

JMU Facilities Management Excavation/ Trenching Project Information (Daily)

Location/Reason/Work Order #:		Date/Time:	
Miss Utility Work Order Number:		Date/Time:	
Miss Utility Area Marked:		Date/Time:	
JMU Risk Management Work Notification:		Date and Time:	
Project Manager:	Contact Info:		
Project Competent Person: (must stay on site)	Contact Info: <input type="checkbox"/> Has authority to take quick action to eliminate hazards or stop work		
Site Inspection Complete Prior to start of work		<input type="checkbox"/>	
Excavation Depth:	Required Actions:		
<input type="checkbox"/> Less than 4 feet or personnel will not be entering	Contact Miss Utility only. Remainder of this assessment form does not need to be completed provided there are no additional hazards, such as potential cave-in, high traffic areas.		
<input type="checkbox"/> Between 4 and 20 feet	Continue to complete this form. When project complete, connect to AiM and copy to riskmanagement@jmu.edu		
<input type="checkbox"/> >20 feet	Contact Project Manager for further instructions		
Hazard	Specify Control Measure (N/A if not applicable)		
Warning System Established	<input type="checkbox"/> Employees understand what signals will be used to evacuate		
Assume all soil on campus is Class C			
Cave-In:	<input type="checkbox"/> Trench Box (Soil is assumed Class C) <input type="checkbox"/> Slope/Bench Soil 1 ½ Height to 1 Vertical		
Surface Encumbrances	<input type="checkbox"/> N/A	<input type="checkbox"/> Removed <input type="checkbox"/> Supported	
Underground Installations	<input type="checkbox"/> N/A	<input type="checkbox"/> Protected/ Supported <input type="checkbox"/> Owner action required	
Access/Egress required at 4 feet	<input type="checkbox"/> N/A	<input type="checkbox"/> Ladder extended at least 3' above edge of trench <input type="checkbox"/> Ramp <input type="checkbox"/> Stairs (within 25 feet)	
Vehicular Traffic	<input type="checkbox"/> N/A	<input type="checkbox"/> Barricades <input type="checkbox"/> Ramp <input type="checkbox"/> Flag Person	
Falling Loads	<input type="checkbox"/> N/A	<input type="checkbox"/> Personnel clear of equipment being loaded	
Mobile Equipment	<input type="checkbox"/> N/A	<input type="checkbox"/> Barricade/stop log <input type="checkbox"/> Signs/Flags <input type="checkbox"/> Signal Person	
Hazardous Atmosphere	<input type="checkbox"/> N/A	<input type="checkbox"/> Forced Air Ventilation <input type="checkbox"/> Respiratory Protection <input type="checkbox"/> Continuous Air Monitor Required	
Water Accumulation	<input type="checkbox"/> N/A	<input type="checkbox"/> Pump <input type="checkbox"/> Safety Harness with life line <input type="checkbox"/> Diversion <input type="checkbox"/> Drainage <input type="checkbox"/> Removal monitored by Comp. Person	
Adjacent Structures	<input type="checkbox"/> N/A	<input type="checkbox"/> Shored <input type="checkbox"/> Braced <input type="checkbox"/> Underpinned <input type="checkbox"/> RPE review	
Loose Rock or Soil	<input type="checkbox"/> N/A	<input type="checkbox"/> Spoil piles and equipment at least 2 feet from edge <input type="checkbox"/> Scaling <input type="checkbox"/> Protective Barrier <input type="checkbox"/> Benching <input type="checkbox"/> Restraint Device	
Fall Protection	<input type="checkbox"/> N/A	<input type="checkbox"/> Barricades 6' from edge <input type="checkbox"/> Guardrails/ Walkways	
Security (Overnight)	<input type="checkbox"/> N/A	<input type="checkbox"/> Fencing/Barricades <input type="checkbox"/> Holes covered <input type="checkbox"/> Warning Signs <input type="checkbox"/> Lighting	
Personal Protective Equipment	<input type="checkbox"/> N/A	<input type="checkbox"/> Work Boots <input type="checkbox"/> Hard Hat <input type="checkbox"/> Safety Glasses <input type="checkbox"/> Vest	
All PPE and Equipment Inspected Daily		<input type="checkbox"/> YES	
In Case of Emergency:			
Other:	JMU 540-568-6911	Work Control: 540-568-6101	Harrisonburg Emergency 911