



SITE-SPECIFIC RISK/SAFETY PLAN

REVISED 1-1-24

Project Name:	
Address:	City/State:
Date Submitted to WBTC:	Date Received by WBTC:

1.0 RESPONSIBLE PERSONS

Subcontractor's Name:	Office Phone:
Subcontractor's Accounting Dept. Contact:	Office Phone:
Subcontractor's Superintendents Name:	Cell Phone:
Subcontractor's Competent Person:	Cell Phone:
Subcontractor's Safety Contact:	Cell Phone:
First Aid/CPR Person:	Cell Phone:
Occupational Medical Clinic:	Phone:
Nearest Hospital:	Phone:

2.0 COMPLIANCE

- We are committed to complying with all applicable OSHA and Wright Brothers safety standards.
- We have a 3-step disciplinary process for subcontractors that violate serious OSHA standards.
- Have you submitted your Safety Data Sheets (SDS) to the Wright Brothers Superintendent?
 - Yes No If no, please explain why

Other: _____

3.0 COMMUNICATIONS

- We will conduct a site-specific safety orientation with our workers on the first day (using the Wright Brothers site-specific orientation sign-in roster).
- We have daily meetings each morning to discuss hazards and how to do our work safely.
- We conduct weekly toolbox meetings and review the weekly Work Activity Safety Plan (WASP/JHA).
- We require our workers to report unsafe conditions and to make safety suggestions without fear of reprisal.
- Other: _____

4.0 HAZARD IDENTIFICATION AND CORRECTION

How does your company identify and correct hazards and unsafe conditions?

- When the site-specific plan is first implemented.
- We monitor the work area, tools, and equipment each day to identify hazards and correct them.
- We conduct a weekly Work Activity Safety Plan (WASP/JHA) to identify hazards and control methods.
- Other: _____

5.0 INCIDENT / HAZARD EXPOSURE INVESTIGATIONS

- All incidents (first aid, and injuries, property and equipment damage) will be reported to our supervisor immediately and the supervisor will report it to the Wright Brother's Superintendent immediately.
- Incidents and near misses will be reviewed/investigated to determine the cause to prevent future such incidents.
- We will provide Wright Brothers with a copy of our incident investigation reports within 48 hours of an incident.
- Other: _____

6.0 HAZARD CORRECTION

- When a hazard is found, we will stop work, close the area, and correct the hazard in a timely manner.
- Hazards will be reported to the Wright Brothers Superintendent and corrected as soon as possible.
- Guard rails, handrails and other fall protection devices **shall never be removed** unless approved by the Wright Brothers Superintendent to load or unload materials. When a guard rail is removed, 100% fall protection (harness & lanyard) is required to be worn. The guard rails **shall be re-installed** after the materials are loaded or unloaded.
- Ladders will be inspected and used as per the manufacturer's instructions.
- Electrical cords **shall be** inspected for damage and third ground prongs before use.
- All forklifts, boom lifts, scissor lifts and other equipment **shall be** inspected before each use. Damaged equipment **shall be** removed from service and corrected before use.
- Other: _____

7.0 TRAINING AND INSTRUCTION

- Our workers have received training for their specific job duties (if not explain why below).
- Our workers have been trained to operate forklifts (please provide a copy of forklift card).
- Our workers have been trained to operate boom lifts and/or scissor lifts please (provide proof of training).
- Our workers and supervisors have received training and instruction on specific safety and health practices.
- Our workers receive training on safety data sheets (SDS) for the chemicals they use (please provide proof).
- Other: _____

Have your workers received a medical evaluation and fit test if they use a dust mask or respirator?

- Yes No If no, please explain why.
- _____

8.0 RECORDKEEPING

- We document each worker's safety training, including the worker's name or other identifier, training dates, type(s) of training, and training providers are recorded on a worker training and instruction form.
- We also keep records of workers' training provided by third-party trainers.
- We have Safety Data Sheets (SDS) available onsite for workers to review.
- Other: _____

NOTES:

SUBCONTRACTOR'S ACKNOWLEDGEMENT

We acknowledge the following:

- Wright Brothers is the first and only **OSHA VPP** verified contractor in Region X.
- All subcontractors are **required** to actively participate in the VPP program and to voice their safety concerns and suggestions to improve safety.
- **Safety is a core value** for Wright Brothers, and each worker's number one responsibility is to go home safe each day to their family. If you see something unsafe – say something.
- **Wright Brothers does not allow any work to be performed that can cause harm or injury to workers.**
- We agree to comply with all applicable OSHA VPP standards and Wright Brothers safety requirements.

Signature _____

Date _____

Title: _____