turns or passages must be made. Such aisles and passageways shall be marked.
- Storage of material shall not create a hazard. Bags, containers, bundles, construction materials and other equipment shall be stored in tiers, stacked, blocked or interlocked. They shall be limited in height so that they are stable and secure against falling, sliding or collapse.
- Free access shall be maintained at all times to all exits, fire alarm boxes, fire extinguishing equipment, and any other emergency equipment. Free access means clear of all obstructions.
- Working and storage areas shall be kept free from accumulation of materials that pose hazards of tripping, fire, explosion or pest harborage. Vegetation control shall be exercised.
- All lunchrooms, washrooms and restrooms shall be kept in a clean and sanitary condition. Garbage cans in lunchrooms and restrooms shall be equipped with fitted covers and the contents disposed of daily.
- During the course of construction, alteration, repair or demolition of buildings and structures, employers shall ensure continuous clean up of their work area, including removal of all rubble, scrap, boxes, crates and excess material to trash disposal areas.
• Containers shall be provided for the collection and separation of waste, trash, oily or used rags and other refuse. Containers used for garbage and other oily, flammable or hazardous wastes, such as caustics, acids, harmful dusts or similar materials shall be equipped with covers. Common garbage and other waste shall be disposed of at frequent and regular intervals. Chemical agents or substances that might react to create a hazardous condition shall be stored and disposed of separately. All hazardous wastes that are subject to the requirements of OR OSHA Division 3, Subpart D 1926.59 shall be handled accumulated and disposed of in accordance with that chapter.

• All floors and walkways shall be maintained in good condition. Loose or broken components shall be repaired or replaced. Secure footing shall be ensured on all floors and walkways.
Employees are required to make a report of each industrial injury or occupational illness, regardless of the degree of severity, immediately to their supervisor when any of the following occurs:

- Injury to employees, other trades or the public.
- Any exposure to blood or bodily fluids that might have occurred.
- Property damage, fire or any other event involving potential liability which may lead to claims against Hudson Bay Insulation Company.

An Employee Accident/Incident Report and a Supervisor Accident/incident Report must be completed; including when a visit to a doctor’s office is not involved. In the event of a non-injury occurrence, the supervisor will complete a Supervisor Accident/Incident Report. Make sure that you get the names of any witnesses and their address if applicable.

**These procedures must take place within 24 hours of incident occurrence.**

The supervisor will immediately notify the general contractor and the mechanical contractor we are working for of the Accident/Incident. The supervisor will then investigate the Accident/Incident and complete an Accident/Incident Report and distribute it to the on-site safety representative of the general contractor and mechanical contractor.

Employees shall apply the principles of accident prevention in their daily work and shall use proper safety devices and protective equipment whenever required. All HBIC jobsite employees have been trained in various safety areas including:

- Drug and/or Alcohol Impairment
- Minimum Dress Requirements
- Personal Protective Equipment
- Safe Material Handling
- Fall Protection and Retrieval
- Hazardous Communication
• Assured Grounding  
• Equipment Inspection  
• Fire Protection  
• Respirator Protection  
• Confined Space Entry  
• CPR and First Aid Certification  
• Blood borne Pathogen Awareness  
• Asbestos and Lead Awareness  
• Powder Actuated Tools (PAT) 

It is with this training that an employee can review the work place surroundings and provide an assessment of those conditions that create an unsafe work environment for themselves, co-workers and others. It is required of each employee to immediately report those conditions that he/she does not deem safe to his/her immediate supervisor. The supervisor will assess the situation, notify the general and mechanical contractor immediately and correct the unsafe condition.
INCIDENT INVESTIGATION

In case of an accident / incident the following must be reported to the jobsite foreman and the HBIC Safety Department **AS SOON AS POSSIBLE:**

- Any injury to employees or the public; including jobsite first aid.
- Any exposure to blood or bodily fluids that might have occurred.
- Near misses
- Incidents resulting in property damage, fire or any other event involving potential liability which may lead to a claim against Hudson Bay Insulation Company.

The following reports must be filled out and returned to the HBIC Safety Department within 24 hours:

- The Employee Incident Report
- The Incident Investigation Report
- The Witness Incident Statement – *if there are any, by all who witnessed the incident.*

In the event of a serious injury which requires outside medical assistance, employees will follow these procedures:

- Dial emergency services – 911 or appropriate number – to request medical assistance
- Contact the HBIC jobsite supervisor
- Ensure that emergency services route is clear and easy to follow, post other employees at entrance sites to aid in the response.
- Contact Scott Bee or Lisa King, immediately following the arrival of medical services and they have taken control of the scene.

Post-accident investigation helps identify cause factors. A careful and complete accident investigation should reveal all the major contributing causes in the sequence of events; removing a single cause factor can prevent most accidents.
Once the health and safety of an injured employee are turned over to the emergency medical services, the jobsite foreman/supervisor will follow these guidelines in investigating the incident.

- DO NOT disturb the accident/incident scene
- DO NOT discuss the accident/incident with the media prior to notifying Scott Bee or Lisa King.
- Immediately start the Incident Investigation Report process.
- Interview and take statements from all witnesses.
- Submit all documents to Safety Department within 24 hours.
One of the best ways to determine and establish proper work procedures is to conduct a Job Hazard Analysis (JHA) prior to starting a job. A job hazard analysis is one component of the larger commitment to a safety and health management system.

A JHA lists, ranks and sets priorities for hazardous conditions that may be present on a job. Conducting a JHA will discover the following:

- What can go wrong?
- What are the consequences?
- How could it arise?
- What are other contributing factors?
- How likely is it that a hazard will occur?
- How can we engineer out or minimize the occurrence of an injury or incident?

The most effective controls are engineering controls that physically change the work environment to prevent an employee exposure to the hazard. All employees of HBIC will continually review and update the JHA to ensure it remains current and continues to reduce workplace incidents and injuries. Even if the job has not changed, it is possible that during the review process, hazards may be presented that were not identified in the initial analysis.

A JHA will be completed prior to the start of each Hudson Bay Insulation Company project by the Safety Director, Project Manager and the jobsite foreman. It will be reviewed throughout the duration of the project enabling superintendants, foreman and employees an opportunity to identify potential risks on other projects.
Back strain and other related injuries account for more than 70% of all work-related incidents. Unfortunately, many workers only learn how to lift safely after already hurting their backs. Proper lifting techniques and stretching exercises should be used to minimize the occurrence of these injuries.

Use material handling equipment as much as possible to do the heavy lifting and transportation for you. Planning and scheduling large equipment such as cranes and forklifts, hand trucks and carts greatly increase the efficiency on the job and reduce injuries.

Follow these rules when manually moving material.

- Plan the lift.
- Mover close to the load.
- Keep your back straight.
- Bend your knees & lift with your legs.
- Do not lift and twist in the same motion.
- If the load is too heavy get help from a co-worker.

**MATERIAL AND EQUIPMENT STORAGE**

- When materials are stacked, the underlying tiers must be able to withstand the weight of the material above.

- Materials shall be stacked in areas so as to allow passage of equipment and personnel without creating a safety hazard.

- In areas where material storage can possibly be affected by weather conditions, all mean necessary will be made to weatherproof the material with Visqueen or tarps.

- Combustible or highly volatile material shall be stored in a protected area of isolation, non-combustible shelter or a confined automatic fire protected room or area. Warning signs shall be posted to alert persons of potential danger.

- Material will be stored in accordance with the manufacturer specifications.
Compliance with OR OSHA regulations and to ensure that information is available about the dangers of workplace assignments where ladders, stairways and walkways are used as outlined by OR OSHA Division 3, Subpart X 1926.1050 through 1926.1060, the following written Ladders, Stairways and Walkways Safety Program has been established. All Hudson Bay Insulation Company employees will abide by the Ladders, Stairways and Walkways Safety Program.

One-fifth of all industrial injuries result from falls and over 1000 people are killed each year from falls in the construction industry alone. The most serious of these involve falls from one level to another frequently when using stairs or ladders.

Leading causes of accidents involving ladders:

- Climbing or descending improperly.
- Failure to secure ladder - top and bottom.
- Structure failure of ladder itself.
- Carrying objects in hands while climbing or descending.

The Safety Director is responsible for the establishment, implementation and maintenance of all aspects of this program. Prior to the start of any work performed as part of a project at a specific jobsite, the foreman/superintendent will formulate a Ladders, Stairways and Walkways plan.

It is Hudson Bay Insulation Company’s policy that:

All ladders should be thoroughly inspected before use for defects in rungs and rails.
Always position a ladder properly so that you are able to face the ladder and use both hands while climbing.

- Ladders with structural defects, such as, but not limited to, broken or missing rungs, cleats, or steps, broken or split rails, corroded components, or other faulty or defective components, shall be tagged and removed from service immediately until repaired or destroyed.

**Extension Ladder Requirements**

- Extension ladders shall extend a minimum of 3 feet beyond the supporting object when used as an access to an elevated work area.

- After extending the extension portion of two or more stage ladder to the desired height, check to ensure that the latches are engaged.
LADDERS, STAIRWAYS & WALKWAYS

- Extension ladders shall be secured or tied off at the top.
- All ladders shall be equipped with safety (non-skid) feet.
- Extension ladders shall be set at a 4:1 pitch.

Stepladder Requirements

- Do not place tools or materials on the steps or platform of a stepladder.
- Do not use the top two (2) steps or ladder-cap of a stepladder as a step or stand.
- Always level a stepladder and assure that all four spreaders are locked in place.
- Do not use a stepladder as an extension ladder or lean-to ladder.
- Do not lean outside the left and right leg limits to reach a particular area, descend the ladder and reposition.

Always position a ladder properly so that the distance from the base of the ladder to the wall is 1/4 the length of the ladder. Metal ladders will not be used by Hudson Bay Insulation Company employees on any job.

Fall protection is mandatory when working within 6 feet of an open shaft, stair or edge of deck.

Stairway Requirements

- A stairway shall be provided where there is a 19” (inch) or greater break in elevation in a passageway, entry or exit.
- Stairways that will not be a permanent part of the structure on which construction work is being performed shall have landings not less than 30” (inches) in the direction of travel and extend at least 22” (inches) in width at every 12’ (feet) or less of vertical rise.
- Temporary stairs shall be 22” (inches) wide.
• Stairs shall be installed between 30° and 50° from horizontal.

Stairways that require guardrails

Stairways having four or more risers or rising more than 30” (inches), whichever is less, shall be equipped with:

• At least one handrail if one side of the stairway is against a wall, and/or
• One guardrail system along each unprotected side or edge.

Ramps, Runways and Walkways

• A ramp, runway or inclined walkway shall be provided where there is a 19” (inch) or greater break in elevation in a passageway, entry or exit.

• Ramps, runways and inclined walkways shall be at least 18” (inches) or more wide.

• Ramps, runways and walkways shall not be inclined more than 20° from horizontal and shall be cleated or otherwise treated to prevent a slipping hazard.

Training

Prior to starting work and thereafter in accordance with regulations, each new employee will be given a health and safety orientation that included the following:

• An overview of the requirements of the regulations.

• Our policy and procedures related to Ladder/Stairways.

• How to identify all fall hazards in the work area.

• The correct procedures for handling, storing and securing tools and materials.

• The method of providing overhead protection for workers who may be in, or pass through worksites.

All HBIC employees will receive training on general ladder/stairways requirements that must be followed in the ordinary course of work. Foreman/Superintendent will provide jobsite-specific training prior to the start of the project.
Hudson Bay Insulation Company employees are not to remove or make friable in any way any lead-containing material. This information is for informational purposes only so that Hudson Bay employees can understand the process for their own protection. If you find any material that may contain lead, remove all employees from the area and notify the Safety Director immediately.

The following is HBIC’s policy on the inspection and compliance procedures to be followed in protecting our construction workers from overexposure to lead. Compliance will be dictated by the standard 29 CFR 1910.1025(a) (2) and OR OSHA Division 3, Subpart D 1926.62 and include any repair, renovation or construction activity which disturbs lead-containing materials. Other activities include:

- Demolition or salvage of structures containing lead.
- Removal or encapsulation of materials containing lead.
- Installation of products containing lead.
- Lead containment / emergency clean up.
- Transportation, disposal, storage or containment of lead or materials containing lead on the site where construction is being performed.
- Abrasive blasting, welding, cutting, grinding and torch burning where lead containing coatings or paint is present.

OR OSHA’s current rule states that the permissible exposure limit (PEL) is 50 micrograms of lead per cubic meter of air (50 UG/M\(^3\)) averaged over an 8-hour period. Blood lead testing at regular intervals is required for all employees who work in areas with 30 UG/M\(^3\) or more of airborne lead. Depending on the blood-lead level, an employee must be retested at specific intervals:

<table>
<thead>
<tr>
<th>Most Recent Blood Lead Level (ug/dl)</th>
<th>Blood Testing Required by Lead Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>Immediately</td>
</tr>
<tr>
<td>0 - 39</td>
<td>Every 6 months</td>
</tr>
<tr>
<td>40 - 59</td>
<td>Every 2 months</td>
</tr>
<tr>
<td>60 or above</td>
<td>Every month</td>
</tr>
<tr>
<td>Worker on lead-related medical removal for any reason</td>
<td>Every month</td>
</tr>
</tbody>
</table>
LEAD PROTECTION

General Requirements

If testing shows that any employee has a blood-lead level above 40 ug/dl we will either reduce lead dust and fumes in the workplace or provide adequate respiratory protection. The following measures are included in this policy to protect all employees from over exposure to lead. They Include:

- When PEL reaches 50 or more micrograms per cubic meters of air (50 UG/M³), we will provide respiratory protection, protective clothing, hand and face washing facilities, biological monitoring, and changing areas during the performance of specific tasks that involve lead exposure. These measures will be taken until the exposure assessment shows the exposure levels are below the PEL.

- A competent person will be named to be responsible for lead related issues on all work sites. This person will be on site at all times and responsible for inspections that ensure there are proper control measures, work practices, personal protective equipment, and hygiene facilities used as prescribed by the OR OSHA standards.

- A written compliance plan will be available on all work sites, as well as a specific plan for conditions on each particular work site. Each worker is given a copy of this plan.

- Protective clothing will be provided and worn when PEL reaches 50 UG/M³ or more. Soiled clothing will be stored in closed containers and laundered or disposed of by the employer. Lead contaminated clothing will not be taken home.

- All personal protective equipment will be properly fit tested for each employee by a competent person.

- All employees will be educated about the hazards of lead exposure and trained in proper work procedures, control measures, and emergency procedures from exposure to lead.

- Accident reports involving lead, exposure logs, and medical records will be kept up to date and on site.
• An employee will be sent home or removed from areas having lead exposure if a blood test is 60 ug/dl or above, or if an average of the last three tests are 50 ug/dl or above.

• We will provide at least one medical evaluation each year and blood lead tests every 1 to 2 months for an employee whose blood lead level is 40 ug/dl or above, at no cost to the employee.

• Highly visible warning signs will be posted in high lead areas.

**Job Site Specific Requirements**

All projects will have a site-specific lead exposure program, including a log describing each operation in which lead is emitted. Each log will include:

• Machinery used
• Material processed
• Controls in place
• Crew size
• Employee job responsibilities
• Operating procedures
• Maintenance practices

Included in each site-specific program will be a description of the specific means employed to achieve compliance including engineering plans, technology used to meet permissible exposure limits and air monitoring data when required.
Hudson Bay Insulation Company has developed a Lock Out/Tag Out program in accordance with OR OSHA Division 2, Subpart J 1910.147 to establish the control of potentially hazardous energy sources. This program has been put in place to ensure that machines, equipment or fixtures are isolated from all potentially hazardous energy sources, before employees perform any service, maintenance, demolition or installation activities on them.

The Lockout/Tagout protocol should apply to all permanently wired machines and equipment. Cord and plug connected equipment should be exempt, provided that the cord is unplugged and under the direct control of the employee performing the service or maintenance.

Isolate Energy Sources and Systems

Isolate systems that involve electricity, liquid, steam, gas or other stored energy that could present a hazard if released. All valves and openings shall be identified and closed by means of a secured method. These identified locations shall be secured with a lock and tag.

Lockout / Tagout Requirements

Locks
- Authorized locks shall be placed on each isolating device as required and when permitted. The key(s) are to remain with the individual applying the lock. A means of recording the lock ID and location is required with each lockout / Tagout procedure.

Keys
- The person administering the lock shall maintain their key for the lockout / Tagout duration.

Tags
- Identifying tags shall accompany each applied lock. Each tag shall include the following information:
  - Person’s name administering the lock.
  - Time the lock was administered.
  - Person’s employer
  - Contact phone number or radio number for the person administering the lock.
Lockout / Tagout Removal Requirements

The person implementing the lockout / Tagout procedure shall ensure the following before removing a locks and/or tags.

- The work area shall be inspected to ensure that nonessential items have been removed and to ensure that machine or equipment components are operationally intact.

- Affected employees shall be notified that the locks and tags are being removed.

- The person who administered the locks shall remove them from each energy isolating device.

- When the person who applied the lockout / Tagout device is not available for its removal, that device may be removed under the direction of the employer once removals of all potentially affected personnel are removed from the area isolated by the lockout / Tagout process.
The Safety Director and the job foreman are responsible for the new employee safety training. These individuals will ensure that all elements below and any job specific safety requirements are communicated to all new employees. Prior to starting work, each new employee of the Hudson Bay Insulation Company will receive information and training on all company policies, programs and practices listed below:

- Job Specific Requirements
- Minimum Dress Requirements
- Vehicular Traffic
- Fall Protection Policy
- Assured Grounding Policy
- Emergency Procedures
- Fire Protection Program
- Respirator Protection Program
- Ladder Safety Program
- Drug or Alcohol Impairment Policy
- Personal Protective Equipment
- Safe Material Handling
- Hazard Communication Policy - SDS
- Employee Accident / Incident Reporting
- Equipment Inspection Program
- Inspection of Power and Hand Tools
- Confined Space Entry Policy

After Review of the above information, the following Certification of Compliance / Understanding must be executed with copies to be placed in the new employees file and the respective Safety Certification files.

- Fall Restraint / Fall Arrest Training
- Hazard Communication Notification
- Respiratory Protection Policy and Training
- Successful Completion of Safety Orientation and Training
PERSONAL PROTECTIVE EQUIPMENT

In an effort to maintain a work environment free of accidents and incidents, Hudson Bay Insulation Company requires all employees to adhere to its Personal Protective Equipment (PPE) policy and procedures in accordance with OR OSHA Division 3, Subpart E 1926.95 through 1926.107. This will ensure that when hazards cannot be fully controlled with engineering or process controls that employees use appropriate personal protection.

Appropriate training on the use and maintenance of PPE will be provided by, or arranged for by, the Safety Director or supervisors. All HBIC employees are required to wear proper personal protective equipment while performing their work related duties.

The PPE provided shall be used as outlined by specific job procedures and maintained in a sanitary and reliable condition. Employees shall not provide any of their own personal protective equipment, unless inspected and approved by the Safety Director. The selection of PPE shall be made by the Safety Committee and designed to match the hazard to allow employees to safely conduct their job tasks.

PPE is designed to protect the worker from injury or harm. However, it is not designed to prevent the occurrence of an incident which might cause harm or injury. Therefore, we must ensure that working conditions are safe and PPE is used as a back-up for additional protection.

This policy outlines the minimum requirements for personal protective equipment including:

- Appropriate clothing
- Head protection
- Hearing – ear protection
- Eye and Face protection
- Hand protection
- Foot protection

Appropriate Clothing

- Long pants are required at all times. Shorts, dresses and sweat pants are not allowed on the jobsite.
- Shirts shall have a minimum sleeve length of 4” (inches). No muscle, mesh, tank top or similar shirts are allowed on the jobsite. High Visibility long sleeve shirts are highly recommended and available through the safety department at no cost to the employee.
• Clothing that may get caught in tools or equipment, such as loose fitting, torn or ragged clothing shall not be allowed on the jobsite.

• High Visibility clothing will be worn as an outside layer to differentiate the employee from the work environment. High Visibility vests and shirts are available through the Safety Department.

• Weather appropriate clothing will be worn in conditions of inclement weather.

Head Protection

• Hard hats are to be used to protect the head from flying objects, impact, and electrical shock.

• Only ANSI approved hard hats will be used by all HBIC employees at construction sites or when overhead hazards are present. This includes when working under floor openings or walkways, protruding objects, or inside a confined space below ground level.

• Hard hats will be worn whenever ‘hard hat’ signs are posted regardless of whether an overhead hazard exists. Hard Hats are available and will be issued through the Safety Department.

• Only approved Hard Hat liners are accepted for wear under the hard hat.

Hearing Protection

• Earmuffs and earplugs are used to protect against hazardous noise levels when they cannot be adequately lessened by various engineering controls. The sites’ noise levels will vary a great deal. Areas requiring hearing protection shall be posted. If not, hearing protection should be worn whenever there are loud sounds from power equipment or processes.

• Hearing protective devices are supplied to all employees through the Safety Department.

• If earmuffs are worn, temple bars of glasses will interfere with the seal of the earpiece. As a result, ear plugs should be worn by those required to wear safety glasses or glasses with corrective lenses.
Eye and Face Protection

- Safety glasses or prescription glasses with safety lenses and side shields will be **worn at all times**.
- Only ANSI approved safety glasses will be worn, they are available through the Safety Department.

Hand Protection

All Hudson Bay Insulation Company employees are required to wear gloves, regardless of activity. Hand protection is worn to protect the hands from a mechanical injury due to friction, heat, shearing/cutting actions, and for protection against chemicals.

- Gloves are available through the Safety Department.

Foot Protection

All Hudson Bay Insulation employees will wear appropriate footwear while performing work

Footwear shall be full leather or synthetic material approved for heavy use with a non-slip sole. Steel toe boots are not required by HBIC; however some jobsites may require them as a minimum standard of foot protection. Protective Toe Caps are available through the Safety Department.
Pre Task Planning will be used to recognize existing and potential hazards involved with each activity by task specific identification and training. Pre Task Planning is also a tool for work crew coordination and communication needs to reinforce “best practices” on a jobsite.

Procedure

All Hudson Bay Insulation Company foremen will complete a daily pre-task plan for each specific task being performed during that workday. The pre-task plan should be completed at the beginning of each work shift with the crew’s input. The completed pre-task plan will then be used as a tool to coordinate the safety and production effort of the crew throughout that shift.

The foreman shall discuss the pre-task plan with the crew having them sign the pre-task plan form documenting that they understand the tasks to be completed and the method of procedure for minimizing potential hazards.

If performance of the task requires deviation from the posted plan, the crew is to immediately cease work and notify supervision. Supervisor and crew shall re-assess the plan, make necessary modifications, re-communicate any additional changes, initial the worksheet and post the modified plan before resuming work.

Documentation

All pre-task plans shall be kept on file at the jobsites with the foreman or turned in to the General Contractor or our customer.
RECORDKEEPING

Recordkeeping is a key aspect in developing and maintaining a comprehensive safety program. The following outlines Hudson Bay Insulation Company procedures for document management in accordance with OAR 437-001-0700.

Kept on file at the jobsite

- Safety & Risk Management Plan
- Job Hazard Analysis & Pre-Task Planning
- Tool Box Talks and Safety Meeting Report
- Jobsite Safety Orientation
- Aerial Lift Inspection Sheet
- Assured Grounding Log
- All Confined Space Permits (with a copy sent to the Safety Department)
- Scaffold Daily Checklist (with a copy sent to the Safety Department)

Kept on file at HBIC office

- Safety & Risk Management Plan
- SDS Catalog
- Drug Free Workplace Program
- OSHA 300, 300A and 301 Logs
- Safety Committee Meeting Reports
- All Site Safety Audits
- All Disciplinary Action Reports
- All Incident Reports
- All Confined Space Permits
- All Scaffold Daily Checklists
- All Safety Training Documentation
- All Disciplinary Action Reports (with a copy sent to the Safety Department)
- All Incident Reports (with a copy sent to the Safety Department)
- SDS Inventory List
- Site Safety Audit

OSHA recordkeeping will be kept on file and updated through Scott Bee.

Injuries will be reported and recorded as prescribed by OSHA or the state’s governing agency. An occupational injury or illness is recordable if it is work related and meets one or more of the following criteria:

- It results in a death.
- There is a loss of consciousness.
- There are days away from work, restriction of work or motion, or transferred to another job.
• There is medical treatment beyond First Aid.
• A significant injury or illness is diagnosed by a licensed health care professional.

The following is a complete list of treatments considered by OSHA to be First Aid. If the injured worker receives any of these treatments, and none of the (5) criteria listed above apply, **the injury is not a recordable.**

• Tetanus immunizations.
• Non-prescription medication at non-prescription strength.
• Cleaning, flushing, or soaking of wounds on the surface of the skin.
• Covering wounds with items such as, Band Aids®, gauze pads, butterfly bandages or Steri-Strips®.
• Heat or cold therapy.
• Non-rigid support, such as elastic bandages or wraps.
• Temporary immobilization during transport as an accident victim.
• Drilling of fingernail or toenail to relieve pressure, or draining of a blister.
• Eye patches.
• Removal of foreign bodies from the eye by irrigation or with a cotton swab.
• Removal of splinters or foreign material from areas of the body other than the eyes by irrigation, tweezers, cotton swab or other simple means.
• Use of finger guards.
• Massage therapy.
• Drinking fluids for relief of heat stress.
RESPIRATORY PROTECTION

General

It is the policy of Hudson Bay Insulation Company to provide and maintain a safe and healthful workplace for all employees, including those whose work assignments expose them to airborne contaminants. To that end, the company has developed this program for the selection, use and care of respiratory protection. The company expects all employees to abide by the rules of this program, which are outlined in 29 CFR 1910.134 and are effective immediately.

Availability of Respirators

Each employee that is required to wear a respirator will be issued one along with replacement parts, cartridges and filters as needed. The selected types of respirators are available from the Project Superintendent or Safety Director.

Use of Respirators

Each employee is required to wear an approved respirator, properly fitted at all times while performing an operation defined as HAZARDOUS or in the immediate area for an extended period of time where another employee is performing a HAZARDOUS operation. Any employee that desires to voluntarily purchase, wear, and maintain an air purifying respirator for personal reasons, must pass a medical evaluation prior to use. A copy of Table 2 Advisory Information for Employees Who Voluntarily Use Respirators in accordance with Appendix D to 1910.134 will need to be signed and a copy provided to the employee. Filtering face pieces (dust masks) are available at no cost to employees to voluntarily wear as desired or needed. Manufacture instructions and warnings are to be followed.

Types of Respirators

Only NIOSH / MSHA approved respirators have been chosen for use in this program. The choice between these respirators is dependent upon the airborne contaminant present, the HAZARDOUS operation performed, and on the basis of comfort and ease of obtaining a proper individual fit. The company will provide the respirators shown in Column II. The useful life of each respirator will vary depending on the job duties and the actual time in use. Particulate cartridges / filters should be changed when filter resistance makes breathing difficult. Chemical cartridges should be changed when an odor or taste breaks through or based on the established change out schedule.

Each respirator will have some limitations. Refer to the respirator instructions. Air purifying types must only be used in at least 19.5 percent oxygen. Only pressure demand SCBA or airline with SCBA backup can be used in Immediately Dangerous to Life or Health (IDLH) atmospheres.
Training of Employees

Each respirator user will be shown and trained how to use and maintain the respirator. The Safety Director will give this training.

A record will be kept of those employees who have been trained. Each user must understand and be able to apply the contents of this respirator program in the daily use, care and safekeeping of the respirators. As proof of having received training and instructions, employees in the respiratory protection program will be asked to sign a statement thereunto.

Examination For Respirator Use

To determine an employee’s fitness for respirator use, the employer shall provide a medical evaluation. This evaluation shall be provided to employee(s), being assigned to a job that requires the use of an air purifying respirator.

Fitting of Respirators

Proper fitting of negative pressure respirators is essential if employees are to receive the protection for which this program is designed. Air which passes around the face piece of the respirator, rather than through it, is not filtered air. In order to ensure a good face seal, follow the manufacturer’s fitting instructions and the rules below:

- The respirator and all straps must be in place and worn in the appropriate position. To adjust headbands, pull the free ends tight until a comfortable but effective fit is obtained.

- To adjust the face pieces properly, simply position chin firmly in the chin cup and manually shift the mask until the most comfortable position is located. Make final adjustments on the headband and do not break the nose seal. Modification to the respirator or straps cannot be made.
• No beards allowed! Respirators shall not be worn when projections under the face piece prevent a good face seal. Note: such conditions may be a growth of beard, sideburns, temple pieces on glasses, or a skull cap that projects under the face piece.

• Perform the following pressure fit checks every time a respirator is worn:
  
  o Cover air inlets with palms of hands.
  o Gently breathe in so that face piece collapses slightly.
  o Hold breath for ten (10) seconds.
  o If the respirator remains slightly collapsed and no inward leaks are felt, the face piece probably fits tight enough.
  o Cover air outlet.
  o Exhale gently.
  o A small build-up of positive pressure, but no outward leaks, usually indicates a good face piece fit.

• A more elaborate fit test will be conducted on each new employee or new type of respirator used. The fitted respirator must be tested using the appropriate qualitative fit test.

• Irritant smoke tests will be used to determine qualitative fit.

• In the event an employee is unable to obtain a satisfactory fit with the type of respirator furnished, a new brand, type or size will be tried.

Cleaning and Storage of Respirators

Respirators should be cleaned after each day’s use and placed in a plastic bag or stored in another container provided for this purpose (zip-lock bags or a clean coffee can). Do not leave them in the work area or hung on a nail.

About once a week (or more often if needed) respirators should be completely cleaned and disinfected by carrying out the following procedures:
RESPIRATORY PROTECTION

- Remove the cartridge from the respirator. The cartridge must never be washed and disinfected.

- Immerse the respirator in a warm soap and water solution. The respirator face piece and parts may be scrubbed gently with a cloth or soft brush. Make sure that all foreign matter is removed for all surfaces of the rubber exhalation valve flap and plastic exhalation valve seals.

- Disinfect with a commercial solution, alcohol wipes, or two (2) tablespoons of bleach or one teaspoon of tincture of iodine per gallon of water.

- After washing and disinfecting the respirator, rinse the same with clean, warm water and then allow the respirator to air dry. Do not store the respirator with wet straps, mildew will result. The face piece, inhalation and exhalation valves must be in a normal position during storage to prevent the abnormal “set” of elastomer parts.

- After the respirator is dry, re-attach the cartridges.

- Store the respirator.

Any malfunction on the respirator shall be reported to the Project Superintendant or Safety Director who will supply replacement parts.

Each person assigned to use a respirator shall maintain and routinely inspect it before and after each use.

Note: Stretching and manipulating rubber or elastomer parts with a massaging action will keep them pliable and flexible and prevent them from taking a “set” during storage.

Worn out parts will be replaced immediately.
Only trained Hudson Bay Insulation Company personnel shall erect or dismantle scaffold for Hudson Bay Insulation Company, they shall be designated as the competent person. HBIC personnel shall not erect scaffold greater than 3 sections tall. Anything greater than 3 sections tall will be installed and dismantled by a qualified vendor. Perry or “Baker” style scaffolds will have safety rails above 6’ (feet) and wheels will be locked when in use. To ensure safe practices are followed, all HBIC employees will abide by the guidelines set forth in OR OSHA Division 3, Subpart L 1926.450 through 1926.454.

PROCEDURES

The HBIC designated Competent Person will inspect and fill out the Scaffold Safety Checklist daily prior to using the scaffold.

General Requirements

- **Capacity**
  - Scaffolds shall be designed by a qualified person and shall be constructed and loaded in accordance with that design.
  - Each scaffold and scaffold component shall be capable of supporting, without failure, its own weight and at least 4 times the maximum intended load applied or transmitted to it.

- **Erection**
  - Scaffolds must be erected under the supervision of a competent person.

- **Planking**
  - Only scaffold grade planking shall be used.
  - All working levels must be fully planked.

- **Supported Scaffolds**
  - Scaffold poles, legs, posts, frames and uprights must be placed on compatible wheel assemblies or steel base plates, then mudsills or other adequate firm foundations.
  - Steel plates must be secured to the mudsills.
  - When free standing scaffold exceed four times their minimum base dimension vertically, they must be restrained from tipping.

- **Suspension Scaffolds**
  - Counterweights must be made of non-flowable material. Sand, gravel, water or similar material may not be used.
  - Counterweights must be secured to the outrigger beams by mechanical means to prevent accidental displacement.
  - Outrigger beams that are not bolted to the structure must be secured by tiebacks.
SCAFFOLD

- The tiebacks must be attached to a structural member of the building.
- Standpipes, vents, conduit and other piping systems are not adequate structural members.

**Scaffold Access**
- When scaffold platforms are more than 2’ above or below a point of access, proper ladders must be installed. Cross bracing must never be used as a means of access.
- Stair rail and handrail systems must be smooth surfaced so as to prevent lacerations or puncture wounds.
- A competent person must evaluate and decide whether a ladder, or other safe means of access, is feasible during the erection and dismantling of scaffolds.

**Scaffold Use**
- A competent person must inspect each scaffold before every shift and after any occurrence that may affect its structural integrity.
- Scaffolding inspection checklist is included at the end of this section.
- A tagging program can be used to verify daily inspection of the scaffolding, stair tower or similar. If the tag system is used:
  - The tag shall be present on all scaffolding.
  - The competent person will “tag” the scaffold “in service” or “out of service” prior to employee use.
- Any damaged or defective component discovered during the inspection will require:
  - Scaffolding immediately taken out of service until the component is repaired or replaced.
  - Scaffolding shall be tagged as “out of service” by a positive means.

**Fall Prevention**
- A Personal Fall Arrest System (PFAS) or guardrail system must be in place on all scaffolds at 6 feet or higher.
- Cross bracing may only be used as the midrail, if the manufacture designed it for this use or a qualified person determines that it meets the OSHA Standards for use as midrail.
- The use of fall prevention devices are required during the erection or dismantling of a scaffold.
- On suspension scaffolds the personal lifelines must be independent of the scaffold support lines.
• **Falling Object Protection**  
  o The area below a working scaffold must be barricaded to protect employees from a falling object hazard.  
  o Toeboards or other means of falling object protection is required at all times.

**Requirements for Specific Scaffold Types**

• **Tube and Coupler Scaffolds**  
  o Tube and coupler scaffolds, in excess of 125’, must be designed by a registered professional engineer (RPE).

• **Fabricated Frame Scaffolds**  
  o Frames and panels must be braced by cross, horizontal or diagonal braces.  
  o Frames and panels must be joined together vertically by stacking pins or equivalent couplings.  
  o Frame scaffolds, in excess of 125’, must be designed by an RPE.

• **Pump Jack Scaffolds**  
  o Brackets, braces and accessories must be fabricated from metal.  
  o Each pump jack bracket must have two positive gripping mechanisms to prevent failure.

• **Mobile Scaffolds**  
  o Mobile scaffolds must be braced by cross, horizontal or diagonal braces based on manufacturer’s requirements to prevent racking during movement.  
  o All wheels must be locked when in use.  
  o At no time will a worker “self propel” a mobile scaffolding.  
  o Caster and wheel stems must be pinned to the scaffold legs or adjustment screws.  
  o Scaffold sections must be pinned to prevent displacement.  
  o The height to base width ratio on a mobile scaffold cannot exceed 2:1 unless it is braced with outrigger frames.  
  o Scaffolds that are less than 45” in width (Baker Type), a guardrail is required when working height is greater than 6 feet above the floor. In addition, if more than one section is used on this type of scaffold, outriggers must be used. Do not attempt to move mobile scaffolding without sufficient help to watch for obstructions on the floor and overhead.
Scaffold Training Requirements

Each employee that works on a scaffold must be trained by a qualified person in the recognition and avoidance of hazards associated with the type of scaffold they will be required to work from.

The training shall include the following areas, as applicable:

- The natures of any electrical hazards and falling object hazards in the work area.
- The correct procedures for dealing with electrical hazards and for erecting, maintaining, and disassembling the fall protection systems and falling object protection systems being used.
- The proper use of scaffold, and the proper handling of materials on the scaffold.
- The maximum intended load and the load carrying capacities of the scaffolds used.
- Each employee involved in the erection, dismantling, moving, operating, repairing, maintaining or inspecting of a scaffold must be trained by a qualified person in the recognition and avoidance of hazards associated with these operations.
- The nature of scaffold hazards.
- The correct procedures for erecting, disassembling, moving, operating, repairing, inspecting, and maintaining the type of scaffold in question.
- The design criteria, maximum intended load carrying capacity and intend use of the scaffold.
- Any other pertinent requirements of OR OSHA Division 3, Subpart L 1926.454 regulations.
Site safety audits will be conducted weekly by Hudson Bay Insulation Company supervision, to include at least one or more of the following; the Safety Director and/or Superintendents and/or, Project Managers and/or Foreman and one employee, elected by the employees as their representative.

A “walk around” site safety audit will be conducted to assure compliance with HBIC safety policies and safe work practices are being followed. Each inspection will be documented on the Site Safety Audit Sheet and follow-up action will be taken as necessary to correct any deficiencies to prevent their reoccurrence.

Any hazards identified will be addressed immediately. Safety deficiencies found during the site safety audit will be reviewed at the weekly Toolbox/Safety Meeting for corrective action and incident prevention.
It is Hudson Bay Insulation Company policy to have each employee inspect their tools daily prior to the beginning of work. Inspect all hand & power tools for defects. Defective tools will be tagged and taken out of service.

**Hand Tools**

- Always wear appropriate PPE when using power tools.
- The size or capacity of a tool should be matched to the requirements of the job.
- Steel measuring tapes shall not be used in close proximity to electrical energized equipment.
- Hand tools shall be used for their intended purpose and not as a substitute for the proper tool required for the job.

**Power Tools**

- Task lights shall be equipped with bulb guards.
- Do not lift or lower portable electric tools by means of the power cord; use a hand line. Likewise, never throw tools, equipment or materials up or down from one working level to another; always use a hand line or a tool pouch.
- Keep cords of electrical equipment coiled when not in use. When in use, make sure cords are positioned to avoid being run over by vehicles or equipment.
- Portable electric tools shall
  - Be equipped with a ground wire permanently connected to the tool case/frame and a means for grounding the other ends.
  - Be connected to the power supply by means of a fully insulated isolating transformer.
  - Be of the “Double Insulated” type.
  - Be completely self-contained.
- Shut down machinery before cleaning, oiling or adjusting.
- When air or hydraulic lines are to be uncoupled, care should be taken to first shut off supply lines and drain off remaining pressure before uncoupling.
• No welding, burning, brazing, or other source of ignition should be applied to any enclosed tank or vessel, even if it contains some openings, until it has first been determined that no possibility of explosion exists, and that proper authority has been obtained from a foreman or field supervisor.

**Powder Actuated Tools**

Per OAR 437-003-0925 “Only qualified operators shall operate tools”. Tools shall be operated in strict accordance to the manufacturer’s instruction.

• All individuals who use powder actuated tools must be trained in the operation for each tool. Documented training will be kept on file at Hudson Bay Insulation Company office.

• All operators are required to carry their certification card when using powder actuated tools.

• HBIC employees will ensure all powder actuated tools are tested and inspected daily before use. All defective tools or parts will be immediately removed from service.

• Tools will not be loaded until they are ready for use. The tool is to be unloaded immediately following use, or if the employee is going to break or lunch.

• Shot will be stored and disposed of in accordance with manufacturer specifications.

• Tools will not be used in hazardous conditions, such as explosive or flammable atmospheres.

• Tools shall have determinable means of varying power to perform the desired work.

• Each tool will be supplied with operator’s instructions and service manual, power load chart, tool inspection record, service tools and accessories.

• Operators will always use appropriate PPE to include, hearing protection, safety glasses or face shields and gloves.

• “Powder Actuated Tool in Use” signs will be posted in plain sight at all points of entry and exit.
TRENCHING AND EXCAVATING SAFETY

SCOPE

- Hudson Bay Insulation Company does not excavate earth; however on occasion project scope may require work in excavated trenches. The purpose of this section is to ensure all employees have the information necessary to determine if conditions of a trench or excavation is safe to enter and perform work.

GENERAL

- Competent persons shall make daily inspections of excavations. If danger of cave-in exists, stop all work in the excavation until necessary precautions have been taken to safeguard the employees.
- Employees shall be provided with personal protective equipment such as hardhats, respirators, eye protectors, and hand and foot protection as required.
- Inspect excavations after rainstorms and provide additional protection if needed.
- Ladders spaced so that the worker does not have to travel more than twenty-five (25) feet will be used for access and shall extend at least 36 inches above grade.
- When the trench is less than 25 feet long, an alternate method of providing access is to slope the ends of the trench so a worker can walk out of both ends.
- All persons working in excavations regardless of depth shall wear hardhats.

SAFE WORK PRACTICES FOR UNDERGROUND OPERATIONS

- Find out where utility mains involved with your work are located and where the emergency shut-offs are. Make sure all utilities are field-located before you begin your work.
- Test and record all confined spaced for toxic and deadly gases, flammable vapors, and oxygen deficiency before entering.
- Be aware that vibrations from equipment or nearby traffic can “liquefy” soil and cause cave-ins.
- Make certain that pipe is properly stored and handled: rolling pipe kills!
- Know what to do and who to contact in case of an emergency. Keep emergency telephone numbers on the Safety Bulletin Board or in job box.
- Be alert when working near heavy equipment. The operator may not always see you.
• Wear personal protective equipment.
• Make sure that saws and other equipment have their proper guards in place.
• Keep electrical cords in good condition and out of water.
• Personally make sure that the power is off before cutting into any electrical line.
• Personally make sure that gas mains have been shut off, or located and adequately protected, before working near them.
• Be sure that your trench has the proper emergency exits at proper spacing. Be sure to use ladders for access.
**Purpose**

To minimize risk associated with motor vehicle operations by establishing a program to assure that owned, leased and non-owned motor vehicles operating in the course of company business are in safe operating condition and are operated by competent, qualified operators in a safe manner.

**Responsibilities**

- **Safety Director**
  - Coordinates driver training and testing.
  - Monitors vehicle inspection and maintenance program.
  - Investigates all vehicle accidents.

- **Human Resources**
  - Policy and program development and review.
  - Driver screening, selection and collects the necessary information and establishes and maintains a list of qualified drivers.
  - Overall program approval and support.
  - Review vehicle accident reports.

**General**

- The operation of motor vehicles is a small part of our business, however, with the operation of these vehicles comes a tremendous amount of responsibility for the safety of the driver, passengers, and the motoring public. Vehicle accidents account for needless injury and property damage. It is our intent to assure that only qualified, safe drivers operate company vehicles. Vehicle loss prevention is the responsibility of all management personnel, supervisors and drivers.

- It is a requirement of Hudson Bay that all vehicles be maintained and operated in the safest possible manner. Each driver is responsible to ensure compliance with this requirement.

- Any person operating a company vehicle must comply with all Federal, State and local laws and regulations which govern the operation of the vehicle.

- Each vehicle must be registered, licensed, and inspected as required by applicable state laws.
• Occupant restraint usage is required. Vehicle operators are responsible for utilization of occupant restraints for themselves and passengers.

• All vehicle accidents must be reported to the Safety Director or to Lisa King immediately.

Driver Qualification

• All drivers must be at least eighteen (18) years of age.

• All drivers must possess a valid Driver’s License; a copy of this license must be on file with Hudson Bay Insulation.

• All drivers must have a good driving record based on their personal Motor Vehicle Record.

Driver Regulations

• All drivers are required to wear seat belts while operating a company vehicle. Also, the driver is responsible to ensure that passengers wear their seat belts.

• Drivers shall obey all traffic rules, drive courteously and practice defensive driving techniques.

• Drivers shall maintain a valid Driver’s License and shall not allow other employees to use their vehicle until they verify the employee has a valid Driver’s License.

• Drivers shall notify management of:
  o Any change in Driver’s License status including suspension, revocation or restriction.
  
  o Any and all accidents that occur in a company vehicle.

• No employee will possess a firearm in his or her vehicle.

• Drivers will not operate a company vehicle after having consumed alcohol and/or drugs, including legal drugs, which may impair their ability to operate the vehicle.
In Case of an Accident

- You must complete a Vehicle Accident report form for any accident involving a Hudson Bay Insulation Company vehicle; also Local Law Enforcement officials will be called to report the accident. It is for your protection and for the protection of Hudson Bay Insulation Company.

- The following information must be obtained before leaving the scene. Complete the accident report form in the vehicle or if missing, a plain piece of paper will do;
  - date & time of collision
  - location of incident / accident
  - what transpired
  - name of other driver(s)
  - license number of vehicle(s) & driver(s)
  - insurance company, policy number, name & telephone number of agent
  - any injuries with a description if possible

- All of our vehicles have a disposable camera in the glove box. Take lots of pictures showing skid marks, damage and position of the vehicles.

- Call the Safety Director or Human Resources as soon as possible to report information.

- A post accident Drug Screen will be required of all drivers involved in a vehicle accident.
Definition of workplace violence

Workplace violence can be described in a number of different ways; physical attacks or assaults, threats, harassment; both verbal and sexual, vandalism and arson. Internal violence takes place within the organization and external violence comes from outside the organization (i.e. robberies). Hudson Bay Insulation Company is committed to preventing workplace violence and to maintain a safe work environment and the cooperation of all employees is expected.

All employees of Hudson Bay Insulation Company should treat each other with courtesy and respect at all times. Employees are expected to refrain from fighting, “horseplay”, or other conduct that may be dangerous or intimidating to others. Employees are barred from bringing weapons to work.

Conduct that threatens, intimidates or coerces another employee, a customer or a member of the public at any time, including during off-duty periods, will not be tolerated. This prohibition includes all acts of harassment including harassment that is based on individual’s sex, race age or any characteristic protected by federal, state or local law.

Warning signs of workplace violence can be any of the following:

- Threats
- Change in attitudes or work patterns
- Bizarre behavior
- Alcohol / drug abuse on the job

Prevention of workplace violence

- Practice personal safety, keep valuables out of sight, and lock car doors, report ‘strange’ or suspicious looking persons or persons acting strangely.

- Respect the rights of fellow employees and clients. ‘Teasing’ in the workplace should be kept at a minimum. ‘Hazing’ is unacceptable at any time.

- Report threats of any kind to your supervisor and to Jim King at (206) 763-9484. Every report of a threat will be confidential but will be documented and treated seriously.

- When reporting a threat, document who made the threat, what was the threat, when the threat was made and where did the threat occur.
• Hudson Bay Insulation Company will not condone any type of violence caused by employees of this organization. Anyone determined to be responsible for threats of (or actual) violence or other conduct that is in violation of these guidelines will be subject to prompt disciplinary action up to and including termination of employment.

Should workplace violence occur

If there is a fight or assault with no apparent weapon, get help to stop the incident, get the names of the persons involved and, if any of the parties are unknown, get a description of them, including sex, race, age, height, weight, hair color, eye color, clothing, any distinguishing characteristics, and a complete description of any vehicle, including the make, model, year, license number and particular characteristics. Try to jot down as much information as possible before discussing the incident with anyone else.

For fights and/or assaults in which there is a gun or another weapon involved, get to a safe place and call 911. Carefully and as accurately as possible, describe the act and the attacker. Again, write down as many details as possible before talking to anyone other than law enforcement officials.

If you arrive at a scene where violence has occurred

• Do not change anything at the scene.

• Do not clean up, reset furniture or touch any objects that may have been handled by the attacker.

In the event of rape, do not wash yourself or change clothes until examined by a doctor.

Hudson Bay Insulation Company will encourage employees to bring their disputes or differences with other employees to the attention to the Human Resources Department before the situation escalates into potential violence. Hudson Bay Insulation Co. is eager to assist in the resolution of employee disputes and will not discipline employees for raising such concerns. In addition, retaliation is strictly prohibited and no one who raises a concern, brings a complaint or participates in an investigation will be retaliated against for those actions.
FORMS
AERIAL LIFT INSPECTION SHEET

Inspections are to be conducted daily and documented.

Job Name: ___________________________ Job Number: _______________________

Operator Name(s): _______________________

Type of Lift:  □ Scissor  □ Boom  Model Number: _______________________

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</tr>
<tr>
<td>Inspection Item &amp; Description</td>
<td>Pass / Fail</td>
<td>P / F</td>
<td>P / F</td>
<td>P / F</td>
<td>P / F</td>
</tr>
<tr>
<td>Operating and emergency controls are in proper working conditions – EMO Button or ESD</td>
<td></td>
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<tr>
<td>Upper drive control interlock mechanism is functional – (foot pedal, spring lock, etc)</td>
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<tr>
<td>Emergency lowering function operates properly</td>
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<tr>
<td>Lower operating controls successfully over-ride the upper controls</td>
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<tr>
<td>Upper and lower controls are adequately protected from inadvertent operation</td>
<td></td>
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<tr>
<td>Control panel is clean, all buttons and switches are clearly visible</td>
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<tr>
<td>All switch &amp; mechanical guards are in good condition and properly installed</td>
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<tr>
<td>All Safety Indicator lights work</td>
<td></td>
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<tr>
<td>Drive controls function properly &amp; accurately labeled (up, down, right, left, forward, back)</td>
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<tr>
<td>Motion alarms are functional</td>
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<tr>
<td>All guardrails are sound and in place, including basket chains</td>
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<tr>
<td>Inspect for defects such as cracked welds, fuel leaks, hydraulic leaks, damaged wires or cables</td>
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<tr>
<td>Braking devices are operating properly</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>The manufacturer’s operations manual is stored on unit</td>
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</tbody>
</table>

Workplace Assessment

Survey work area for potential hazardous operating conditions – Check if present

| Floor Conditions: Drop offs, holes, uneven surfaces, etc |     |     |     |     |     |
| Housekeeping: Debris, floor obstructions, cords, etc |     |     |     |     |     |
| Hazardous Energy: Power lines, panels, chemical lines, etc |     |     |     |     |     |
| Overhead Obstructions: pipe racks, duct work, ceiling grid |     |     |     |     |     |
**AERIAL LIFT INSPECTION SHEET**

Inspections are to be conducted daily and documented.

---

**Job Name:** ___________________________  **Job Number:** ___________________________

**Operator Name(s):** ___________________________

**Type of Lift:**  [ ] Scissor  [ ] Boom  **Model Number:** ___________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
<th>Fri</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initials of operator performing inspection</td>
<td></td>
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</tr>
</tbody>
</table>

- **Inspection Item & Description**
  - Operating and emergency controls are in proper working conditions – EMO Button or ESD
  - Upper drive control interlock mechanism is functional – (foot pedal, spring lock, etc)
  - Emergency lowering function operates properly
  - Lower operating controls successfully over-ride the upper controls
  - Upper and lower controls are adequately protected from inadvertent operation
  - Control panel is clean, all buttons and switches are clearly visible
  - All switch & mechanical guards are in good condition and properly installed
  - All Safety Indicator lights work
  - Drive controls function properly & accurately labeled (up, down, right, left, forward, back)
  - Motion alarms are functional
  - All guardrails are sound and in place, including basket chains
  - Inspect for defects such as cracked welds, fuel leaks, hydraulic leaks, damaged wires or cables
  - Braking devices are operating properly
  - The manufacturer’s operations manual is stored on unit

**Workplace Assessment**

Survey work area for potential hazardous operating conditions – Check if present

<table>
<thead>
<tr>
<th>Floor Conditions: Drop offs, holes, uneven surfaces, etc</th>
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<th></th>
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</thead>
<tbody>
<tr>
<td>Housekeeping: Debris, floor obstructions, cords, etc</td>
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</tr>
<tr>
<td>Hazardous Energy: Power lines, panels, chemical lines, etc</td>
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<tr>
<td>Overhead Obstructions: pipe racks, duct work, ceiling grid</td>
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</tbody>
</table>
ASSURED GROUNDING PROGRAM
LOG SHEET

Employer:  Hudson Bay Insulation Company
Name or location of construction site:  ____________________________________________

Person to implement program:  _________________________________________________

Identify date of test in appropriate column:

<table>
<thead>
<tr>
<th>Item &amp; I.D.</th>
<th>1st QTR</th>
<th>2nd QTR</th>
<th>3rd QTR</th>
<th>4th QTR</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
CONFINED SPACE ENTRY PERMIT

This permit is to be posted at the entry site and taken down at completion of work or shift.

Job Name: ___________________________ Job Number: __________________

Permit Date: _____________ Time: ___________ AM / PM

Expire Date: _____________ Time: ___________ AM / PM

Location of Confined Space: ____________________________________________

Task(s) to Be Completed: _____________________________________________

Entry Supervisor: ___________________________________________________

Authorized Entrant(s): ______________________________________________
List others on the back of this form

Authorized Attendant(s): _____________________________________________
List others on the back of this form

Safety Precautions

☐ Self-Contained Breathing Apparatus ☐ Respirators ☐ Fall Protection
☐ Retrieval Equipment / Lifelines ☐ Ventilation ☐ Lockout / Tagout
☐ Communications Equipment ☐ Purge / Flush ☐ Lighting (Explosion Proof)
☐ Protective Clothing ☐ PPE ☐ Fire Extinguisher
☐ Warning Signs / Barricades ☐ Other __________________________

Environmental Conditions

<table>
<thead>
<tr>
<th>Tests To Be Taken</th>
<th>Yes</th>
<th>No</th>
<th>Acceptable Entry Conditions</th>
<th>Test #</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxygen - O2</td>
<td></td>
<td></td>
<td>19.5% - 23.5%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carbon Monoxide - CO</td>
<td></td>
<td></td>
<td>Less than 50 PPM</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hydrogen Sulfide – H2S</td>
<td></td>
<td></td>
<td>Less than 10 PPM</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LEL</td>
<td></td>
<td></td>
<td>Less than 10%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Instrument Used: ___________________________ Unit Calibrated: Yes No Date: ___________

List additional times on the back of this form

Personnel Entry Record

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
<th>In</th>
<th>Out</th>
<th>In</th>
<th>Out</th>
</tr>
</thead>
</table>

List additional entries on the back of this form

All Emergencies Call: 911 or ___________________________

Entry Supervisor Signature: ___________________________ Date: ___________

Entry Supervisor authorizing all above conditions have been satisfied and deemed safe for entry.
**CONFINED SPACE ENTRY PERMIT**

This permit is to be posted at the entry site and taken down at completion of work or shift.

Job Name: ____________________________  Job Number: ________________________

Permit Date: ______________ Time: __________ AM / PM

Expire Date: ______________ Time: __________ AM / PM

Location of Confined Space: ____________________________________________________

Task(s) to Be Completed: ______________________________________________________

Entry Supervisor: ____________________________________________________________

Authorized Entrant(s): _______________________________________________________

Authorized Attendant(s): ____________________________________________________

  List others on the back of this form

<table>
<thead>
<tr>
<th>Safety Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Self-Contained Breathing Apparatus</td>
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<tr>
<td>☐ Retrieval Equipment / Lifelines</td>
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<td>☐ Communications Equipment</td>
</tr>
<tr>
<td>☐ Protective Clothing</td>
</tr>
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<td>☐ Warning Signs / Barricades</td>
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<td>☐ Respirators</td>
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<td>☐ Purge / Flush</td>
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</tr>
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<tr>
<td>☐ Lighting (Explosion Proof)</td>
</tr>
<tr>
<td>☐ Fire Extinguisher</td>
</tr>
<tr>
<td>☐ PPE</td>
</tr>
<tr>
<td>☐ Other</td>
</tr>
</tbody>
</table>

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<th>Environmental Conditions</th>
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<tbody>
<tr>
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<tr>
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</tr>
<tr>
<td>LEL</td>
</tr>
</tbody>
</table>

Instrument Used: ____________________________ Unit Calibrated: Yes No Date: __________

<table>
<thead>
<tr>
<th>Personnel Entry Record</th>
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</thead>
<tbody>
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</table>

List additional entries on the back of this form

All Emergencies Call: 911  or ____________________________

Entry Supervisor Signature: ____________________________ Date: __________

Entry Supervisor authorizing all above conditions have been satisfied and deemed safe for entry.
DISCIPLINARY ACTION FORM

Supervisor must discuss violations with the cited employee in the presence of a second Hudson Bay Insulation Company representative/employee and if requested, a third party.

Fax the completed form to the Safety Department at (206) 763-7922

Name of Employee: ___________________________ Date: __________
Supervisor: ___________________________ Job Name /# ______________________

☐ Disabling safety devices ☐ Violence in the workplace
☐ Failure to use fall protection ☐ Violation of HBIC policies
☐ Failure to wear required PPE ☐ Under the influence of drugs or alcohol*
☐ Housekeeping ☐ Absenteeism*
☐ Unsafe use of tools or equipment ☐ Insubordination*
☐ Unsafe actions on the jobsite ☐ Sexual Harassment*
☐ Violation of HBIC Safety Policies ☐ Other: ___________________________

* Notify Lisa King in HR at (206) 763-9484 prior to action.

Description of Incident: ____________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Action Taken
☐ Verbal Warning ☐ Written Warning ☐ Suspension ____ Days ☐ Termination - Immediate

The following plan has or will be implemented to correct and/or prevent further infractions of HBIC safe work policies and procedures:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Employee Signature: ___________________________ Date: __________
Supervisor Signature: ___________________________ Date: __________
Witness Signature: ___________________________ Date: __________

Copies to: Employee, Safety Department and Human Resources.
DISCIPLINARY ACTION FORM

Supervisor must discuss violations with the cited employee in the presence of a second Hudson Bay Insulation Company representative/employee and if requested, a third party.

Fax the completed form to the Safety Department at (206) 763-7922

Name of Employee: _________________________________ Date: __________
Supervisor: _________________________________ Job Name /# ________________

☐ Disabling safety devices ☐ Violence in the workplace
☐ Failure to use fall protection ☐ Violation of HBIC policies
☐ Failure to wear required PPE ☐ Under the influence of drugs or alcohol*
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☐ Unsafe actions on the jobsite ☐ Sexual Harassment*
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Description of Incident: ______________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Action Taken
☐ Verbal Warning ☐ Written Warning ☐ Suspension ___ Days ☐ Termination - Immediate

The following plan has or will be implemented to correct and/or prevent further infractions of HBIC safe work policies and procedures:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Employee Signature: _________________________________ Date: __________
Supervisor Signature: _________________________________ Date: __________
Witness Signature: _________________________________ Date: __________

Copies to: Employee, Safety Department and Human Resources.
FALL PROTECTION WORK PLAN

Employees must review the requirements of this fall protection work plan prior to starting work.

Job Name: ______________________________ Date: __________

Job Location Description: _______________________________________________________

Task(s) to Be Completed: _______________________________________________________

Competent Person: _____________________________________________________________

<table>
<thead>
<tr>
<th>Hazards</th>
<th></th>
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<tbody>
<tr>
<td>Identify all hazards 10 feet or greater in the work area</td>
<td></td>
</tr>
</tbody>
</table>

- [ ] Leading Edge
- [ ] Wall Openings
- [ ] Stairways
- [ ] Perimeter Edge
- [ ] Floor Openings
- [ ] Ladders
- [ ] Scaffold over 10 Feet
- [ ] Elevator Openings
- [ ] Roof
- [ ] Boom Lift / Scissor Lift
- [ ] Other (Specify): ________________________________

<table>
<thead>
<tr>
<th>Fall Protection Equipment</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Method of fall protection to be provided</td>
<td></td>
</tr>
</tbody>
</table>

- [ ] Full Body Harness
- [ ] Drop Line
- [ ] Restraint / Warning Line
- [ ] Shock Absorbing Lanyard
- [ ] Rope Grab
- [ ] Safety Monitor
- [ ] Retractable Lifeline
- [ ] Lifeline
- [ ] Boom Lift / Scissor Lift
- [ ] Horizontal Lifeline
- [ ] Safety Nets
- [ ] Scaffold
- [ ] Standard Guardrail
- [ ] Other (Specify): ________________________________

Describe: ____________________________________________________________

Procedure for Assembly, Maintenance, Inspection & Disassembly of Personal Fall Restraint / Arrest Equipment.

Assembly & Disassembly of all equipment will be done in accordance with the manufacturer’s recommended procedures.

A visual inspection of all Personal Fall Restraint / Arrest equipment will be performed daily or before each use. Any defective equipment will be tagged and removed from use immediately. The manufacturer’s recommendations for maintenance and inspection will be followed.

Assembly / Disassembly Procedures – Conducted By: ________________________________

Describe: ____________________________________________________________

__________________________________________

Page 1 of 3
Maintenance of equipment or systems used – Conducted By: ____________________________

Describe: _______________________________________________________________________

________________________________________________________________________________

Inspection of equipment or systems used: _____________________________________________

Person(s) assigned: __________________________________________________________________

Date(s) of inspection: __________________________________________________________________

Describe: _______________________________________________________________________

________________________________________________________________________________

Handling, Storage and Securing of Tools and Materials

Describe: _______________________________________________________________________

________________________________________________________________________________

Method(s) of Overhead Protection

Describe the method of providing overhead protection for workers or others who may be in, pass through or near the area below the work site.

☐ Barricading (eliminated access) ☐ Warning signs posted

☐ Toeboards installed around floor openings ☐ Hard hats required

☐ Other (Specify): __________________________________________________________________

Describe: _______________________________________________________________________

________________________________________________________________________________

Adequacy of Attachment Points

Describe the method used to determine the adequacy of attachment points.

☐ Manufacturer’s Data ☐ Evaluation by qualified engineer

☐ Existing engineered / designed anchor points ☐ Good faith assessment


Page 2 of 3
Injured Worker Removal
Normal First-Aid procedures should be performed as the situation requires. If the area is safe for entry, first aid should be performed by a certified individual. If the situation is not safe, do not enter the area.

Describe the method for prompt, safe removal of injured workers.

- Initiate emergency response (911)
- Use drop lines or retraction devices
- Assist medical, fire or emergency personnel
- Other (Specify): ________________________________
- Utilize lift truck with personnel platform
- Utilize boom lift basket
- Utilize scaffolds or ladders

Employee Acknowledgement of Fall Protection Training
All employees are to adhere to the Fall Protection procedures that are set forth in the HBIC Safety & Risk Management Plan. All employees shall have been trained by a qualified competent person; the training shall consist of a review of the fall protection plan and the proper use of fall protection equipment before work is to begin. Copies of this form are to be turned into the HBIC Safety Department and maintained at the jobsite.

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
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</table>

List additional names on the back of this sheet

Approvals

Fall Protection Work Plan Completed By: ____________________________

Submitted To: ____________________________ Date: __________

Approved By: ____________________________ Date: __________
EMPLOYEE INCIDENT REPORT

To be completed and signed by the injured worker, reviewed and signed by the supervisor, and sent to the Safety Department. Use this form for near-miss incidents also.

Must be submitted within 24 Hours

<table>
<thead>
<tr>
<th>Incident Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Name: ___________________ Job Name: ___________________</td>
</tr>
<tr>
<td>Supervisor: ___________________ Place of Incident: ___________________</td>
</tr>
<tr>
<td>Date of Incident: ____________ Time of Incident: ________ am / pm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Incident:</th>
<th>Injury</th>
<th>Bloodborne</th>
<th>Incident</th>
<th>Damage – Property</th>
<th>Material</th>
<th>Equip.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Nature of Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strain/Sprain</td>
</tr>
<tr>
<td>Fracture</td>
</tr>
<tr>
<td>Bruising</td>
</tr>
<tr>
<td>Internal</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Injured Part of Body:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strain/Sprain</td>
</tr>
<tr>
<td>Fracture</td>
</tr>
<tr>
<td>Bruising</td>
</tr>
<tr>
<td>Internal</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>HBI First Aid</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Incident Description</th>
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</thead>
<tbody>
<tr>
<td>Describe what happened. Be specific and detailed</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Incident Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>What was most likely the cause related to the incident? (object, material, equipment, conditions)</td>
</tr>
<tr>
<td>Did an unsafe act by yourself or other contribute to the accident? (be specific)</td>
</tr>
<tr>
<td>Did personal factors contribute to the incident? (lack of knowledge, skill, experience, distraction, lack of training, fatigue)</td>
</tr>
<tr>
<td>Was the hazard discussed in the pre-task planning meeting? If no, explain.</td>
</tr>
<tr>
<td>Was PPE Required? YES NO Was the correct PPE in use? YES NO If YES: List the PPE If NO: Explain</td>
</tr>
<tr>
<td>Was the employee following safety procedures when the incident happened? YES NO If NO: Explain</td>
</tr>
<tr>
<td>How could this incident have been avoided?</td>
</tr>
<tr>
<td>List all witnesses:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>___________________</td>
<td>___________________</td>
</tr>
<tr>
<td>Supervisor</td>
<td>___________________</td>
<td>___________________</td>
</tr>
</tbody>
</table>
EMPLOYEE INCIDENT REPORT

To be completed and signed by the injured worker, reviewed and signed by the supervisor, and sent to the Safety Department. Use this form for near-miss incidents also.

**Must be submitted within 24 Hours**

### Incident Information

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Job Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor:</td>
<td>Place of Incident:</td>
</tr>
<tr>
<td>Date of Incident:</td>
<td>Time of Incident: am / pm</td>
</tr>
</tbody>
</table>

**Type of Incident:**
- [ ] Injury
- [ ] Bloodborne
- [ ] Incident
- [ ] Damage – Property
- [ ] Material
- [ ] Equip.

### Nature of Injury

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Strain/Sprain</td>
<td>□ Laceration/Cut</td>
</tr>
<tr>
<td>□ Fracture</td>
<td>□ Scratch/Abrasion</td>
</tr>
<tr>
<td>□ Bruising</td>
<td>□ Puncture</td>
</tr>
<tr>
<td>□ Internal</td>
<td>□ Amputation</td>
</tr>
<tr>
<td></td>
<td>□ Foreign Body</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Burn/Scald</td>
<td>□ Impalement</td>
</tr>
<tr>
<td>□ Other</td>
<td>□ Other</td>
</tr>
</tbody>
</table>

**Injured Part of Body:**

### Treatment

- [ ] HBI First Aid
- [ ] Medical Treatment (explain)
- [ ] Near Miss

### Incident Description

Describe what happened. Be specific and detailed.

---

### Incident Factors

What was most likely the cause related to the incident? (object, material, equipment, conditions)

- Did an unsafe act by yourself or other contribute to the accident? (be specific)

- Did personal factors contribute to the incident? (lack of knowledge, skill, experience, distraction, lack of training, fatigue)

- Was the hazard discussed in the pre-task planning meeting? If no, explain.

- Was PPE Required? YES NO Was the correct PPE in use? YES NO If YES: List the PPE If NO: Explain

- Was the employee following safety procedures when the incident happened? YES NO If NO: Explain

- How could this incident have been avoided?

List all witnesses:

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervisor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---
WITNESS INCIDENT STATEMENT

To be completed by all witnesses and sent to the Safety Department.

Must be submitted within 24 Hours

---

**Incident Information**

Witness Name: ___________________________  Job Name: ___________________________

Supervisor: ___________________________  Place of Incident: ___________________________

Date of Incident: ___________________________  Time of Incident: __________ am / pm

---

**Incident Description**

Describe what happened. Be specific and detailed.

---

The facts as I have stated them are true to the best of my knowledge.

---

**Print Name**  **Signature**  **Date:**

<table>
<thead>
<tr>
<th>Employee</th>
<th></th>
<th></th>
</tr>
</thead>
</table>

---
WITNESS INCIDENT STATEMENT

To be completed by all witnesses and sent to the Safety Department.

Must be submitted within 24 Hours

Incident Information

Witness Name: ______________________________  Job Name: ______________________________

Supervisor: ______________________________  Place of Incident: ______________________________

Date of Incident: ________________  Time of Incident: ___________ am / pm

Incident Description

Describe what happened. Be specific and detailed.

________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________

The facts as I have stated them are true to the best of my knowledge.

Print Name  Signature  Date:

Employee: ______________________________  ______________________________  ___________
**INCIDENT INVESTIGATION REPORT**

To be completed by the Safety Director, Foreman, Superintendent and Project Manager.
To be completed for major incidents, including all recordable injuries and major near misses.

*Must be submitted within 24 Hours*

### Incident Information

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Job Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supervisor:</th>
<th>Place of Incident:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Date of Incident:</th>
<th>Time of Incident: am / pm</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Incident:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury</td>
</tr>
<tr>
<td>---------</td>
</tr>
</tbody>
</table>

### Nature of Injury

<table>
<thead>
<tr>
<th>Injured Part of Body:</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Diagnosis of Injury:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Treatment of Injury:</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

- [ ] HBI First Aid
- [ ] Offsite First Aid
- [ ] Medical Recordable
- [ ] Lost Time Recordable
- [ ] Light Duty Recordable

### Incident Description

Describe what happened. Be specific and detailed

<p>| |</p>
<table>
<thead>
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</table>

### Contributing Factors

<table>
<thead>
<tr>
<th>Unsafes Acts</th>
<th>Unsafe Conditions</th>
<th>Management Deficiencies</th>
</tr>
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<tbody>
<tr>
<td>Improper PPE or PPE not used</td>
<td>Congested work area</td>
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<td>Safety rule violation</td>
<td>Inadequate ventilation</td>
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<td>By-passing safety devices</td>
<td>Improper material storage</td>
<td>Hazards not identified</td>
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<tr>
<td>Guards not used</td>
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<td>Insufficient knowledge of job</td>
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<td>Improper lifting</td>
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<tr>
<td>Improper loading or placement</td>
<td>Poor work area design or layout</td>
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<td>Inadequate fall protection</td>
<td>Poor access, housekeeping</td>
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<tr>
<td>Horseplay</td>
<td>Inadequate lighting</td>
<td>Other:</td>
</tr>
<tr>
<td>Improper work technique</td>
<td>Inadequate guarding of hazards</td>
<td></td>
</tr>
<tr>
<td>Fatigue/lack of focus</td>
<td>Slippery conditions</td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td>Other:</td>
<td></td>
</tr>
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Page | 134
INCIDENT INVESTIGATION REPORT

Must be submitted within 24 Hours

Incident Analysis – Explain the cause(s) of the incident detail

Was disciplinary action taken? YES NO
If YES, what was the action? If NO, why not?

How bad could the accident have been? very serious serious minor
What is the chance the accident could happen again? very likely likely not likely

Preventative and/or Corrective Actions

<table>
<thead>
<tr>
<th>Indicated Actions</th>
<th>Deadline</th>
<th>By Whom</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
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### INCIDENT INVESTIGATION REPORT

To be completed by the Safety Director, Foreman, Superintendent and Project Manager. To be completed for major incidents, including all recordable injuries and major near misses.

**Must be submitted within 24 Hours**

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Type of Incident:  
- ☐ Injury  
- ☐ Bloodborne  
- ☐ Incident  
- ☐ Damage – Property  
- ☐ Material  
- ☐ Equip.

**Nature of Injury**

- Injured Part of Body:  
- Diagnosis of Injury:  
- Treatment of Injury:  

- ☐ HBI First Aid  
- ☐ Offsite First Aid  
- ☐ Medical Recordable  
- ☐ Lost Time Recordable  
- ☐ Light Duty Recordable

**Incident Description**

Describe what happened. Be specific and detailed.

---

**Contributing Factors**

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<td>Other:</td>
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</tbody>
</table>
INCIDENT INVESTIGATION REPORT

Must be submitted within 24 Hours

Incident Analysis – Explain the cause(s) of the incident detail


Was disciplinary action taken?  YES  NO  
If YES, what was the action?  If NO, why not?

How bad could the accident have been?
very serious  serious  minor

What is the chance the accident could happen again?
very likely  likely  not likely

<table>
<thead>
<tr>
<th>Preventative and/or Corrective Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicated Actions</td>
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Investigative Team

<table>
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<tr>
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<th>Signature</th>
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</table>

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SCAFFOLD SAFETY CHECKLIST

- This checklist shall be completed prior to each work shift that the scaffold is being used.
- The checklist will be completed by a competent person.
- If HBIC is using another contractor's scaffolding, it shall be inspected by a HBIC competent person prior to use.

<table>
<thead>
<tr>
<th>Job Name:</th>
<th>Job Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Erected By:</td>
<td>Date:</td>
</tr>
<tr>
<td>Inspected By:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

### Scaffold Safety Checklist

<table>
<thead>
<tr>
<th>Item</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are sills properly placed and adequately sized?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have screw jacks been used to level and plumb scaffold?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are base plates and/or screw jacks in form contact with sills and frames?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all scaffold legs braced with braces properly?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is guard railing in place on all open sides and ends above 10' (feet)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are working level platforms fully planked between guard rails?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does planking have a minimum 12” overlap extended beyond supports and cleated at ends?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are toe-boards installed properly?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a fall protection analysis been performed?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is fall protection equipment available if needed?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have all employees working scaffold been informed of and trained in safe working practices while working on the scaffold?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Are out riggers properly installed at 90 degree angles perpendicular to the building?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have scaffold components been properly inspected for damage and compatibility?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are platforms at least 18” wide?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are guardrails installed at a height of 39” to 45”?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the guardrail system capable of 200 lbs.?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the scaffold been inspected by a competent person?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Mobile Scaffolds

<table>
<thead>
<tr>
<th>Item</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are frames secured by braces which provide lateral support to the vertical members of the scaffold?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all braces connections secured?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>When moving the scaffold, is the necessary force applied as close to the base?</td>
<td></td>
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</tr>
<tr>
<td>Do the braces function to automatically square and align the frames?</td>
<td></td>
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</tr>
<tr>
<td>Are castors locked during scaffold use?</td>
<td></td>
<td></td>
<td></td>
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Competent Person Signature: _____________________ Date: ____________
SCAFFOLD SAFETY CHECKLIST

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Erected By: ____________________________  Date: ____________________________
Inspected By: ____________________________  Date: ____________________________

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<thead>
<tr>
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<th>YES</th>
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<th>N/A</th>
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<tbody>
<tr>
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<tr>
<td>Are guardrails installed at a height of 39” to 45”?</td>
<td></td>
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<tr>
<td>Is the guardrail system capable of 200 lbs.?</td>
<td></td>
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<tr>
<td>Has the scaffold been inspected by a competent person?</td>
<td></td>
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</tbody>
</table>

**Mobile Scaffolds**

<table>
<thead>
<tr>
<th>Mobile Scaffolds</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are frames secured by braces which provide lateral support to the vertical members of the scaffold?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all braces connections secured?</td>
<td></td>
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<td></td>
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<tr>
<td>When moving the scaffold, is the necessary force applied as close to the base?</td>
<td></td>
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<tr>
<td>Do the braces function to automatically square and align the frames?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are castors locked during scaffold use?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all frame connections secured?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the scaffold been inspected by a competent person?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Competent Person Signature: ____________________________  Date: ____________
## SITE SAFETY AUDIT

**Job Name:** __________________________  **Job Number:** __________

**Foreman:** __________________________  **Date:** __________________________

**Inspected By:** __________________________

Check the appropriate box and explain items that need attention in the comments section.

<table>
<thead>
<tr>
<th>Personal Protective Equipment - PPE</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are safety glasses, gloves and hard hats worn at all times?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are dust masks and/or respirators being used?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are earplugs being used by employees around loud noises or areas?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Fall Protection**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are all employees wearing appropriate fall protection that may be exposed to leading edges or falls greater than 6’ (feet)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are guardrails constructed with a Top Rail of (36” to 42”), Mid Rail &amp; Toe Board?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are tie-off points capable of withstanding 5,000 lbs. of force?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are fall protection devices and equipment in serviceable condition?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are fall protection devices and equipment being used correctly?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Ladders**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are ladders in serviceable condition? (legs, feet, rungs not broken)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are extension ladders tied off at the top, extending at least 36” above the landing point?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are ladders being used correctly?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Aerial Lifts**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the aerial lift been inspected and documented on the checklist?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are the lifts being used appropriately?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are employees using fall protection inside the lifts?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the operator certified to use the lift?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Housekeeping**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there clear and safe routes for ingress and egress into work areas?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are floor openings guarded and/or identified?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are material storage areas safeguarded from inclement weather?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is material stored or positioned to prevent tipping or falling?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are tools, job boxes, ladders and lifts secured at the end of the shift?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments: __________________________
## SITE SAFETY AUDIT

### First Aid & Emergency Preparedness

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there First Aid &amp; Bloodborne Pathogen kits inside each job box?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there HBIC employees who are certified in CPR and First Aid onsite?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Are there eye wash bottles in each job box?</td>
<td></td>
<td></td>
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<tr>
<td>In the event of an emergency, is there a rally or gathering point? Where?</td>
<td></td>
<td></td>
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<tr>
<td>Are Emergency numbers posted in one location? Where?</td>
<td></td>
<td></td>
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<tr>
<td>Is there a jobsite First Aid Station? Where?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Where is the closest Hospital or US Healthworks location?</td>
<td></td>
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<tr>
<td>Comments:</td>
<td></td>
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</tbody>
</table>

### Administrative

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have all employees read and signed the Safety and Risk Management Plan?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Are Pre-Task Plans (PTP) being done daily?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Are Toolbox talks / Safety Meetings being conducted weekly?</td>
<td></td>
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<tr>
<td>Comments:</td>
<td></td>
<td></td>
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</tbody>
</table>

### Miscellaneous

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is proper lighting being used in work areas? (task lighting, head lamps)</td>
<td></td>
<td></td>
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<tr>
<td>Are there bulb or lens guards on task lighting?</td>
<td></td>
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<tr>
<td>Are there enough toilets and washing facilities on the jobsite?</td>
<td></td>
<td></td>
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<tr>
<td>Is there a centralized break area or lunch room?</td>
<td></td>
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<tr>
<td>Comments:</td>
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</table>

### Comments

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Foreman Signature: ___________________________ Date: ____________

Inspector Signature: ________________________ Date: ____________
I, the undersigned certify that I have been properly trained and instructed on the safe work practices of Hudson Bay Insulation Company. My signature below certifies that I understand and will adhere to the policies and procedures that are set forth in this Safety and Risk Management Plan.

- Aerial Lifts
- Asbestos Awareness
- Assured Grounding
- Bloodborne Pathogens
- Confined Space
- Disciplinary Procedures
- Emergency Procedures
- Fall Protection
- Fire Prevention & Protection
- Hazardous Comm. - SDS
- Hearing Conservation
- Heat Stress
- Housekeeping
- Incident Reporting
- Ladders, Stairways, & Walkways
- Lockout / Tagout
- Material Handling & Storage
- PPE
- Pre-Task Planning
- Respiratory Protection
- Scaffold
- Tools
- Vehicle Safety
- Workplace Violence

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Employee Signature</th>
<th>Date</th>
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<tbody>
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</table>
# SAFETY ORIENTATION

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Employee Signature</th>
<th>Date</th>
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<tbody>
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I do hereby certify the above named employees have been properly trained and instructed on the safe work practices of Hudson Bay Insulation Company.

Scott R. Bee

Safety Director

Date