

Main work Centre

Operation Work Centre:

**PREPARE, DISCUSS AND REVIEW THE JOB PLAN WITH THE CREW
DAILY AND WHENEVER A CHANGE IS INTRODUCED TO THE JOB.**

InScope Supervisor:					Job Order #:				
Location:									
Job Being Performed:									
Feeder:				Equipment Code:					
Permit Type/Number:				Time in Effect:			Time Surrendered:		
Permit Type/Number:				Time in Effect:			Time Surrendered:		
Issuing Authority:				Contact Numbers:					
Permit Holder:				Contact Numbers:					
Date	Crew Members Present	Initials	Initials	Initials		Crew Members Present	Initials	Initials	Initials
Hazard Identification List -SMS Hazards in bold print									
Gravity						Electricity			
Falls from heights		Live apparatus		Equipment Failure		Kinetic/Vehicular		Chemical/Biological	
Falling objects		Induction		Flying objects		Moving loads		Confined spaces	
Falling structures		Back-feed		Tension loads		Traffic conditions		Toxic or poisonous	
Climbing obstructions		Ground gradients		Moving parts		Vehicle stability		Flammable/explosive	
Cave in		Flash potential				Secure loads		Acidic or caustic	
Trees falling		Limits of approach				Over length loads		H2S	
Ice loading		Adj. Lines/ Structures				Angle of terrain		PCB	
Structures conditions		Fault curr. levels				Loading equipment		SF6	
		Second Point of Contact		Sharp protruding objects		Collision/Crashing		Pesticides	
								Hantivirous	
								West Nile	
Have We Considered					Circle or √ Items or use # 1-10				
People		Procedures		Hardware/Equipment		Environment			
Person in charge		Isolation/De-energize		Inspections of equipment		Other utilities-locates			
Qualification of personnel		Test for isolation/potential		Inspection of tools & PPE		Adverse weather			
Other work groups		Grounding & Bonding		Inspection of vehicles		Soil/ice conditions			
Communication		Standard protection code		Safe loads for rigging		Lighting conditions			
Worker fatigue		Live line/electrical		Adequate cover-up		Communication coverage			
Pedestrian control		Rescue procedures		Breathing apparatus		Housekeeping			
General public		Confined space		Hearing protection		Noise (distractions)			
Customer/site hazards		Pole testing		Gas monitors		Slips/trips/falls			
		Aircraft		Crushing/pinch points		Fumes/dust/gas/mist			
		Ground disturbance		Charged energy		Ants/woodpeckers			
		Tree felling		Gas Monitor Device					
		Tagging Apparatus		Rescue Devices					

EMERGENCY PLAN

Identify the exact location for the emergency response:
How will you execute the rescue?
Assess the situation, provide for your own personal protection, assess the injured party's condition, rescue the injured, apply first aid, and call for assistance or transport to nearest hospital or medical facility.
Name of Hospital:

Emergency Numbers: Ambulance Phone Number: _____
 Fire Phone Number: _____
 Police Phone Number: _____

