



NEW EMPLOYEE
SAFETY ORIENTATION PACKET
FOR FIELD EMPLOYEES

Safety Orientation Policy and Training

Safety Policy Statement and Responsibilities

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COMPANY SAFETY ORIENTATION FOR NEW EMPLOYEES

1. **Personal Protection and Related Equipment**
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The safety policy of Wagner-Meinert, Inc. is to ensure the health, safety and well being at work, of every employee, contractor, trainee, visitors, in so far as is reasonably practicable.

The Wagner-Meinert, Inc. management is committed to providing and maintaining a safe place of work, safe systems of work, safe equipment and safe procedures and in accordance with relevant legislation.

The management of Wagner-Meinert, Inc. is committed to the promotion of the health and safety of all employees, contractors, visitors, trainees and employees and therefore will:

- comply with statutory legislation and codes of practice relating to health, safety and welfare at work;
- ensure that all management and employees are adequately, informed, trained and equipped to carry out their work in a safe manner;

- ensure that all employees are made aware of their duty to co-operate with this policy;
- ensure that this policy is reviewed on a regular basis and that relevant amendments are brought to the attention of all employees, contractors, visitors, trainees.

In order for a safety program to be effective, it is vital that rules are established and monitored by responsible individuals, and implemented at all levels of employment.

The following are some of the general rules applicable to operations, that must be enforced on every project contracted by our company. This is a partial listing only. The pertinent requirements of OSHA Regulations CFR, Part 1926 Safety and Health Regulations for Construction with CFR29 Part 1910 Safety and Health Regulations for General Industry, the Clean Air Act, and others also apply to this firm's operations.

The majority of the work performed by Wagner-Meinert, Inc. is done on site. This is to say that the physical property is managed by someone other than Wagner-Meinert, Inc. It is imperative that our employees adhere to the Wagner-Meinert, Inc. safety policies and that of our customers. Where the policies of Wagner-Meinert, Inc. are more stringent than the policies in effect on site, Wagner-Meinert, Inc. employees and sub-contractors are required to adhere to the policies of Wagner-Meinert, Inc.

1. Personal Protection and Related Equipment

- a. Personal protective equipment must be worn by employees as prescribed for each job by the supervisor.
- b. Employees must check with their supervisor(s) regarding any portion(s) of their job that they do not understand. **DO NOT ATTEMPT AN OPERATION WITHOUT FIRST IDENTIFYING THE DANGERS OF THE OPERATION.**
- c. Goggles, face shields, safety glasses, and other equipment shall meet the eye and face protection needs of the employee for each task.
- d. Hard hats must be worn by all employees at all times in all work areas requiring them.
- e. Gloves are to be used when handling materials, and for protection against acids and other chemicals which could injure employees skin.
- f. Respiratory equipment in many cases is needed for protection against toxic and hazardous fumes and dust. Employees that may be exposed will be trained in respiratory protection per the written respiratory protection program. Employees engaged in Emergency Response activities are required to have a minimum of 24 hours training and 8 hours of refresher training (annually).

- g. Safety shoes are recommended to help prevent toe and foot injuries.
- h. The use of Full Body Harnesses is required when working on elevated work where there is no guardrail protection and on certain suspended scaffolds. (See the written fall protection program).
- i. Employees are expected to utilize proper judgment in their personal habits. When they report to work each morning they must be in fit condition to meet daily obligations.
- j. Be aware of what all subcontractors are doing and what hazards they are creating.

2. Barricades and Hole Covers

- a. Excavations and openings in working surfaces must be protected with barricades or hole covers.
- b. Barricades and/or signs shall always be provided as warning of hazards such as overhead work, crane swing, and excavations.
- c. When a hole or floor opening is created during the performance of a work activity, it shall be protected with a standard railing.
- d. Floor openings shall be guarded by a standard railing and toe boards on all exposed sides except at entrance to stairways.

3. Fire Prevention

- a. Wagner-Meinert, Inc. has an active Hot Work Permit Program as do the majority of our customers. Always follow Hot Work procedures when welding, cutting, or using any equipment when may supply an ignition source.
- b. When utilizing heat producing equipment, make sure that the area is clear of all fire hazards and that all sources of potential fires are eliminated.
- c. Do not use a salamander or other open flamed device in confined or enclosed structures.
- d. Vent heaters to the atmosphere and make sure they are located an adequate distance from walls, ceilings and floor.
- e. Have fire extinguishers available at all times where heat-producing equipment is used.
- f. Know the location of fire fighting equipment in the work area and have a knowledge of

its use and application in case of fire.

- g. Turn in all fire extinguishers for recharge after each use. Inspect periodically when not in use. Make sure the extinguishers you have are rated for the environment you will be working in.

4. Excavations

- a. Excavations, trenches or cuts more than 5 feet in depth require shoring, sloping of the ground or some other hold-back means.
- b. Excavations must be checked daily by a competent person for cracks, slides and scaling. During rain, snow and other hazardous weather conditions, checks should be performed more often.
- c. Heavy equipment must be kept back from edges of all excavations.
- d. An adequate means of exit for excavations 4 feet or more in depth (ladders or steps) should be located within 25 feet or lateral travel.
- e. Excavated or other material must be stored at least 2 feet or more from the edge of the excavation.

5. Compressed Gas Cylinders

- a. All gas cylinders shall have their contents clearly marked on the outside of each cylinder.
- b. Cylinders must be placed and secured in an upright position, with valve protection caps in place, during storage and transfer.
- c. Cylinder valves must be protected with caps or guards when not in use.
- d. All leaking or defective cylinders must be removed from service promptly, tagged as inoperable and placed in an open space removed from the work area.
- e. All operators are required to inspect equipment regulators to ensure they are in proper working order.
- f. Oxygen and gas cylinders placed in storage are to be kept 20 feet apart or have the fire barrier between them.
- g. Full and empty cylinders are to be stored separately and protected from excess heat, snow, ice or physical damage. Tag all cylinders when empty.

- h. All cylinders are to be secured with a minimum of two chains. Tie wire is not appropriate for cylinder storage. Chains are not to be tied around the neck of the cylinder.

6. Housekeeping

- a. Proper housekeeping is the foundation for a safe work environment. It prevents accidents and fires, and creates a business-like work area.
- b. Pile or store material in a stable manner so that it will not be subject to falling.
- c. Rubbish, scraps and debris shall be removed from the work area as soon as practical.
- d. Do not leave materials and supplies in stairways, walkways, near floor openings or at the edge of the building when exterior walls are not build.
- e. Containers for flammable or harmful substances shall be provided with covers.
- f. Never block safety signs.

7. Ladders and Scaffolds

- a. Use of ladders with broken or missing rungs or steps, broken or split side rails, or with other faulty or defective construction is prohibited.
- b. Straight ladders shall be placed on a firm base at a 4-1 pitch extending a minimum of 36 inches above the landing and be tied off, held or nailed down for stability.
- c. Erection crews must check each scaffold member during erection defective parts are not to be used for scaffold fabrication.
- d. All working decks of scaffolds shall be provided with proper handrails, mid-rails and toe boards. If this is not possible, then full safety harnesses must be worn by employees working on the scaffold.
- e. Planks shall extend over the end supports by not less than 6 inches nor more than 12 inches.
- f. Tube and frame scaffolds must be tied to the structure at intervals of 30 feet horizontally and 26 feet vertically.
- g. The height of mobile scaffolds shall not exceed four times the minimum base dimension. Casters shall have positive locking devices.

8. Rigging

- a. Rigging is essential for moving construction materials and equipment and, at the same time, keeping them under control.
- b. Never swing loads over the heads of workers in the area.
- c. Only trained flagmen and signalmen are to direct rigging operations, using established hand signals that are standard for the industry.
- d. Tag lines must be used to control rigged loads.
- e. Do not overload any part of your rigging. Check loads just off the ground for balance and stability before hoisting.
- f. Never leave a suspended load unattended.
- g. Never allow loads, booms or rigging to approach within 10 feet of energized electrical lines rated 50KV or lower unless the lines are de-energized. For lines rated greater than 50 KV, follow OSHA regulations.
- h. Always operate cranes on firm, level ground or use mats, particularly for near-capacity lifts.
- i. Rope off or barricade a space equivalent to the swing radius of the rear of the rotating structure 360 degrees around all cranes operating on your jobsite.

9. Welding and Cutting

- a. Wagner-Meinert, Inc. has an active Hot Work Permit Program as do the majority of our customers. Always follow Hot Work procedures when welding, cutting, or using any equipment when may supply an ignition source.
- b. Always clear area below cutting or welding operations to keep hot slag from dropping on hoses, cables or employees.
- c. Use properly shaded welding helmets and burning goggles for eye protection and to prevent flash burns. Always wear eye protection to guard against slag while chipping, grinding and dressing welds.
- d. Use only manual electrode holders specifically designed for arc welding.

- e. Make sure that all parts subject to electrical current are fully insulated against the maximum voltage to ground.
- f. Make sure that the ground return cable has a safe current carrying capacity equal to, or exceeding, the specified maximum output capacity of the arc welding unit that it services.
- g. Make sure welding lugs are covered with approved covers.
- h. Place cables, leads and connections so that there are no fire or tripping hazards.
- i. Shield all arc welding and cutting operations with noncombustible or flameproof screens to protect employees, and others from direct arc rays.
- j. Keep suitable fire extinguisher readily available when welding or cutting.
- k. Be sure that proper ventilation is provided whenever welding, cutting or heating operations are performed in a confined space.
- l. Gas drive welders should only be used in well ventilated areas.
- m. Remove electrical cords from the splatter area to prevent the burning of the wire insulation.

10. Tools

- a. It is important that the right tool is used for the job and that it is used in a correct manner.
- b. Keep tools in good working condition. Tag all defective tools. Damaged, worn or defective tools can cause injuries and should be returned to the shop for repairs as soon as possible.
- c. Do not use tools until you have been properly instructed and authorized to do so.
- d. Never remove machinery or equipment guards. They are there for a purpose.
- e. Tag and return defective tools for repair by qualified employees.
- f. Inspect electrical extension cords and other wiring to be certain they are properly insulated. Do not use frayed or damaged cords.
- g. Take special precautions when using power tools on a scaffold or other locations with limited movement area. Get good footing, use both hands, keep cords clear or

obstructions, and do not over-reach.

- h. Be sure that a power tool is off and motion stopped before setting tool down.
- i. Disconnect tool from power source before changing drills, blades or bits or attempting repair or adjustment. Never leave a running tool unattended.
- j. Do not use compressed air for cleaning purposes except when pressure is reduced to less than 30 psi and then only with proper personal protective equipment.

11. Industrial Hygiene and Occupational Health

- a. Potable water shall be provided at all sites in approved closed containers with disposable cups.
- b. Toilets with self-closing doors, latch, and toilet paper shall be provided as required for the number of workers on the jobsite.
- c. First aid kits must be provided at each jobsite, and if a medical facility is not readily accessible, then a person with a valid First Aid Certificate must be present.
- d. Employees must be protected against exposure to harmful sound levels by controlling exposure or by use of the proper personal protective equipment.
- e. Employees must be protected against exposure to ionizing (x-ray, radioactive) and non-ionizing (laser beam) radiation.
- f. Protection against exposure to harmful gases, fumes, dust, and similar airborne hazards must be furnished through proper ventilation or personal respiratory equipment.

12. Motor Vehicles and Mechanized Equipment

- a. All equipment left unattended at night adjacent to highways or construction areas shall have lights, reflectors, and/or barricades to identify location of the equipment.
- b. Operator personnel shall inspect all machinery and equipment prior to each use, and during use to make sure it is in safe operating condition.
- c. Rated load capacities and recommended rules of operation shall be conspicuously posted on all equipment at the operator's station.
- d. Wire rope with broken wires or evidence of wear, kinking, crushing, hoist caging or heat damage shall be taken out of service.

- e. An accessible fire extinguisher of 5 BC rating or higher shall be available at all operator stations.
- f. When vehicles or mobile equipment are stopped or parked, parking brakes shall be set. Equipment parked on inclines shall have wheels chocked as well as having parking brakes set.
- g. All vehicles or combinations of vehicles shall be checked at the beginning of each shift for safe operating condition of all mechanical and safety systems.
- h. Maintain vehicles and equipment at specified intervals in accordance with the maintenance manual provided by the manufacturer. Vehicles are equipped with seat belts and are used by drivers and passengers when vehicle is in motion.
- i. Operators shall not back up motorized equipment having an obstructed rear view unless the vehicle has an audible reverse signal alarm or when an observer signals that it is safe to do so.
- j. Vehicles are not to be operated while under the influence of alcohol, medication, or controlled substances.

13. Hazard Communication

- a. Employees have been informed of the requirements of the OSHA Hazard Communication Standard and any operations in their area where hazardous chemicals are present.
- b. Employees are aware of the location and availability of the company written hazard communication program and location of the list(s) of hazardous chemicals present at the jobsite.
- c. Material Safety Data Sheets (MSDSs) are available for all chemicals used and employees know where these MSDSs are kept.
- d. All containers of chemicals are properly labeled either with the manufacturers or importers warning label or tagged or marked with the identity of the chemical therein and appropriate hazard warning.
- e. All employees have been trained in the container labeling system used at their worksite and how to interpret the information on a MSDS.
- f. At multi-employer worksites, procedures are established to inform other employers of the chemicals their employees may come in contact with, the labeling system used

identify chemicals and MSDSs on chemicals present at the jobsite are interchanged.

14. Written Programs

- a. Wagner-Meinert, Inc. has established numerous programs and policies in accordance with OSHA, EPA, and industry practices (IIAR). These policies are outlined in individually labeled sections of the Wagner-Meinert, Inc. Safety Manual. (These are available on www.wagner-meinert.com)
- b. Written MSDS Books Manuals are located in every gang box and service vehicle.

15. Drug Free Workplace

- a. Wagner-Meinert abides by the Indiana State Pipe Trades Association / Mechanical Contractors Association of Indiana Statewide Drug and Alcohol Testing Policy and Program.
- b. All accidents will require post accident drug test immediately upon medical attention or reasonable cause.

16. Respiratory Protection Program

- a. Wagner-Meinert, Inc. has determined that some of its employees may be exposed to airborne concentrations of hazardous materials at or above established action levels while performing their job duties at various job sites. It has been established that engineering controls to reduce worker exposure below established action levels will be in force at all times. The purpose of this program is to protect our workers at job sites from respiratory hazards.
- b. This respiratory protection program applies to all company employees who are required to wear respirators while working at this job site and to those who choose to wear respirators on a voluntary basis. Company employees who wear dust masks are not subject to the medical evaluation, cleaning, storage and maintenance provisions of this program.
- c. All new employees are required to fill out the Respirator Medical Questionnaire and all employees annually thereafter. Some jobs may require that respirators be worn. Before we can fit test and qualify you for a respirator the following questionnaire must be filled out and returned to Wagner-Meinert HR department directly to the Safety Director. This questionnaire is sent off to a medical group where it is evaluated. If the evaluation has any issues you will be contacted directly with direction on how to proceed with a recommendation the medical group may make to you. This questionnaire is confidential information that only the HR department and Safety Director will see. Answer all questions honestly and to the best of your ability.

(See the following pages for the questionnaire (Pages 13-19))



Appendix 12A: Respirator Medical Questionnaire

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To the employer: Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination.

To the employee:

Can you read (circle one): Yes / No

Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

Part A. Section 1. (Mandatory) The following information must be provided by every employee who has been selected to use any type of respirator (please print).

1. Today's date: _____
2. Your name: _____
3. Your age (to nearest year): _____
4. Sex (circle one): Male / Female
5. Your height: _____ ft. _____ in.
6. Your weight: _____ lbs.
7. Your job title: _____
8. A phone number where you can be reached by the health care professional who reviews this questionnaire (include the Area Code): _____
9. The best time to phone you at this number: _____
10. Has your employer told you how to contact the health care professional who will review this questionnaire (circle one): Yes / No
11. Check the type of respirator you will use (you can check more than one category):
 - a. _____ N, R, or P disposable respirator (filter-mask, non-cartridge type only).
 - b. _____ Other type (for example, half- or full-face piece type, powered-air purifying, supplied-air, self-contained breathing apparatus).
12. Have you worn a respirator (circle one): Yes / No

If "yes," what type(s): _____

Part A. Section 2. (Mandatory) Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month: Yes / No

2. Have you ever had any of the following conditions?

Seizures (fits): Yes / No

Diabetes (sugar disease): Yes / No

Allergic reactions that interfere with your breathing: Yes/No

Claustrophobia (fear of closed-in places): Yes / No

Trouble smelling odors: Yes / No

3. Have you ever had any of the following pulmonary or lung problems?

Asbestosis: Yes / No

Asthma: Yes / No

Chronic bronchitis: Yes / No

Emphysema: Yes / No

Pneumonia: Yes / No

Tuberculosis: Yes / No

Silicosis: Yes / No

Pneumothorax (collapsed lung): Yes / No

Lung cancer: Yes / No

Broken ribs: Yes / No

Any chest injuries or surgeries: Yes / No

Any other lung problem that you've been told about: Yes / No

4. Do you currently have any of the following symptoms of pulmonary or lung illness?

Shortness of breath: Yes / No

Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes / No

Shortness of breath when walking with other people at an ordinary pace on level ground: Yes / No

Have to stop for breath when walking at your own pace on level ground: Yes / No

Shortness of breath when washing or dressing yourself: Yes / No

Shortness of breath that interferes with your job: Yes / No

Coughing that produces phlegm (thick sputum): Yes / No
Coughing that wakes you early in the morning: Yes / No
Coughing that occurs mostly when you are lying down: Yes / No
Coughing up blood in the last month: Yes / No
Wheezing: Yes / No
Wheezing that interferes with your job: Yes / No
Chest pain when you breathe deeply: Yes / No
Any other symptoms that you think may be related to lung problems: Yes / No

5. Have you ever had any of the following cardiovascular or heart problems?

Heart attack: Yes / No
Stroke: Yes / No
Angina: Yes / No
Heart failure: Yes / No
Swelling in your legs or feet (not caused by walking): Yes / No
Heart arrhythmia (heart beating irregularly): Yes / No
High blood pressure: Yes / No
Any other heart problem that you've been told about: Yes / No

6. Have you ever had any of the following cardiovascular or heart symptoms?

Frequent pain or tightness in your chest: Yes / No
Pain or tightness in your chest during physical activity: Yes / No
Pain or tightness in your chest that interferes with your job: Yes / No
In the past two years, have you noticed your heart skipping or missing a beat: Yes / No
Heartburn or indigestion that is not related to eating: Yes / No
Any other symptoms that you think may be related to heart or circulation problems: Yes / No

7. Do you currently take medication for any of the following problems?

Breathing or lung problems: Yes / No
Heart trouble: Yes / No
Blood pressure: Yes / No
Seizures (fits): Yes / No

8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator, skip the following and go to question 9)

Eye irritation: Yes / No

Skin allergies or rashes: Yes / No

Anxiety: Yes / No

General weakness or fatigue: Yes / No

Any other problem that interferes with your use of a respirator: Yes / No

9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire: Yes / No

Questions 10 to 15 below must be answered by every employee who has been selected to use either a full-face piece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

10. Have you ever lost vision in either eye (temporarily or permanently): Yes / No

11. Do you currently have any of the following vision problems?

Wear contact lenses: Yes / No

Wear glasses: Yes / No

Color blind: Yes / No

Any other eye or vision problem: Yes / No

12. Have you ever had an injury to your ears, including a broken ear drum: Yes / No

13. Do you currently have any of the following hearing problems?

Difficulty hearing: Yes / No

Wear a hearing aid: Yes / No

Any other hearing or ear problem: Yes / No

14. Have you ever had a back injury: Yes / No

15. Do you currently have any of the following musculoskeletal problems?

Weakness in any of your arms, hands, legs, or feet: Yes / No

Back pain: Yes / No

Difficulty fully moving your arms and legs: Yes / No

Pain or stiffness when you lean forward or backward at the waist: Yes / No

Difficulty fully moving your head up or down: Yes / No

Difficulty fully moving your head side to side: Yes / No

Difficulty bending at your knees: Yes / No

Difficulty squatting to the ground: Yes / No

Climbing a flight of stairs or a ladder carrying more than 25 lbs: Yes / No

Any other muscle or skeletal problem that interferes with using a respirator: Yes / No

Part B Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen: Yes / No
2. If "yes," do you have feelings of dizziness, shortness of breath, pounding in your chest, or other symptoms when you're working under these conditions: Yes / No
3. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals: Yes / No
4. If "yes," name the chemicals if you know them: _____

5. Have you ever worked with any of the materials, or under any of the conditions, listed below:

Asbestos: Yes / No

Silica (e.g., in sandblasting): Yes / No

Tungsten/cobalt (e.g., grinding or welding this material): Yes / No

Beryllium: Yes / No

Aluminum: Yes / No

Coal (for example, mining): Yes / No

Iron: Yes / No

Tin: Yes / No

Dusty environments: Yes / No

Any other hazardous exposures: Yes / No

6. If "yes," describe these exposures: _____

7. List any second jobs or side businesses you have: _____

8. List your previous occupations: _____

9. List your current and previous hobbies: _____
10. Have you been in the military services? Yes / No
11. If "yes," were you exposed to biological or chemical agents (either in training or combat): Yes / No
12. Have you ever worked on a HAZMAT team? Yes / No
13. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications): Yes / No
14. If "yes," name the medications if you know them: _____
15. Will you be using any of the following items with your respirator(s)?
- HEPA Filters: Yes / No
 - Canisters (for example, gas masks): Yes / No
 - Cartridges: Yes / No
16. How often are you expected to use the respirator(s) (circle "yes" or "no" for all answers that apply to you):
- Escape only (no rescue): Yes / No
 - Emergency rescue only: Yes / No
 - Less than 5 hours per week: Yes / No
 - Less than 2 hours per day: Yes / No
 - 2 to 4 hours per day: Yes / No
 - Over 4 hours per day: Yes / No
17. During the period you are using the respirator(s), is your work effort:
- Light (less than 200 kcal per hour): Yes / No
- If "yes," how long does this period last during the average
 shift: _____ hrs. _____ mins.
- Examples of a light work effort are sitting while writing, typing, drafting, or performing light assembly work; or standing while operating a drill press (1-3 lbs.) or controlling machines.

Moderate (200 to 350 kcal per hour): Yes / No

If "yes," how long does this period last during the average

shift: _____ hrs. _____ mins.

Examples of moderate work effort are sitting while nailing or filing; driving a truck or bus in urban traffic; standing while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; walking on a level surface about 2 mph or down a 5-degree grade about 3 mph; or pushing a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.

Heavy (above 350 kcal per hour): Yes / No

If "yes," how long does this period last during the average

shift: _____ hrs. _____ mins.

Examples of heavy work are lifting a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; shoveling; standing while bricklaying or chipping castings; walking up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).

18. Will you be wearing protective clothing and/or equipment (other than the respirator) when you're using your respirator: Yes / No

19. If "yes," describe this protective clothing and/or equipment: _____

20. Will you be working under hot conditions (temperature exceeding 77 deg. F): Yes / No

21. Will you be working under humid conditions: Yes / No

22. Describe the work you'll be doing while you're using your respirator(s): _____

23. Describe any special or hazardous conditions you might encounter when you're using your respirator(s) (for example, confined spaces, life-threatening gases): _____

24. Provide the following information, if you know it, for each toxic substance that you'll be exposed to when you're using your respirator(s):

Name of the first toxic substance(s): _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

Name of the second toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

Name of the third toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

The name of any other toxic substances that you'll be exposed to while using your respirator:

25. Describe any special responsibilities you'll have while using your respirator(s) that may affect the safety and well-being of others (for example, rescue, and security):

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This program was initially developed on September 11, 2000, replacing the former Safety Orientation and Training Program entirely.

Revision or Review No. 1 (September 11, 2000)

Revision or Review No. 2 (January 18, 2001)

Revision or Review No. 3 (January 10, 2002)

Revision or Review No. 4 (January 11, 2003)

Revision or Review No. 5 (January 15, 2004)

Revision or Review No. 6 (January 10, 2005)

Revision or Review No. 7 (January 3, 2006)

Revision or Review No. 8 (June 27, 2007)

Revision or Review No. 9 (September 6, 2007)

Revision or Review No.10 (January 16 2009)

Revision or Review No.11 (September 6, 2011)

PERSONNEL:

The Owners have the ultimate responsibility for the Safety Orientation and Training Program. They have designated the Safety Director to manage the Safety Orientation and Training Program. The Safety Director determines whether an accident requires investigation and establishes the Team Leader and Team Membership.

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SAFETY POLICY STATEMENT AND RESPONSIBILITIES

SAFETY POLICY STATEMENT:

It is the desire of Management to protect employees from accidental injury and damage to health while working for our organization. At the management level, we are committed to provide a safe and healthy worksite. In return we expect you, the employee, to support the established safety policies and to cooperate fully with the procedures and practices which have been implemented to ensure everyone's safety. Injured employees are returned to work as soon as medically possible. (See the Transitional Duty Program).

Certain construction operations require the presence of a competent person. The construction section of the OSHA Act defines a competent person as one "...who is capable of identifying existing and predictable hazards in the surroundings or working conditions which are unsanitary, hazardous or dangerous to employees, and who has authorization to take prompt corrective measures to eliminate them."

The important part of this definition is that the "competent person" must have the authority to take immediate action to take prompt corrective measures. The foreman is the person at the jobsite who has this authority. It is also the responsibility of everyone on the jobsite to inform the foreman of any hazardous conditions which exist. Everyone has the responsibility to maintain a safe work environment.

Also, OSHA does not consider an individual competent until the individual, in addition to meeting the requirements of the definition, has been properly designated as a "competent person" by the employer. Wagner-Meinert, Inc. has designated all foremen, servicemen, Superintendents, Journeyman, Apprentices, Project Managers, and our Safety Coordinator as "competent persons".

All of us, from the management on down, have a responsibility to safety. These responsibilities, outlined below, must be understood and supported by all employees in order for our safety program to be effective.

RESPONSIBILITIES

1. Management

- a. Provide visible top management involvement in implementing and enforcing the company safety and health program.
- b. Assign safety responsibilities to employees at all levels to ensure the responsibilities are understood and that essential tasks are performed.
- c. Establish safety rules and procedures designed to protect the employees and others associated with a project.
- d. Communicate a clear goal for the safety and health program, and define objectives for meeting that goal as part of the management's commitment to a safe and healthy workplace.
- e. Commit the necessary personnel with enforcement authority and resources to ensure employee safety.
- f. Discipline any employee disregarding the company safety procedures.
- g. Conduct reviews on the effectiveness of the safety program to include jobsite inspections, record keeping procedures and to evaluate how well the goals and objectives are being met.
- h. Encourage employee involvement in the review and updating of the company safety program to ensure their commitment and support for a safe work place.
- i. Maintain a working knowledge of OSHA, EPA and IOSHA regulations and modify company safety polices to reflect those changes.
- j. Hold monthly documented safety meetings to train employees on hazards which may arise in our workplace.
- k. Clarify any areas of the company safety programs that are not clearly defined.

2. Safety Director / Safety Committee

A safety committee is employed who is responsible for implementing the company safety programs. WMI has designated a responsible individual, Vern Sanderson, as our company safety Director. The Safety Committee will manage the following activities:

- a. Provide to all levels of management the services and technical advice needed for proper administration of the Safety Program.
- b. Establish procedures and guidelines for safety program(s) and update as necessary.
- c. Maintain current knowledge of federal, state and local regulations and maintain outside professional contracts.

- d. Be available regularly during pre-construction and construction for the purpose of inspection to determine compliance with OSHA regulations and project safety rules.
- e. Review all accidents and injury reports and maintain accident information.
- f. Make analysis of statistical data. Identify problem areas and make recommendations for solutions.
- g. Coordinate safety training activities.
- h. Prepare and distribute reports on the status of safety to executive management.
- i. Recommend programs and activities that will develop and maintain incentives for, and motivation of employee safety.
- j. Maintain technical guidelines and safety recommendations for special exposure situations.
- k. Maintain written Hazard Communication Program for the company.
- l. Ensures Material Safety Data Sheets (MSDSs) are received from the supplier and properly filed in the company MSDS binders and distributed to all remote binders.
- m. Provides necessary MSDSs to each worksite according to chemicals used.

3. Project Manager/Superintendent

- a. Is familiar with safety regulations related to his area of responsibility.
- b. Plans work to ensure that the employees, materials, tools, and equipment are available to perform and work safely.
- c. Notifies the Safety Director of any unusual or special safety or health hazards on the job.
- d. Requires all subcontractors and sub-contractors personnel to comply with applicable WMI safety regulations.
- e. Directs and coordinates safety activities applicable to the project.
- f. Assures that foremen are aware of and comply with requirements for safe practices and conditions to be maintained on jobsites.
- g. Reviews all accidents with the foremen and Safety Coordinator, submit accident reports and ensure corrective action is taken to alleviate the cause.
- h. Monitors employee safety training.
- i. Assures required safety posters are available and posted at the jobsite.
- j. Maintains Material Safety Data Sheets (MSDSs) for all chemicals used on the jobsite and coordinates with other employers as to location and availability of their MSDSs.
- k. Insures that all weekly jobsite safety meeting notes are signed and returned to the office.

4. Office

- a. Maintains all records of accidents that have taken place during company operations on forms designated by OSHA, insurance company and other authorized agencies.
- b. Processes all paperwork associated with accidents, on site inspections and in-house audits. Maintains permanent record for company files.

- c. Prepares all notices required by OSHA, State and other appropriate agencies for posting at each construction project location in accordance with designated time regulations. (Example: OSHA Form 200, Log and Summary of Occupational Injuries and Illnesses).

5. Foreman

- a. Is familiar with and enforces established safety procedures applicable to company operations on the jobsite.
- b. Instructs the workers to follow safe work practices.
- c. Maintains safe conditions throughout the job.
- d. Makes available the necessary personnel protective equipment, job safety materials and first aid supplies.
- e. Assures that safety devices and proper protective equipment are used by persons under his supervision.
- f. Develops a cooperative attitude toward safety by setting a good example.
- g. Continuously watches for unsafe physical conditions and unsafe workers behavior and corrects immediately and files a weekly Job Safety checklist.
- h. Assures that accidents and injuries are treated and reported properly.
- i. Investigates all accidents, obtains all pertinent data, files a complete report, and initiates corrective action.
- j. Maintains an effective, positive line of communication regarding safety matters to the workforce.
- k. Conducts weekly jobsite safety and HAZCOM training classes.
- l. Attends monthly safety meetings
- m. Conducts jobsite safety inspections as necessary, and files inspection checklist and report to the office.

6. All Employees

- a. Thoroughly understand the work to be done and the safety precautions that apply.
- b. Report any unsafe condition, act or equipment to immediate supervisor/foreman. If the condition persists report it to the Safety Coordinator.
- c. Use the required safety devices and proper personal protection safety equipment.
- d. Works according to the company and project safety rules to avoid endangering themselves, fellow workers or the public.
- e. Question any procedure believed to be unsafe. Always look at ways to improve safety.
- f. Report all accidents and injuries to the supervisor/foreman immediately.
- g. Assist in making the job as safe as possible.
- h. Attend weekly jobsite safety meetings.

7. Subcontractors

- a. The provisions of all safety responsibilities apply to subcontractors and their employees working on projects for this company.
- b. Report any unsafe condition or actions.
- c. Inform project manager/superintendent of all injuries to subcontractor's employees.
- d. Have available and provide copies, prior to the introduction of the materials to the jobsite, of Material Safety Data Sheets (MSDS) for all materials/chemicals used on the jobsite that require a MSDS.
- e. Attend weekly jobsite safety meeting.

This program was initially developed on September 13, 1993, replacing the former Safety Policy Statement and Responsibilities Program entirely.

Revision No. 1 (September 13, 2000)

Revision or Review No. 2 (January 15, 2001)

Revision or Review No. 3 (January 10, 2002)

Revision or Review No. 4 (January 11, 2003)

Revision or Review No. 5 (January 15, 2004)

Revision or Review No. 6 (October 8, 2004)

Revision or Review No. 7 (December 16, 2004)

Revision or Review No. 8 (January 10, 2005)

Revision or Review No. 9 (January 3, 2006)

Revision or Review No. 9 (June 26, 2006)

Revision or Review No. 10 (September 6, 2007)

Revision or Review No. 11 (March 18, 2008)

Revision or Review No. 12 (October 15, 2010)

Revision or Review No. 13 (October 13, 2011)

I have reviewed the Wagner-Meinert, Inc. Written Safety Orientation Program and I understand its contents. I also understand that safety is my responsibility. I have reviewed this safety orientation program.

I know where the Material Safety Data Sheets can be located.

I understand the safe work procedures and precautions to be taken when working with products, tools, equipment, including the use of personal protective equipment.

I know where emergency supplies are kept.

I am aware I may review the hazard chemical list that is located in the front of the MSDS binders. I am aware that the written safety program is available and where they are located.

I have read and understand the company safety rules set forth by Wagner-Meinert, Inc. to insure my safety.

Print Name: _____ Date: _____

Signature: _____

Drivers License
No.: _____ State: _____