

Par 3 Landscape and Maintenance

SAFETY PROGRAM

4610 Wynn Road, Las Vegas, NV 89103

Safety Director: 702-253-7878

Contact the Safety Director with any questions regarding this safety program



PAR 3 LANDSCAPE & MAINTENANCE - SAFETY PROGRAM

ACKNOWLEDGMENT OF SAFETY PROGRAM

- I hereby acknowledge that I have been instructed that I can access Par 3 Landscape and Maintenance's, written safety program by going to the Par 3 office located at 4610 Wynn Rd. Las Vegas, NV 89103.
- I understand that it is a Par 3 Landscape and Maintenance employment requirement that I read, understand and abide by the policies and procedures established within the written safety program.
- I understand my responsibilities as an employee in helping the company to achieve the goal of eliminating or mitigating all workplace hazards and creating a work environment that is healthful and safe for me and all other employees of Par 3 Landscape and Maintenance.
- I understand that if I have questions regarding the company's written safety program I can discuss them with my supervisor, manager or the safety director.
- I understand that if I feel I am not receiving proper or sufficient training I should contact the Chief Operating Officer of Par 3 Landscape and Maintenance, or Acting Chairman of the General Safety Committee, or the Safety Director at 702-416-2601.
- I understand that if I notice an unsafe condition or practice I should report or if I have a safety suggestion I would like to recommend, I should complete an employee safety information report and submit it directly to the office. I know I have the right to submit this form anonymously if I so desire.
- I understand the protection offered to employees under the Whistleblower Act.
- **I UNDERSTAND THE CONTENTS OF THIS SAFETY PROGRAM DO NOT CONSTITUTE A CONTRACT OF EMPLOYMENT.** Employment may be terminated at any time either by the employee or employer for any reason not prohibited by law.

Employee's Name Printed: _____ SSN: _____

Employee's Signature: _____ Date: _____

PAR 3 LANDSCAPE & MAINTENANCE - SAFETY PROGRAM

**POLICIES AND PROCEDURES OUTLINED IN OUR SAFETY
PROGRAM ARE SUBJECT TO CHANGE WITHOUT
NOTIFICATION**

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

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PAR 3 LANDSCAPE & MAINTENANCE - SAFETY PROGRAM

STATEMENT OF POLICY ON EMPLOYEE SAFETY

As an employee of Par 3 your top priority should always be safety on all of our jobsites. All reasonable methods, procedures and equipment necessary to achieve this shall be used.

THERE WILL BE NO COMPROMISE WITH SAFETY!

Our goal is to eliminate or mitigate all workplace hazards. This objective will only be met through complete cooperation of all employees to help nurture the safety culture within Par 3. Managers as well as all other employees of Par 3 must assume responsibility for their safety as well as the safety of others.

In order to carry out the safety program in the most effective manner, managers as well as all other personnel in a supervisory position have the responsibility of:

- Providing or making available to every employee the necessary personal protective equipment in order to perform their duties safely.
- Provide all employees with equipment and tools that are in good working condition.
- Provide all employees with necessary training and instruction to perform their duties safely.
- Provide training through new hire orientation; tool box safety meetings performed weekly, posters, handouts, and our written safety program.
- Perform/suggest improved safety methods through observation, investigation, training, or other techniques that are advantageous. All of these suggestions must be approved through the safety committee before they are added or changed in the safety program.

Employees have a crucial role to play in the effectiveness of the safety program, their responsibilities are as follows:

- Observe all safety rules, policies and procedures that are outlined in the safety program or other training they have or will receive.
- Keep work areas free of hazards.
- Wear and use required personal protective equipment.
- Use work habits and attitudes that will protect themselves as well as all other employees.

Paul Jaramillo, Owner

PAR 3 LANDSCAPE & MAINTENANCE - SAFETY PROGRAM

OVERVIEW OF SAFETY PROGRAM

Safety and the prevention of accidents is a priority at Par 3 Landscape and Maintenance. We realize that the only way to have an effective program is to have safety awareness and employee involvement at all levels of the company.

- I. **EMPLOYEE HANDBOOK:** Each employee will receive instructions on how they can access our employee handbook at the office during the hiring process. Our Employee Handbook contains a statement of policy on employee safety. Our employee handbook also states it is required that employees read, understand and follow the procedures and rules outlined in our safety program.
- II. **SAFETY PROGRAM:** Each employee will receive instructions on how they can access the safety program at the office during the hiring process. While the safety program doesn't cover every situation or condition that can arise while working it does serve as an informative document which can be utilized as:
 - A. Statement of company policies and procedures.
 - B. Quick reference.
 - C. Training aid.
- III. **GENERAL SAFETY COMMITTEE:** The committee meets in order to help implement, monitor and improve the health and work hazard prevention program.
- IV. **SAFETY TRAINING SESSIONS FOR FOREMEN:** Safety training sessions will be held for managers and supervisors. It will be conducted by management, safety director or outside sources as deemed appropriate for the topics or training that is needed.
- V. **TOOL BOX MEETINGS:** supervisors shall conduct weekly toolbox meetings (safety meetings) at the jobsites or yards. These trainings will cover a variety of safety topics or concerns throughout the year. Training will be provided to all employees who are present at these meetings; employees will also be required to sign in signifying that they were present for the training.
- VI. **SAFETY POLICY POSTERS:** All posters regarding safety or occupational workplace rights will be posted on company bulletin boards located at the Par 3 office.
- VII. **CHECK ATTACHMENTS:** Safety reminders may be printed on payroll check stubs or attached to payroll checks for a quick review of specific safety information if deemed necessary.
- VIII. **SAFETY INCENTIVES:** The General Safety Committee may offer safety incentives to encourage employee participation in our goal to provide a safe, accident free work environment.

PAR 3 LANDSCAPE & MAINTENANCE - SAFETY PROGRAM

GENERAL SAFETY COMMITTEE

A General Safety Committee has been formed as part of Par 3 safety program. The main purpose of the committee is to help implement, monitor and improve our safety and accident prevention program.

The General Safety Committee members will include the safety director, upper management and field personnel. Meetings will be conducted by the C.O.O. as acting chairman. Minutes will be recorded and kept for a minimum of three years. They will include a record of the date, time and place of meeting. Names of committee members attending the meeting, items discussed and actions recommended will also be recorded.

Functions and responsibilities of the general safety committee are:

- I. Report on unfinished business from the previous committee meeting.
- II. Review accident/injury reports and discuss the causes and corrective/preventative actions needed.
- III. Discuss new recommendations regarding safety and accident prevention if necessary.
- IV. Participate in programs such as: weekly tool box meetings and other training meetings including annual safety training sessions.
- V. Inspect job sites, and equipment to detect unsafe practices, potentially hazardous situations, or the use of unsafe equipment.
- VI. Discuss and recommend improvements to existing safety and health policies, procedures, and rules.
- VII. Discuss and recommend suitable hazard elimination or mitigation measures.
- VIII. Review, discuss and recommend changes when needed in existing work practices or hazard controls.
- IX. Assess implications of changes in work tasks, operations and processes before implementing them.
- X. Monitor and evaluate the effectiveness of safety recommendations and improvements.
- XI. Communicate information to employees regarding safety, health, hazardous materials or hazardous situations through weekly tool box meetings or payroll check notifications.
- XII. Immediately investigate any serious work place accidents.
- XIII. Study and analyze accident and injury data.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ASSIGNMENT OF RESPONSIBILITIES

CHAIRMAN OF GENERAL SAFETY COMMITTEE

The C.O.O. is the Acting Chairman of the General Safety Committee, and is responsible for the implementation of the written safety program. The C.O.O. monitors the effectiveness of our safety program through the General Safety Committee. Discussion of problems and review of injury and accident reports in committee meetings allows the Acting Chairman to assess our safety program and the results of new policies and procedures as they are incorporated into the existing safety program. We have delegated responsibility to aid in the implementation of our safety program as follows:

SAFETY DIRECTOR AND MANAGER RESPONSIBILITIES

Our safety director and managers are responsible for monitoring safe work practices and the implementation of our policies and procedures established in our safety program as they visit job sites. They are responsible for helping to maintain a safe work environment by identifying and correcting unsafe work conditions, practices and procedures.

FOREMAN RESPONSIBILITIES

Our foremen are responsible for monitoring safe work practices and the implementation of policies and procedures established in our safety program as they visit job sites. They are responsible for helping to maintain a safe work environment by identifying and correcting unsafe work conditions, practices and procedures. The foremen are also responsible for training crew leaders in new safety policies and procedures and to help in the implementation of these changes as they occur.

CREW LEADER RESPONSIBILITIES

Crew leaders are responsible for monitoring the implementation of our safety policies and procedures as shown in our safety program at the job site level. It is their responsibility to enforce our safety program and to use reasonable methods, procedures and equipment necessary to achieve a safe work environment and protect employees from injury. The responsibilities of the crew leaders include:

- I. Assessing job sites prior to beginning work to determine potentially hazardous situations or conditions and determining what if any personal protective equipment will be needed by employees. The company task hazard analysis (THA) book is to be completed by foremen as part of this assessment.
- II. Training crew members regarding safety, personal protective equipment, blood borne pathogen and MRSA awareness and hazardous materials prior to beginning work at a job site.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ASSIGNMENT OF RESPONSIBILITIES

- III. On-going training of crew members through weekly tool box meetings held at the job site or yard locations.
 - A. Instructing crew members in the recognition and avoidance of unsafe conditions.
 - B. Training crew members regarding regulations applicable to their work environment to control or eliminate any hazards or other exposure to illness or injury.
 - C. Completing signed records of weekly tool box meetings showing date and place of meeting, crew members in attendance and topics discussed.
 - D. Submitting records to office.
- IV. Maintaining a safe work environment by finding and controlling unsafe work conditions, practices and procedures.
- V. Enforcing use of safety equipment including personal protective equipment as deemed necessary.
- VI. Watching crew members and correcting any unsafe work practices observed.
- VII. Making sure employees handle materials, equipment and tools in a proper and safe manner.
- VIII. Making periodic job site safety inspections.
- IX. Attending safety meetings and training sessions required by management.
- X. Reporting all accidents as specified in our safety program.

HIRING PERSONNEL

Office personnel processing new hires are responsible for giving new employees the appropriate paper work including information on how to access our employee handbook and safety program at the office and ensuring every new hire attends our new hire orientation/safety training prior to reporting to work at a job site.

EMPLOYEE RESPONSIBILITIES

Each employee is responsible for their own safety and the safety of their fellow employees. It is only by each employee becoming familiar with the hazards of their job and doing what is necessary to mitigate them that we can achieve a safe working environment.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ASSIGNMENT OF RESPONSIBILITIES

Par 3 Landscape expects each employee, regardless of their position, to cooperate with every aspect of our safety program. Therefore, it is a condition of employment that each employee:

- I. Read, understand and abide by the policies and procedures outlined in our safety program. Complete, sign and return acknowledgment forms in the company's employee handbook and safety program.
- II. Report physical limitations to ensure they are assigned work they can safely perform.
- III. Comply with prescribed job procedures and instructions given by foremen and supervisors.
- IV. Report all accidents and injuries immediately to their foremen and the safety director no matter how minor they may appear.
- V. Wear the proper personal protective equipment including hard hats, safety glasses, respirators, proper shoes, appropriate clothing and other equipment deemed necessary by the tasks they are performing. There will be no exceptions to this requirement. Failure to comply will result in disciplinary action up to and including termination.
- VI. Report hazardous conditions and other safety concerns immediately to their crew leader, manager or safety director.
- VII. Know what to do in case of an emergency.
- VIII. Contact a crew leader, foreman, manager, or safety director for information if exposed to a material/chemical directly or indirectly and do not know if it is hazardous and/or are concerned about the physical or health hazards associated with it.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

DISCIPLINE AND ENFORCEMENT

It is part of every employee's job to adhere to all safety rules, regulations, policies and procedures which have been adopted for the safety and protection of all employees. Progressive disciplinary actions that will be taken against employees who violate our safety program which has been established to help maintain safe working conditions for all employees and to have employees be responsible for their own actions.

Written safety violation citations will be issued by our safety director, managers, foremen or crew leaders who observe a safety violation being committed. The written safety violation citation is to be signed by the person issuing the citation and also by the employee receiving the citation. Managers have the discretion of issuing a verbal warning in place of a written safety violation citation if the violation is minor. An employee receiving a verbal warning must agree to correct the situation causing the violation.

The person issuing the citation will submit the written safety violation citation to the office within 24 hours where it will be determined what the disciplinary action will be based on the number of written safety violation citations, if any have been previously received. Progressive disciplinary action will be based on the number or severity of written safety violation citations received by an employee during the previous twelve month period.

An employee who has received a written safety violation citation, their foreman and manager will receive a written statement of the disciplinary action to be taken based on the number of citations on file as follows:

- **First Offense:** Employee will receive a written safety violation citation classified as a warning.
- **Second Offense:** Employee will receive a written safety violation citation requiring a one day suspension without pay.
- **Third Offense:** Employee will receive a written safety violation citation requiring a two day suspension without pay.
- **Fourth Offense:** Employee will receive a written safety violation citation requiring discharge and will not be eligible for rehire for a period of three months (90 days).

Refusal to use or wear required safety equipment or serious or willful violations that endanger any person including yourself, other employees or persons can result in immediate discharge.

An employee who receives a written safety violation citation may request that the safety director review the violation with them if they do not feel it was warranted. Our safety director and management will have the authority to void a written safety violation citation if they determine it was not justified.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

SAFETY VIOLATION CITATION

Name of Employee Committing Safety Violation: _____

Describe Safety Violation: _____

Date of Violation: _____ **Where Did Safety Violation Occur:** _____

This written safety violation citation is being issued because of a safety violation which was observed. Progressive disciplinary actions for written safety violation citations received within a twelve month period are as follows:

- **First Offense:** Employee will receive a written safety violation classified as a warning.
- **Second Offense:** Employee will receive a written safety violation citation requiring a one day suspension without pay.
- **Third Offense:** Employee will receive a written safety violation citation requiring a two day suspension without pay.
- **Fourth Offense:** Employee will receive a written safety violation requiring discharge and will not be eligible for rehire for a period of three months (90 days).

Refusal to use or wear required safety equipment or serious or willful violations that endanger any person including yourself, other employees or persons can result in immediate discharge.

Signature of Employee Receiving Safety Violation Citation: _____

Signature of Person Issuing Safety Violation Citation: _____

THIS SECTION WILL BE COMPLETED BY THE OFFICE AND A COPY WILL BE GIVEN TO EMPLOYEE, FOREMAN AND MANAGER FOR ENFORCEMENT

This is your _____ violation received within the past twelve months. As a result your disciplinary action will be:

- warning
- 2 day suspension without pay
- 5 day suspension without pay
- discharge, not eligible for rehire for a three month period

Verified and approved by: _____ Date: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ACCIDENT AND INCIDENT REPORTING GUIDELINES

Listed below are forms to be used as part of our safety program for reporting, investigating and analyzing accidents and incidents. Blank forms are available at the office. Samples of these forms are included in this safety program.

- I. **Form C-1, State of Industrial Insurance System Notice of Injury or Occupational Disease Incident Report Nevada:** It is the injured employee's responsibility to complete this form within 24 hours after an industrial accident/injury if they choose not to seek medical attention. If medical treatment is needed for an industrial injury employees must choose a medical facility from the current provider list. If an employee uses a medical facility **NOT** on the current provider list they will forfeit their benefits and will be responsible for all costs incurred. Form C-1 and current provider lists may be obtained from the office.
- II. **Employee's Report of Injury:** Employees must report all injuries immediately to their crew leader, foreman/manager and the office no matter how minor the injury may appear. As a follow up employees are to complete and submit this form as soon as possible.
- III. **Supervisor's Report of Injury and Investigation:** The injured employee and/or supervisor must notify our office of an injury immediately. As a follow up supervisors are to complete and submit this form as soon as possible. The supervisors investigation of the injury will be guided by the checklist on the back of this form including the following actions as applicable:
 - A. Secure scene if there is a possibility of further injury or damage and preserve evidence.
 - B. Examine and record perishable or transient physical evidence.
 - C. Interview principal persons involved in the incident and witnesses to the incident.
 - D. Examine the injury scene.
 - E. Determine the results of the incident.
 - F. Report the injury.
 - G. Determine the immediate causes of the incident.
 - H. Recommend action needed for corrections and/or prevention of similar injuries.
- IV. **General Safety Committee Accident Follow Up:** Our office's injury claims person will complete the top portion of this form, attach a copy of the employee's Report of Injury and foreman's Report of Injury and investigation and give to C.O.O.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ACCIDENT AND INCIDENT REPORTING GUIDELINES

- A. The Acting Chairman of the General Safety Committee will submit the injury report packages at the following committee meeting.
 - B. The general safety committee will determine what if any action needs to be taken to avoid future injuries of the same nature by discussing any recommended plan of action proposed by the investigating foreman and by trying to determine the underlying causes of the accident. Any actions taken will be documented in the minutes of the meetings.
 - C. The injury packages will be used to watch for trends in kinds of injuries or an increase in frequency of injuries.
- V. **Form C-3 (Employer's Report of Industrial Injury) Nevada:** Our office's injury claims person will complete and submit this form to the appropriate claims administrator for injured employees who seek medical attention within five working days from when the company receives a **Form C-4** from the place medical attention was received.
- VI. **Near Miss/Potential Accident Report:** Foremen are to complete the top portion of this form if they observe a "near miss," see a situation which may potentially cause an accident or if a near miss or potential accident is reported to them by an employee. The General Safety Committee will review the form at the following committee meeting and determine what if any additional action should be taken.
- VII. **Employee Report of Vehicle Accident Involving Company Vehicle:** Any employee involved in an accident while driving a company vehicle must complete and submit this form. All accidents involving a company vehicle must be reported to the police. See section in this Safety Program on our Fleet Safety Program.
- VIII. **Safety Director's Follow Up Report of Vehicle Accident:** Safety director will investigate vehicle accidents and complete this form for review at the next general safety committee meeting.
- VIII. **Incident Report:** Employees are to complete and submit this form if they are involved in or witness an incident or accident in which an employee or company property is involved and a person who is not our employee is injured or there is damage to equipment or property not belonging to our company.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ACCIDENT AND INCIDENT REPORTING GUIDELINES

- X. **Employee Safety Information Report/Safety Suggestion:** Employees are to complete and submit this form if they want to report an unsafe work place condition or practice or if they would like to recommend a safety suggestion to our company.
- XI. **Report of Theft:** Employees are to complete and submit this form to report the theft of company vehicles, equipment, materials, tools or other property. All thefts must be reported to the police.
- XII. **Report of Significant Work Exposure to Bodily Fluids:** Employees must complete and submit this form to our office immediately but in no case later than ten calendar days after significant work exposure to bodily fluids. See section in this safety program on our blood borne pathogens exposure control program.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

MISCELLANEOUS SAFETY PROGRAM FORMS

Listed below are miscellaneous forms which are included in our safety program. Blank forms are available from the office.

- I. **Assessment of hazards necessitating the use of personal protective equipment checklist:** Prior to beginning work at a job site, supervisors are to assess hazards requiring personal protective equipment. This form is to be used as a checklist for the survey to be conducted at the job site and the sources of potential hazards for which they will be watching. See the section in this safety program on our personal protective equipment assessment, selection and training program for more information.
- II. **Personal Protective Equipment Training Checklist:** After a supervisor has completed an assessment of a job site to determine hazards necessitating the use of personal protective equipment and has selected the appropriate personal protective equipment. Each crew member is to be trained on when, what, how, limitations, care and maintenance of the personal protective equipment selected for the job. Supervisors are to use this checklist as a guide.
- III. **Respirator Protection Program Inspection Checklist:** Our safety director will inspect job sites randomly for individual employee and supervisor compliance with our respiratory protection program using this checklist as a guide.
- IV. **Respirator User Medical Clearance:** Employees who will need to use respirators as part of their personal protective equipment will be sent for a medical evaluation prior to using a respirator to determine if they are physically able to perform the work and use the equipment. Respirator users will also be sent for medical examinations periodically as required by Nevada statutes to determine if there have been any changes in their health which would prevent them from using a respirator. Employees are to take our respirator user medical clearance form with them when they go for their medical evaluations. The examining physician will complete the form and return it to the office. See the section in this safety program on our respiratory protection program for more information.
- V. **Job Site Safety Inspection Sheet:** Our job site safety inspection sheet is to be used by our safety director and supervisors during job site visits as an aid in evaluating whether our safety policies and procedures as well as federal and state safety regulations are being followed.

Par 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

MISCELLANEOUS SAFETY PROGRAM FORMS

- VI. **Tool Box Meeting:** Managers are required to conduct weekly tool box meetings at job sites or yard locations to train new and existing employees in general safety guidelines, accident and injury prevention, fall protection, tool/equipment safety, hazardous materials, blood borne pathogens and MRSA awareness, the proper use and kind of equipment needed for specific job sites and conditions, and emergency procedures. All weekly tool box meetings are to be documented by completion of this form. Forms are to be submitted to our safety director for review.
- VII. **Vehicle Maintenance Log:** Employees assigned a company vehicle have the responsibility of keeping it in good repair. Routine servicing and repairs should be recorded on this form and kept in the glove compartment of the vehicle. See the section in this safety program on our fleet safety program for more information on vehicle maintenance.

**Forms shown in this safety
program can be obtained from:**

The office or Safety Director

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

"NOTICE OF INJURY OR OCCUPATIONAL DISEASE" (Incident Report) Pursuant to NRS 616C.015

Name of Employer _____

Name of Employee		Social Security Number	Telephone Number
Date of Accident (if applicable)	Time of Accident (if applicable)	Place where accident occurred (if applicable)	
What is the nature of the injury or occupational disease?		List any body parts involved:	
Briefly describe accident or circumstances of occupational disease: (Note: if you are claiming an occupational disease, indicate the date on which employer first became aware of connection between condition and employment)			
Names of witnesses:			
Did the employee leave work because of the injury or occupational disease? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, when (date and time)?	Has the employee returned to work? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, when (date and time)?
Was first aid provided? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, by whom?	Name and address of treating physician, if applicable or known	
Did the accident happen in the normal course of work? (if applicable) <input type="checkbox"/> YES <input type="checkbox"/> NO			
Was anyone else involved? <input type="checkbox"/> YES <input type="checkbox"/> NO	Names of others involved		

MY EMPLOYER/INSURER MAY HAVE MADE ARRANGEMENTS TO DIRECT ME TO A HEALTH CARE PROVIDER FOR MEDICAL TREATMENT OF MY INDUSTRIAL INJURY OR OCCUPATIONAL DISEASE. I HAVE BEEN NOTIFIED OF THESE ARRANGEMENTS.

Supervisor's Signature

Date

Signature of Injured or Disabled Employee

Date

TO FILE A CLAIM FOR COMPENSATION, SEE REVERSE SIDE, SECTION ENTITLED, CLAIM FOR COMPENSATION (FORM C-4).

For assistance with Workers' Compensation Issues you may contact the Office of the Governor Consumer Health Assistance Toll Free: 1-888-333-1597 Web site: <http://govcha.state.nv.us> E-mail: cha@govcha.state.nv.us

Employee should sign, date and retain a copy.
Original to Employer, Copy to Employee

C-1 (Rev. 11/01)

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE'S REPORT OF INJURY

Employees must report all injuries immediately to their supervisor, no matter how minor the injury may appear. As a follow up employees are to complete and submit this form as soon as possible.

Employees who require medical attention after a work place related injury are required to submit to an alcohol impairment test and a drug test for the unlawful use of any controlled substance prohibited under Nevada's criminal statutes within twenty-four hours after we have been notified of the injury.

INJURED EMPLOYEE'S NAME: _____

Social security number: _____ Position: _____ Birth date: _____

Date of accident: _____ Time of accident: _____ Foreman's name: _____

Location of accident _____

Describe how the accident occurred: _____

What part of your body was injured: _____

Describe your injuries in detail: _____

Who did you report injury to: _____ Date and time injury was reported: _____

Date and time you first sought medical attention: _____

Name of doctor and/or hospital where you first sought medical attention: _____

In your opinion, what if anything, could have been done to prevent this accident _____

In your opinion, what factors contributed to this accident happening: _____

In your opinion, did actions or conditions created by anyone not employed by our company, contribute to your injury happening: yes no. If yes, please give name of person(s) or company and an explanation of events or conditions which you feel contributed to your accident:

Please list names of witnesses: _____

Signature of Injured Employee: _____ Date: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

SUPERVISOR'S REPORT OF INJURY AND INVESTIGATION

The injured employee and/or supervisor must notify our office of an injury immediately. The supervisor is to investigate the cause of the accident and follow up by completing and submitting this form to the office as soon as possible. The supervisor's investigation of the injury will be guided by the checklist as applicable on the back of this form.

INJURED EMPLOYEE'S NAME: _____

Date of accident: _____ Time of accident: _____ Employee's Position: _____

Date and time accident was reported to you: _____

Names of all witnesses: _____

Accident resulted in: injury fatality property damage. Please describe nature of injury or property damage: _____

First aid given: yes no. Medical treatment required: yes no.

Location of accident: _____

Task being performed when accident happened: _____

Describe how accident happened: _____

In your opinion what actions events or conditions contributed most directly to this accident: _____

In your opinion did actions or conditions created by anyone not employed by our company contribute to this accident: yes no. If yes, please give name of person(s) or company and an explanation of events or conditions which you feel contributed to this accident: _____

In your opinion what if anything could have been done to prevent this accident: _____

Recommended corrective measures, additional training or plan of action you would like to recommend to the General Safety Committee as a result of your investigation of this accident: _____

Signature of Supervisor: _____ **Date:** _____

PAR 3 LANDSCAPE & MAINTENACE SAFETY PROGRAM

SUPERVISOR'S REPORT OF INJURY AND INVESTIGATION **CHECKLIST**

- I. SECURE SCENE IF NECESSARY**
 - A. To prevent further injury or damage.
 - B. To preserve evidence.

- II. IF THERE IS PERISHABLE OR TRANSIENT PHYSICAL EVIDENCE**
 - A. Examine immediately.
 - B. Photograph completely.
 - C. Record position with sketches.

- III. INTERVIEW WITNESSES AND PRINCIPAL PERSONS INVOLVED**
 - A. Injured employee.
 - B. Other employees of our company.
 - C. Job related persons.
 - 1. Truck drivers/delivery persons.
 - 2. Equipment operators.
 - 3. Employees of other companies.
 - D. Other witnesses.

- IV. EXAMINE THE INJURY SCENE**
 - A. Reconstruct the occurrence (when warranted).
 - 1. Have witnesses act out the sequence of events.
 - 2. Photograph actors in key events.
 - 3. Photograph entire scene before disturbing evidence.
 - B. Record technical data as applicable.
 - 1. Equipment name, model, manufacturer, year, numbers.
 - 2. Sketch and photograph dials, controls, etc.
 - C. Cite violations of safety regulations.

- V. DETERMINE THE RESULTS OF THE INCIDENT**
 - A. Injuries.
 - B. Fatalities.
 - C. Property damage.
 - D. Other losses.

- VI. REPORT THE INJURY**
 - A. Who?
 - B. What?
 - C. When?
 - D. Where?
 - E. How?

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

VII. DETERMINE THE IMMEDIATE CAUSES OF THE ACCIDENT

- A. Unsafe act (examples)
 - 1. By-passing or removal of safety devices.
 - 2. Horseplay.
 - 3. Ignoring safety rules.
- B. Unsafe condition (examples)
 - 1. Debris and clutter.
 - 2. Cords left exposed.
 - 3. Ramp not properly constructed.

VIII. DETERMINE ROOT CAUSE OF ACCIDENT

IX. RECOMMEND PLAN OF ACTION FOR CORRECTIONS

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

GENERAL SAFETY COMMITTEE ACCIDENT FOLLOW UP

INJURED EMPLOYEE'S NAME: _____

Position: _____ Last date of hire: _____

Date and time of accident: _____ Location of Accident: _____

Brief recap of accident and injuries: _____

Investigating supervisor's name: _____

TIME LOST [] yes [] no STILL OFF [] yes [] no Number of days lost to date: _____

The general safety committee will review the attached employee's report of injury and supervisor's report of injury and investigation for the above referenced injury to determine the underlying causes of the accident.

I. Management issues

- | | |
|------------------------|-----------------------|
| A. Awareness of safety | E. Poor job design |
| B. Support of safety | F. Training |
| C. Improper purchasing | G. New hire practices |
| D. Poor maintenance | H. Communication |

II. Foreman's safety performance _____

- | | |
|--------------------------|------------------------|
| A. Inadequate training | C. Lack of enforcement |
| B. Inadequate procedures | D. Motivation |

III. Employee factors _____

- | | |
|---------------------|------------------------|
| A. Lack of training | C. Improper motivation |
| B. Lack of skills | D. Carelessness |

IV. Environment factors

V. Machines/equipment

VI. Materials

VII. Why did condition exist which caused accident/incident

VIII. Why did employee's behavior or actions happen which contributed to accident/incident

Decision on plan of action recommended if any on attached supervisor's report of injury and investigation or preventive measures suggested by employee on attached employee's report of injury:

Additional recommendations and/or plan of action if needed by general safety committee: _____

Any actions taken will be documented in minutes of general safety committee meeting. This report will be used as a tool in watching for trends in kinds of injuries or an increase in frequency of injuries.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

TO AVOID PENALTY, THIS REPORT MUST BE COMPLETED AND MAILED TO THE INSURER WITHIN 6 WORKING DAYS OF RECEIPT OF THE C-4 FORM		if handwritten, please print.	EMPLOYER'S REPORT OF INDUSTRIAL INJURY OR OCCUPATIONAL DISEASE				
EMPLOYER	Employer's Name _____		Nature of Business (mfg. etc.) _____	FEIN _____	OSHA Log Number _____		
	Office Mail _____		Location ... if different from mailing address _____		Telephone Number _____		
	City, State, Zip Code _____		INSURER _____		THIRD PARTY ADMINISTRATOR _____		
EMPLOYEE	First Name _____	M.I. _____	Last Name _____	Social Security _____	Birthdate _____	Age _____	Primary Language Spoken _____
	Home Address (Number and Street) _____		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
	City _____	State _____	Zip _____	Was the employee paid for the day of injury? <input type="checkbox"/> Yes <input type="checkbox"/> No		How long has this person been employed by you in Nevada? _____	
	In which state was employee hired? _____		Employee's occupation (job title) when hired or disabled _____		Department in which regularly employed: _____		
ACCIDENT OR DISEASE	Date of injury (if applicable) _____		Time of injury (hour; Minute AM/PM) (if applicable) _____		Date employer notified of injury or O/D _____		Supervisor to whom injury or O/D reported _____
	Address or location of accident (Also provide city, county, state) (if applicable) _____						Accident on employer's premises? (if applicable) <input type="checkbox"/> Yes <input type="checkbox"/> No
	What was this employee doing when the accident occurred (loading truck, walking down stairs, etc.)? (if applicable) _____						
	How did this injury or occupational disease occur? Include time employee began work. Be specific and answer in detail. Use additional sheet if necessary.						
INJURY OR DISEASE	Specify machine, tool, substance, or object most closely connected with the accident (if applicable) _____			Witness _____		Was more than one person injured in this accident? (if applicable) <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Part of body injured or affected _____			if fatal, give date of death _____		Witness _____	
	Nature of Injury or Occupational Disease (scratch, cut, bruise, strain, etc.) _____			Witness _____		Did employee return to work next scheduled shift after accident? (if applicable) <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If validity of claim is doubted, state reason _____			Location of Initial Treatment _____		Will you have light duty work available if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Treating physician/chiropractor name _____			Emergency Room? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hospitalized? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	How many days per week does employee work? _____			From _____ <input type="checkbox"/> AM <input type="checkbox"/> PM to _____ <input type="checkbox"/> AM <input type="checkbox"/> PM		Last day wages were earned _____	
IMPORTANT LOST TIME INFO	Scheduled Days Off <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F <input type="checkbox"/> S <input type="checkbox"/> Rotating _____			Are you paying injured or disabled employee's wages during disability? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Date employee was hired _____		Last day of work after injury or disability _____		Date of return to work _____		Number of work days lost _____
	Was the employee hired to work 40 hours per week? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, for how many hours a week was the employee hired? _____		Did the employee receive unemployment compensation any time during the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	For the purpose of calculation of the average monthly wage, indicate the employee's gross earning by pay period for 12 weeks prior to the date of injury or disability. if the injured employee is expected to be off work 5 days or more, attach wage verification form (D-8). Gross earnings will include overtime, bonuses, and other remuneration, but will not include reimbursement for expenses. If the employee was employed by you for less than 12 weeks, provide gross earnings from the date of hire to the date of injury or disability.						
	Pay Period ends on: _____			Employee is paid: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____		On the date of injury or disability the employee's wage was: _____ per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Day <input type="checkbox"/> Month	
	For assistance with Workers' Compensation Issues you may contact the Office of the Governor Consumer Health Assistance Toll Free : 1-888-333-1597 Web site: http://govcha.state.nv.us E-mail cha@govcha.state.nv.us						
Insurer Use Only	I affirm that the information provided above regarding the accident and injury or occupational disease is correct to the best of my knowledge. I further affirm the wage information provided is true and correct as taken from the payroll records of the employee in question. I also understand that providing false information is a violation of Nevada law.			Employer's Signature and Title _____		Date _____	
	Claim is: <input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Deferred <input type="checkbox"/> Third-Party		Deemed Wage _____		Account No. _____		Class Code _____
	Claims Examiner's Signature _____		Date _____		Status Clerk _____		Date _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE'S CLAIM FOR COMPENSATION/REPORT OF INITIAL TREATMENT
FORM C-4
PLEASE TYPE OR PRINT

EMPLOYEE'S CLAIM - PROVIDE ALL INFORMATION REQUESTED						
First Name	M.I.	Last Name	Birthdate	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Claim Number (Insurer's Use Only)	
Home Address			Age	Height	Weight	
City		State	Zip	Telephone		
Mailing Address		City	State	Zip	Primary Language Spoken	
INSURER			THIRD-PARTY ADMINISTRATOR		Employee's Occupation (Job Title) When Injury or Occupational Disease Occurred	
Employer's Name/Company Name					Telephone	
Office Mail Address (Number and Street)						
Date of Injury (if applicable)	Hours Injury (if applicable) am pm	Date Employer Notified	Last Day of Work After Injury or Occupational Disease	Supervisor to Whom Injury Reported		
Address or Location of Accident (if applicable)						
What were you doing at the time of the accident? (if applicable)						
How did this injury or occupational disease occur? (Be specific and answer in detail. Use additional sheet if necessary)						
If you believe that you have an occupational disease, when did you first have knowledge of the disability and its relationship to your employment?					Witnesses to the Accident (if applicable)	
Nature of Injury or Occupational Disease			Part(s) of Body Injured or Affected			
<small>I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE PROVIDED THIS INFORMATION IN ORDER TO OBTAIN THE BENEFITS OF NEVADA'S INDUSTRIAL INSURANCE AND OCCUPATIONAL DISEASES ACTS (NRS 618A TO 618D, INCLUSIVE OR CHAPTER 617 OF NRS). I HEREBY AUTHORIZE ANY PHYSICIAN, CHIROPRACTOR, SURGEON, PRACTITIONER, OR OTHER PERSON, ANY HOSPITAL, INCLUDING VETERANS ADMINISTRATION OR GOVERNMENTAL HOSPITAL, ANY MEDICAL SERVICE ORGANIZATION, ANY INSURANCE COMPANY, OR OTHER INSTITUTION OR ORGANIZATION TO RELEASE TO EACH OTHER, ANY MEDICAL OR OTHER INFORMATION, INCLUDING BENEFITS PAID OR PAYABLE, PERTINENT TO THIS INJURY OR DISEASE, EXCEPT INFORMATION RELATIVE TO DIAGNOSIS, TREATMENT AND/OR COUNSELING FOR AIDS, PSYCHOLOGICAL CONDITIONS, ALCOHOL OR CONTROLLED SUBSTANCES, FOR WHICH I MUST GIVE SPECIFIC AUTHORIZATION. A PHOTOSTAT OF THIS AUTHORIZATION SHALL BE AS VALID AS THE ORIGINAL.</small>						
Date	Place	Employee's Signature				
THIS REPORT MUST BE COMPLETED AND MAILED WITHIN 3 WORKING DAYS OF TREATMENT						
Place Name of Facility						
Date	Diagnosis and Description of Injury or Occupational Disease			Is there evidence that the injured employee was under the influence of alcohol and/or another controlled substance at the time of the accident? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)		
Hour						
Treatment:			Have you advised the patient to remain off work five days or more? <input type="checkbox"/> Yes indicate dates: from _____ to _____ <input type="checkbox"/> No If no, is the injured employee capable of: <input type="checkbox"/> full duty <input type="checkbox"/> modified duty If modified duty, specify any limitations/restrictions: _____			
X-Ray Findings:						
From information given by the employee, together with medical evidence, can you directly connect this injury or occupational disease as job incurred? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is additional medical care by a physician indicated? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Do you know of any previous injury or disease contributing to this condition or occupational disease? <input type="checkbox"/> Yes <input type="checkbox"/> No (Explain if yes)						
Date	Print Doctor's Name		I certify that the employer's copy of this form was mailed to the employer on:			
Address				INSURER'S USE ONLY		
City	State	Zip	Provider's Tax I.D. Number			Telephone
Doctor's Signature			Degree			

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

Excavation Safety Program

It is the policy of Par 3 Landscape & Maintenance to permit only trained and authorized personnel to create or work in excavations. This plan is for both our daily and occasional excavation workers.

Any excavation that is four feet (4') or more in depth will have a competent person at the site at all times while work is in progress, and will utilize one or more of the following protective systems.

Sloping or Benching: A method of protecting employees from cave-ins by excavating to form sides of an excavation that are inclined or sloped away from the bottom to the top so as to prevent cave ins. Note: Excavations deeper than twenty feet (20') will be designed by a registered engineer.

Shoring: A structure such as a hydraulic or mechanical system which is specifically designed to support the sides of an excavation by applying outward pressure. **Shielding-** A structure that is able to withstand the forces imposed by cave ins and thereby protecting the employees working within the structure.

Access & Egress: A stairway, ladder, ramp, or other safe means of egress shall be located in a trench deeper than 4' and within 25 lateral feet of employees. When a ladder is used as a means of egress it shall extend a minimum of 36 inches above the edge of the excavation.

Utilities: Before any excavation begins, the State's one-call center must be called in order to locate any underground utilities.

Exposures to falling loads: No employee shall be permitted to pass beneath lifted /suspended loads, or attachments of digging or earth moving equipment. Employees shall use tag lines to control or move swing loads.

Mobile equipment: When mobilized equipment is operated adjacent to an excavation, a warning system shall be utilized, such as barricades, hand or mechanical signals to prevent a vehicle from being too close to the edge.

Hazardous atmospheres: When a hazardous atmosphere exists, or could reasonably be expected to exist, the atmosphere in the excavation shall be tested prior to any employee being permitted to enter the excavation. The company's policy for confined space work shall be followed.

Protection of employees from loose rock or soil: Adequate protection shall be provided to protect employees from loose rock or soil that could pose a hazard by falling / striking them. All employees will be required to wear hard hats any time they enter an excavation. All excavated spoils piles must be at least 2' away from the excavation's edge.

Inspections: Daily inspections of excavation shall be performed by a competent person. The competent person shall inspect protective systems, adjacent areas, for evidence of possible failures, or changes that could result in a cave in. Inspections shall be performed after any change in the work place or climate.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

Excavation Safety Program

Fall protection: When employees or equipment are required to pass over an excavation, walkways or bridges with standard guardrails shall be present, per OSHA standards. Adequate barriers / physical protection shall be provided at all excavation sites. Examples would include the following, plastic fencing, wood covers, wood railings, etc. All excavations will be covered or barricaded at the end of each work shift to protect the public or other workers. Keep excavations back-filled as closely as possible to excavation work.

Soil classifications: There are 4 types or classifications of soil and maximum allowable slopes for each.

Stable rock: Vertical (90 degrees) or Type A: $\frac{3}{4}:1$ (53 degrees)
Type B: 1:1 (45 degrees) or Type C: $1\frac{1}{2}:1$ (34 degrees)

It is policy of Par 3 Landscape & Maintenance to treat all soil types as Type C soils. All works associated with excavations will be treated as Type C soils as well.

Stability of adjacent structures: When the stability of adjoining buildings, walls, or other structures are endangered by excavation operations, support systems such as shoring, bracing, or underpinning shall be provided to ensure the stability of such structures for the protection of employees.

Hazards of water: Employees shall not work in excavations in which there is accumulated water or in excavations where water is accumulating, unless adequate precautions have been taken to protect against hazards posed by water accumulation. The precautions necessary to protect employees from different hazards vary from situation to situation, but could include special support or shield systems to protect from cave-ins caused by water accumulation. A harness and safety lifeline may be used as well.

Emergency action plan: The competent person will review the emergency action plan with all affected employees before an excavation begins. Each emergency plan will be site specific dependent upon the conditions or hazards found by the competent person.

Competent person: OSHA defines a competent person as “one who is capable of identifying existing hazards and predictable hazards in the surroundings or working conditions which are unsanitary, hazardous, or dangerous to employees, and who has the authorization to take prompt corrective measures to eliminate them.”

Training: Training will be provided to all employees who will work in or around any open excavations. Additional training will be provided to all supervisors or foremen that are involved in the excavation process. All supervisors or foremen that finish the training will be certified competent persons for trenching and shoring. Any competent person will remain on the job while the excavation is taking place. Refresher training will be conducted annually. The following topics will be covered: Soil classification. Inspections, Hazardous conditions, Use of trench shields and trench boxes, benching and sloping procedures, emergency excavation plans, install and removal of protective systems.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

NEAR MISS / POTENTIAL ACCIDENT FORM

Supervisors are to complete the top portion of this form if they observe a “near miss”, situation which may potentially cause an accident or if a near miss or potential accident is reported to them by an employee. The completed form should be submitted to our safety director as soon as possible. The general safety committee will review the form at the following committee meeting to determine what if any action should be taken.

Date of occurrence: _____ **Time of occurrence:** _____ am pm

Location where incident occurred (be specific): _____

SEQUENCE OF EVENTS: Describe in detail exactly what the conditions were that created the opportunity for an accident to occur including whether it was due to unsafe work practices, unsafe working conditions or a combination of both:

Unsafe work practice: yes no. If yes, please describe in detail: _____

Unsafe working condition: yes no. If yes, please describe in detail: _____

Other pertinent information: _____

Was another company or an employee of another company responsible for the condition: yes no.
If yes, who in your opinion was responsible: _____

Did you notify the general contractor/builder on the job site: yes no. If yes, name of person notified: _____

CORRECTIVE ACTION PLAN: Describe in detail what has been done or will be done to prevent the possibility of another accident occurring due to the above described situation. Include who is responsible for taking the corrective action and when it will be completed: _____

Supervisor completing form: _____ **Date:** _____

REVIEW BY GENERAL SAFETY COMMITTEE

Will the corrective action plan described by the supervisor eliminate the unsafe work practice or unsafe working condition: yes no. If yes, has the plan been effectively implemented: yes no. If no, what corrective action measures should be taken, who will be responsible and when will the measures be completed: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE REPORT OF VEHICLE ACCIDENT INVOLVING COMPANY VEHICLE

An employee involved in an accident while driving a company vehicle must report the accident to their foreman and safety director immediately and follow up as soon as possible by completing and submitting this form along with an information card from the driver of the other vehicle and witness cards as applicable. All accidents involving a company vehicle must be reported to the police. See the section in this safety program on our fleet safety program for more information.

OUR DRIVER'S NAME: _____ Injured: yes no. If yes, describe: _____

Date of accident: _____ Time of accident: _____ am pm. Location of accident: _____

Police name: _____ Badge #: _____ Police report #: _____

Were you cited: yes no. **Was other driver cited:** yes no.

Our vehicle #: _____ License plate #: _____ VIN: _____

Passengers in our vehicle: yes no. If yes, list names and whether there were injuries:

Passenger #1: _____ Injured: yes no. If yes, describe: _____

Passenger #2: _____ Injured: yes no. If yes, describe: _____

Describe in detail how the accident happened and who in your opinion caused the accident. Use the back of this form if more room is needed. Draw a diagram of the accident scene on the back of this form showing street names, location of all vehicles and direction of travel at the time of the accident.: _____

Describe damages to our vehicle: _____

OTHER DRIVER'S NAME: _____ Injured: yes no. If yes, describe: _____

Driver's license #: _____ State of driver's license: _____ Telephone #: _____

Address: _____

City: _____ State: _____ Zip code: _____

Passengers in other vehicle: yes no. If yes, list names and whether or not there were injuries:

Passenger #1: _____ Injured: yes no. If yes, describe: _____

Passenger #2: _____ Injured: yes no. If yes, describe: _____

Owner of other vehicle: _____ Telephone #: _____

Address: _____

City: _____ State: _____ Zip code: _____

Insurance agent: _____ Telephone #: _____

Insurance carrier: _____ Policy #: _____

Make of vehicle: _____ Model: _____ Year: _____

Vehicle license plate #: _____ State: _____ VIN: _____

Describe damages to other vehicle: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE REPORT OF VEHICLE ACCIDENT INVOLVING COMPANY VEHICLE

(continued)

Use this space to continue information from front of form if more room is needed to describe how the accident happened or other pertinent information: _____

DRAW A DIAGRAM OF THE ACCIDENT SCENE BELOW. SHOW STREET NAMES, LOCATION OF ALL VEHICLES AND DIRECTION OF TRAVEL AT TIME OF ACCIDENT:

Employee completing form: _____ **Date:** _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

SAFETY DIRECTOR'S FOLLOW UP REPORT OF VEHICLE ACCIDENT

Our safety director is to review employee report of vehicle accident involving company vehicle forms submitted, investigate the accident, complete and submit this form for review by the general safety committee at its next meeting.

OUR DRIVER'S NAME: _____ **Position:** _____

Date of accident: _____ **Our vehicle #:** _____ **VIN:** _____

ACCIDENT RESULTED IN: **injury** **fatality** **property damage**

Describe in detail injuries, fatality or property damage: _____

What actions, events or conditions in your opinion contributed most directly to this accident: _____

Was accident avoidable: **yes** **no.** **If yes, how:** _____

Can anything be done to prevent accidents of this type in the future: **yes** **no.** **If yes, what:**

Plan of action you would like to recommend to the general safety committee as a result of your investigation. Include information on who will be responsible for implementing the plan of action and when it will be implemented if approved by the general safety committee: _____

Safety Director completing form: _____ **Date:** _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

INCIDENT REPORT

Employees are to complete and submit this form if they are involved in or witness an incident or accident in which an employee or company property is involved and a person not employed by our company is injured or there is damage to equipment or property not belonging to our company.

DATE OF ACCIDENT/INCIDENT: _____ Time: _____ [] am [] pm

Location of accident/incident: _____

Describe in detail what happened: _____

Were any of our employees involved in the incident: [] yes [] no. If yes, list employee names:

Was any of our company's equipment, material, tools, etc. involved in the incident:
[] yes [] no. If yes, list what was involved: _____

Was anyone other than an employee injured: [] yes [] no. If yes, please give available information:

Name: _____ Employed by: _____

Address: _____

Nature of injuries: _____

Was equipment belonging to someone other than our company damaged: [] yes [] no. If yes, please describe what was damaged and nature of damages: _____

Please list names of all witnesses and where they can be reached:

Witness: _____ Telephone #: _____ Employer: _____

Witness: _____ Telephone #: _____ Employer: _____

Did you report the incident to the general contractor or builder's job site superintendent:

[] yes [] no. General Contractor/Builder: _____

Job site superintendent: _____ Telephone #: _____

Employee completing form: _____ **Date:** _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE SAFETY INFORMATION REPORT

Employees are to complete and submit this form if they want to report an unsafe work place condition or practice or if they would like to recommend a safety suggestion to our company.

Description and location of unsafe working condition or practice you would like to report: _____

In your opinion what are the causes or conditions contributing to the unsafe condition or practice you have described above: _____

Have you reported the above unsafe condition or practice to your supervisor: yes no. If yes, date you reported condition: _____ Supervisor's name: _____

Do you have a recommendation for eliminating the unsafe condition or practice you have reported above: yes no. If yes, please explain: _____

Other: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

REPORT OF THEFT

Employees are to complete and submit this form to report the theft of company vehicles, equipment, materials, tools or other property. All thefts must be reported to the police.

PLEASE BE SURE TO WRITE DOWN THE POLICE EVENT NUMBER

Police event #: _____ **Police name:** _____

EMPLOYEE WHO DISCOVERED THEFT: _____

Date theft was discovered: _____ Time: _____ [] am [] pm

Location where theft was discovered: _____

Please give details of how the theft was discovered and any information which may help the police or our insurance company in their investigation of the theft: _____

Was anything destroyed or broken into during the theft: [] yes [] no. If yes, please explain: _____

Were security measures required by company policy in place at the time of the theft: [] yes [] no. If no, please explain to the best of your knowledge why they weren't being used: _____

Do you have any recommendations regarding measures that could be taken to avoid a similar theft in the future: [] yes [] no. If yes, please explain: _____

PLEASE LIST ALL ITEMS STOLEN, DAMAGED OR DESTROYED

(If more room is needed, please continue on back of form.)

Quantity	Description of Equipment/Property Stolen	Serial Number	Estimated Value

Employee completing form: _____ **Date:** _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

ASSESSMENT OF HAZARDS NECESSITATING THE USE OF PERSONAL PROTECTIVE EQUIPMENT CHECKLIST

Supervisors are to use this form as a checklist for assessing hazards requiring personal protective equipment prior to beginning work at a job site.

SURVEY:

- Struck by hazard
 - Puncture hazard
 - Equipment roll over hazard
 - Chemical hazard
 - Heat exhaustion hazard
 - Excessive dust exposure
 - Laceration hazard
 - Other _____
- _____
- _____

SOURCES:

- High temperatures
 - Chemical exposures
 - Harmful dust (Lead or Silica)
 - Hot engines
 - Falling objects
 - Fall/Slip/Trip hazards
 - Sharp objects
 - Crush or pinch hazards
 - Electrical hazards
 - Layout of work place and location of other workers
 - Sound
 - Location of emergency equipment
 - Hazard warning signs/traffic signs (or lack of)
 - Review of injury/accident data with supervisors
 - Other _____
- _____
- _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

PERSONAL PROTECTIVE EQUIPMENT TRAINING CHECKLIST

Employees are to receive training for personal protective equipment prior to beginning work at a job site where it has been determined hazards are present or are likely to be present which will necessitate the use of personal protective equipment. Supervisors are to use this checklist as a guide.

- Eye
- Face
- Head
- Foot
- Hand
- Hearing
- Respiratory
- Other _____

1. When personal protective equipment is necessary
2. What personal protective equipment has been selected
3. How to properly put on, take off, adjust and wear personal
4. Protective equipment
5. Limitations of the personal protective equipment
6. Proper care, maintenance, useful life and disposal of personal protective equipment.

**See section in safety program:
Personal protective equipment assessment, selection and training**

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

RESPIRATOR PROTECTION PROGRAM INSPECTION CHECKLIST

Our safety director and general managers will inspect job sites randomly for individual employee and supervisor's compliance with our respiratory protection program using this checklist as a guide. Immediate steps are to be taken to correct any hazardous situation observed and our Employee Safety Information Report form is to be completed and submitted.

-] Has the foreman properly assessed job site conditions, employee exposure and stress?
-] Has the foreman properly trained employees?
 -] Nature of respiratory hazard(s)
 -] Controls being used
 -] Selection and reasons for respiratory protective equipment
 -] Proper methods of putting on, wearing and taking off respiratory protective equipment
 -] Respirator maintenance and storage
 -] Handling emergency situations
 -] Information on results of overexposure to hazards
-] Are all employees exposed to hazards requiring respirator protection wearing respirators?
-] Are all employees wearing respirators using the proper type of respirator required for the tasks and conditions?
-] Are all respirators being used properly maintained?
-] Do all employees using respirators have proper medical clearance?

See section in Safety Program: Respiratory Protection Program.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

TOOL BOX MEETING

Foremen are required to conduct weekly toolbox meetings at job sites to train new and existing employees in general safety guidelines, accident and injury prevention, hazardous materials, blood borne pathogens and MRSA awareness, proper use and type of equipment needed for specific job sites and conditions and emergency procedures. All weekly toolbox meetings are to be documented by completion of this form and submitting it to our safety director for review.

EXAMPLE:

Date of meeting: _____ **Time:** _____ [] am [] pm

Job site/location of meeting: _____

Foreman conducting meeting: _____

EMPLOYEES ATTENDING MEETING:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

NEW HIRE ORIENTATION TOPICS

- | | |
|---|--|
| <input type="checkbox"/> Hazardous materials training | <input type="checkbox"/> Company Safety Program |
| <input type="checkbox"/> Blood borne pathogens awareness training | <input type="checkbox"/> Review reporting forms and procedures |
| <input type="checkbox"/> MRSA awareness training | |

NEW JOB SITE TOPICS

- Job site specific hazards and/or potential hazards utilizing Task Hazard Analysis (THA)
- Job site specific personal protective equipment requirements
- Job site specific fall protection requirements
- Job site specific emergency procedures and facilities (see “Site Specific Emergency Action Plan bottom of next page)

SUGGESTED ON-GOING TRAINING TOPICS

- | | |
|--|---|
| <input type="checkbox"/> Aerial platform equipment safety | <input type="checkbox"/> Hard-sole shoes |
| <input type="checkbox"/> Emergency response involving hazardous materials incident | <input type="checkbox"/> Hazard communication program |
| <input type="checkbox"/> Fall protection requirements and equipment | <input type="checkbox"/> Ladder safety |
| <input type="checkbox"/> Fire prevention/protection | <input type="checkbox"/> Laser equipment |
| <input type="checkbox"/> First aid and medical attention | <input type="checkbox"/> Lifting techniques |
| <input type="checkbox"/> Fleet safety policy, approved drivers | <input type="checkbox"/> Personal protective equipment requirements |
| <input type="checkbox"/> Forklift safety | <input type="checkbox"/> Powder actuated tools |
| <input type="checkbox"/> General contractor/Builder job site rules and regulations | <input type="checkbox"/> Reporting forms and procedures |
| | <input type="checkbox"/> Respirator protection program |

SPECIAL TOPICS

- Maintaining work environment free of harassment, intimidation and coercion
- Recruitment of female and minority employees
- Time sheets – accuracy, completeness, must be signed
- Overtime - must be authorized

Check off items listed above which were discussed at weekly toolbox meeting. List additional items discussed in proper section of next page.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

TOOL BOX MEETING

Page 2

Special training topics: _____

Problems discussed: _____

Recommendations or suggestions to be reviewed by General Safety Committee: _____

Other: _____

SITE SPECIFIC EMERGENCY ACTION PLAN

JOB SITE NAME: _____

A. EMERGENCY PREPAREDNESS CHECKLIST

- | | |
|-------------------------------------|---|
| ___ Emergency meeting place (below) | ___ How to report emergencies |
| ___ First aid kit on site | ___ Identify escape/egress routes (below) |
| ___ Fire extinguisher on site | ___ Names & number of employees |
| ___ SDS book on site | (see sign up section top of this form) |

B. MEDICAL & RESCUE DUTIES

1. Perform first aid/Call 911 if needed
2. Meet emergency vehicles at job site entrance and direct them to scene
3. Preserve the scene
4. Notify General Contractor/Builder IMMEDIATELY
5. Notify Par 3 Safety Director or Supervisor IMMEDIATELY

C. EVACUATION PROCEDURES (if necessary)

1. Instruct all employees to evacuate the building to predetermined place
2. Account for all employees
3. Call for emergency services
4. Notify General Contractor/Builder of emergency issues IMMEDIATELY
5. Notify Par 3 Safety Director or Supervisor IMMEDIATELY

D. ESCAPE/EGRESS ROUTE(S): _____

E. EMERGENCY MEETING PLACE: _____

Supervisor's signature: _____ Date: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

JOB SITE SAFETY INSPECTION SHEET

Project: _____ Date: _____

Foreman: _____ Time (start): _____ Time (end) _____

General Contractor/Builder: _____

Safety inspection conducted to ensure Par 3 Landscape & Maintenance's safety policies and procedures are followed as well as Federal and State safety regulations.

- | | | | | | |
|------------------------------|-----------------------------|---|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | PPE (safety glasses, boots, etc) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Ladders |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Hard Hats | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Scaffold / Planks / Rails / Braces |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Fall Protection / Elevated work | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Forklift / Aerial lifts / Booms / License |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Unsafe actions / Horseplay / Danger area | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Confined spaces |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Right tool / Used correctly / Safe conditions | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Cords / Plugs / Grounding |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Incident Reporting Procedures | <input type="checkbox"/> Yes | <input type="checkbox"/> No | High/Low Voltage - Minimum Clearance |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Hazard communication / SDS / Labeling | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Guardrails / Stairs / Floor holes |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Competent person / Qualified person | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Housekeeping |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Fire protection/Fire extinguishers at welders | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Spill Containment, Chemicals, Fuels |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Site specific emergency action plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Other: _____ |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Gasses / Flammables / Combustibles | | | |

Stop Work Ordered: Yes No

Observations: _____

Description of Violations: _____

Action Taken: _____

Inspector: _____

Safety Director: _____

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

GENERAL SAFETY GUIDELINES

- I. Report immediately to your supervisor and the safety director any accident that results in personal injury or damage to property. Complete our employee's report of injury form and submit as soon as possible. **GET MEDICAL ATTENTION PROMPTLY WHEN NEEDED.**
- II. Report immediately to your supervisor any condition or practice you think might cause injury to a person or damage to equipment. Complete and submit our employee safety information report form.
- III. Do not operate any equipment that in your opinion is not in a safe working condition. Complete and submit our employee safety information report form.
- IV. Use all prescribed safety and personal protective equipment as required and maintain it in good working condition. See the section in this safety program on our personal protective equipment assessment, selection and training program.
- V. Obey all company rules, government regulations, signs, markings and instructions. Be particularly familiar with those that apply directly to you.
- VI. Lift using approved lifting techniques. Seek help from others for heavy loads. Back braces can be provided.
- VII. Do not horseplay; avoid distracting others; and always be courteous.
- VIII. Use the right tools and equipment for the job you are doing. Use them safely and only when authorized to do so.
- IX. Practice good housekeeping. Return all tools, equipment and materials to their proper places when you are finished using them. Disorganized job sites wastes time, energy and material. Often times they result in injury.
- X. The use of drugs and/or intoxicating beverages is prohibited. See the section in this safety program "Substance Abuse Policy/Drug and Alcohol Testing Policy".

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE SAFETY RULES AND REGULATIONS

Safety rules are established to protect employees from injuries. Par 3 believes in your right as an employee to work in a safe and healthful environment. The safety rules outlined in this section of our safety program should not be construed as a complete safety guideline. Complete safety guidelines may be found in (OSHA 29 CFR 1926 & OSHA 29 CFR 1910).

The following safety rules and regulations are part of our safety program. As a condition of employment, you must comply with them and do everything reasonably necessary to protect the life, health, safety and welfare of yourself and others on the job.

- I. Employees are not to operate any equipment without proper training and authorization.
- II. Employees are not to remove, displace, damage, destroy or carry off any safety device furnished and provided for their use or the use of another person. Employees are not to interfere with the use of any method or process adopted for the protection of themselves or another person.
- III. Employees are to comply with occupational safety and health standards (OSHA) and all rules and regulations, which are applicable to their own actions and conduct.
- IV. Employees are to report to their supervisor any physical impairment or condition which may affect their ability to perform safely before attempting to perform any work.
- V. Employees are to know their job duties and be aware of hazards that exist. If an employee becomes aware of a potentially hazardous condition or situation, they are to stop work immediately and notify their supervisor and safety director. Employees are to follow up with a written report of the situation by completing our employee safety information report form as outlined in this safety program. Continued use of an unsafe structure, equipment or vehicle is prohibited pending correction of the unsafe condition.
- VI. Employees are to report all injuries to their foreman and the safety director immediately. As soon as possible, the injured employee is to follow up with a written report of the injury by completing our Employee's Report of Injury form as outlined in this Safety Program. Employees who require medical attention after a workplace related injury are required to submit to an alcohol impairment and drug test for the unlawful use of controlled substances.
- VII. Employees are never to move an injured person unless it is absolutely necessary due to danger of further injury. First aid training is not provided that would qualify employees to treat serious injuries. Supervisors may treat minor cuts and abrasions only. Other employees need to leave all treatment for authorized persons to handle. Employees should make the injured person comfortable until trained personnel arrive.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE SAFETY RULES AND REGULATIONS

- VIII. The use or possession of intoxicants or drugs in the work place is prohibited. If an employee reports for work intoxicated or under the influence of intoxicating liquor or drugs they will not be allowed to work or stay on the premises.
- IX. Employees who are taking a prescription or over-the-counter drug are personally responsible for confirming with their physician that they may safely perform their normal job duties while taking it. If an employee is taking a drug that could impair their performance they must advise their supervisor. If duties which are not hazardous are available, the employee will be reassigned by the foreman; otherwise, the employee will be sent home.
- X. Employees are not allowed to have firearms or weapons of any kind at job sites or company premises or in company vehicles.
- XI. Employees are not allowed to run in the yard or at job sites. Employees should watch where they are walking and keep alert to conditions, work processes and the movement of equipment and others around them so they can foresee and avoid potential dangers.
- XII. Employees are not allowed to engage in fighting, gambling, the practice of sports, horseplay or other misconduct in the yard or at job sites. Threatening or attacks upon another employee will result in termination.
- XIII. Employees are to drive within the safe limits of all posted and known traffic regulations both on the street and at job sites. Employees are not to drive a company vehicle unless they have been authorized as an approved driver. See the section in this safety program on our fleet safety program.
- XIV. Employees are to properly use, maintain and dispose of personal protective equipment. Job sites will be assessed by our supervisors utilizing our task hazard analysis (THA) to determine what if any personal protective equipment will be required, under what conditions it is to be used and will train employees in the proper use, maintenance and disposal of it as well as its limitations. Personal protective equipment such as hard hats, safety glasses or goggles, respiratory protection and back braces that are required will be furnished by the company. See the section in this safety program on our personal protective equipment assessment, selection and training.
- XV. Employees are required to wear hard-sole shoes in the yard or at job sites. Sneakers, tennis shoes and open-toe shoes are not permitted on Construction job sites. Closed- toe shoes are required on all landscaping jobs. Supervisors will enforce this policy. Disciplinary action will include sending employees home if they are not wearing proper shoes.
- XVI. Employees are required to wear full body clothing to avoid sunburn and exposure to sparks and hazardous materials. "T-shirts" with short sleeves of at least three inches will be required as a minimum during hot weather. Shorts will not be allowed. Supervisor will enforce our clothing policy. Employees will be sent home if they are not in compliance.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

EMPLOYEE SAFETY RULES AND REGULATIONS

- XVII. Employees who are working with hazardous materials requiring respiratory protective equipment will be provided with appropriate respiratory protective devices and will be trained in the proper use, maintenance and disposal of the devices as well as their limitations. See the section in this safety program on our respiratory protection program.
- XVIII. Employees are required to properly use and maintain all fall protection equipment determined to be necessary at a job site. Supervisors will assess each job site for fall protection requirements. Employees will be trained in fall hazards, fall protection equipment and the proper use and maintenance of the equipment. See the section in this safety program on our fall protection program.
- XIX. Employees are not allowed to work on ladders or scaffolding under any circumstances.
- XX. Employees should be alert and heed all information and warning signs.
- XXI. Employees are not to attempt to repair or tamper with equipment that is not functioning properly unless they are authorized to do so. Employees are to report malfunctions to their supervisors immediately and follow our lockout tag out procedures.
- XXII. Prior to beginning work at a job site, employees are to receive training through our new hire orientation on emergency procedures and the location of emergency equipment applicable to the job site.
- XXIII. Employees are to maintain good housekeeping at all times keeping waste, debris and trash cleaned up.
- XXIV. Employees are not to smoke in areas marked “No Smoking” or near flammable or combustible materials, or their storage areas.
- XXV. Employees must receive hazardous materials training through our new hire orientation prior to beginning work at a job site. All hazardous materials must be properly handled, stored and disposed of according to government regulations and company policies. Employees should not use chemicals without understanding their toxic properties. See the section in this safety program on our hazard communication program.
- XXVI. No pets are allowed at job sites or within the company’s offices, yards, parking lots or vehicles.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

SAFETY TRAINING AND REMINDERS

Employees are required to attend weekly toolbox meetings that will be conducted by supervisors. Any employee who is not receiving training at weekly toolbox meetings or who feels they have not received proper and sufficient safety and hazardous materials training should immediately notify an Owner of the company or acting chairman of the general safety committee or our safety director.

Acting chairman of general safety committee
702-253-7878

Safety Director
702-253-7878

Employees should follow up with a written report by completing our employee safety information report and submitting it directly to the office. Employees are not to begin a job until they have received the proper training and have been authorized to perform the job. Employees should not undertake a job that appears to be unsafe.

Shown below are safety reminders, which should be adopted by all employees to help make safety a routine part of their work:

WORK SAFELY

Safety is everyone's business. Teach new employees safe work methods. Accidents can be prevented.

LIFTING

Hold your back straight, bend your knees, get a firm grip on the object, hold the object close to your body, space your feet shoulder width for good balance; then lift exerting the lifting force with your leg muscles not the weaker back muscles.

MATERIAL HANDLING

Do not throw objects; always carry or pass them. Use hand trucks or other equipment when possible. Get help with heavy or awkward objects.

TRASH DISPOSAL

Keep sharp objects and dangerous substances out of the trash can. Dispose of them in approved containers.

CLEAN UP

Remove trash and excess materials promptly to prevent slips and tripping.

PREVENT FALLS

Keep aisles, work places and stairways clean, clear and well lit. Report slippery or faulty floor surfaces.

WALK, DO NOT RUN

Watch your step. Wear hard-sole shoes.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

SAFETY TRAINING AND REMINDERS

-
- **Tools :** Handle and store knives and other tools with sharp or cutting edges carefully. Do not use burred, defective, or greasy tools. Use the right tool for the job. Always wear the proper PPE.
 - **Falling objects:** Handle tools and materials carefully and make sure to store them so that they do not fall.
 - **Personal protective equipment:** PPE must be worn when it is required, It must be maintained and stored properly. PPE must also be disposed of properly when it is defective, damaged, or outdated.
 - **Ladders:** Ladders must be inspected frequently, as well as used correctly. The proper set up, and selection of ladder is critical.
 - **Machine guards:** Keep guards in place at all times. Never service, fuel, or work on any piece of equipment while it is running or while the guards are not installed. Lock all disconnect switches while servicing or while storing.
 - **Electrical hazards:** Do not stand on a wet floor while using any electrical apparatus. Cords must be inspected for damage before every use. Do not overload outlets.
 - **Prevent infection:** All punctures, scratches, and cuts are dangerous. Seek first aid immediately.
 - **If injured:** Report all injuries immediately to your supervisor and safety director no matter how minor they may appear.
 - **Horseplay:** Practical jokes, sports, and gambling are not permitted at any of our jobsites or on company property.
 - **Workplace violence:** Workplace violence will not be tolerated on any jobsite or on company property.
 - **Emergencies:** Know what plans are in place when an emergency occurs. Know where first aid supplies are located.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

PURPOSE

The purpose of this plan is to establish a program and procedures for the safe use of hazardous chemical substances. Par 3 Landscape employees will be working with and around and the procedures that need to be followed for everyone's safety and protection.

The Occupational Safety and Health Administration (OSHA) Hazard Communication Standard (HCS) 29 CFR 1910.1200 (General Industry) and 29 CFR 1926.59 (Construction Industry) call for the development of a hazard communication program when employees may be exposed to any chemical in the workplace under normal conditions of use or in a foreseeable emergency. In 2012, OSHA revised the HCS to align with the Globally Harmonized System of Classification and Labeling of Chemicals (GHS). As a result, this program has been revised to comply with the requirements of the OSHA HCS 2012. This written hazard communication program will include and address the following criteria:

- List of all hazardous chemicals known to be present in the workplace or individual work area
- Methods used to ensure that all containers, including pipes and holding tanks, are labeled, tagged or marked properly
- Methods used to obtain and maintain safety data sheets (SDS)
- Methods used to provide employees with information and training on hazardous chemicals in their work areas
- Methods used to inform employees of the hazards of non-routine work practices
- Methods used to provide the employees of other employers (e.g., consultants, construction contractors and temporary employees) on-site access to SDS for each hazardous chemical that the other employer's employees may be exposed to while working in the workplace
- Methods used to inform the employees of other employers of precautionary measures that need to be taken to protect themselves during the workplace's normal operating conditions and in foreseeable emergencies
- Methods used to inform the employees of other employers of the labeling system used in the workplace

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

The hazard communication program will identify the following:

- Key personnel responsible for the program
- Location of chemical inventory list and SDS
- Workplace labeling system
- Good work practices and procedures to minimize exposures
- How training will be performed
- Procedures to maintain the program and update the required information
- How records will be maintained

RESPONSIBILITIES

Our safety director and managers are responsible for administering the hazard communication program.

Responsibilities:

- Reviewing the potential hazards and safe use of chemicals
- Maintaining a list of all hazardous chemicals and a master file of SDS
- Ensuring that all containers are labeled, tagged or marked properly
- Providing new-hire and annual training for employees
- Maintaining training records
- Monitoring the air concentrations of hazardous chemicals in the work environment
- Properly selecting and caring for personal protective equipment
- Directing the cleanup and disposal operations of the spill control team
- Identifying hazardous chemicals used in non-routine tasks and assessing their risks
- Informing outside contractors who are performing work near or around our work area about potential hazards
- Reviewing the effectiveness of the hazard communication program and making sure that the program satisfies the requirements of all applicable federal, state or local hazard communication requirements

The safety director is responsible for:

- Contacting chemical manufacturers and/or distributors to obtain SDS and secondary labels for hazardous chemicals used or stored in the workplace
- Reviewing incoming hazardous chemicals to verify correct labeling

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

- Holding hazardous chemicals in the receiving area until receipt of the SDS for the product

Employees are responsible for the following aspects of the hazard communication program:

- Identifying hazards before starting a job
- Reading container labels and SDS
- Notifying the supervisor of torn, damaged or illegible labels or of unlabeled containers
- Using controls and/or personal protective equipment provided by the company to minimize exposure
- Contacting our purchasing agent or Safety Director if employees are unable to locate an SDS on a particular product
- Following company instructions and warnings pertaining to chemical handling and usage
- Properly caring for personal protective equipment, including proper use, routine care and cleaning, storage, and replacement
- Knowing and understanding the consequences associated with not following company policy concerning the safe handling and use of chemicals
- Participating in training

It is critically important that all employees understand the training received under our hazard communication program. Employees who wish to receive more information or training regarding hazardous materials should contact our Safety Director, their supervisor or, our managers. If any employee feels they are not receiving the proper and sufficient training, they should notify the Acting Chairman of the General Safety Committee or our Safety Director and follow up with a written report by completing our employee safety information report and submitting it directly to the office

Owner
Safety Director
Acting Chairman of the GSC
702-253-7878

Every employee will receive comprehensive hazardous materials training as part of our weekly toolbox safety meeting training sessions. These training sessions are mandatory.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

CHEMICAL INVENTORY LIST

Attached is a general list of known hazardous substances used by employees of our Company, Specific information on each category of hazard substances can be obtained by reviewing the SDS manual of Par 3.

ADORN, ARMICARB 100, ASTRO, AVID, BARRICADE, BAYER ROSE FOOD, CRITERION 75 WSP, DACONIL, DIMENSION, INDUCE, MERIT, NUFARM, ORNAMEC, PENDULUM, PROSCAPE, PROSEGE, QUALI-PRO, RANGER PRO, RESOLUTE, ROUNDUP PRO, SNAPSHOT 2.5, SURFLAN, TALSTAR, TRIMEC, XL2G

This list will contain the product identifier that is referenced on the appropriate SDS, the location or work area where the chemical is used, and the personal protective equipment and precautions for each chemical product. This list will be updated annually and whenever a new chemical is introduced to the workplace.

LABELS AND OTHER FORMS OF WARNING

Each container of hazardous chemicals received from the chemical manufacturer, importer or distributor will be labeled with the following information:

- Product identifier
- Signal word
- Hazard statement(s)
- Pictogram(s)
- Precautionary statement(s)
- Name, address and telephone number of the chemical manufacturer, importer or other responsible party

Par 3 Landscape & Maintenance will use the GHS labeling system for secondary containers. When a chemical is transferred from the original container to a portable or secondary container, the container will be labeled, tagged or marked with a GHS label containing the following information:

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

- Product identifier
- Signal word
- Hazard statement(s)
- Pictogram(s)
- Precautionary statement(s)

Portable containers into which hazardous chemicals are transferred from labeled containers and that are intended for the immediate use of the employee who performs the transfer does not require a label. If the portable container will be used by more than one employee or used over the course of more than one shift, the container must be labeled. Food and beverage containers should never be used for chemical storage.

Signs, placards, process sheets, batch tickets, operating procedures or other such written materials may be used in lieu of affixing labels to individual, stationary process containers as long as the alternative method identifies the containers to which it is applicable and conveys the information required for workplace labeling.

Where an area may have a hazardous chemical in the atmosphere (e.g., where extensive welding occurs), the entire area will be labeled with a warning placard. Pipes that contain hazardous chemicals should be labeled in accordance with ANSI/ASME A13.1 and indicate the direction of flow. (Please note that this not a requirement of the OSHA HCS but a best practice or requirement of local jurisdiction.)

Workplace labels or other forms of warning will be legible, in English and prominently displayed on the container or readily available in the work area throughout each work shift. If employees speak languages other than English, the information in the other language(s) may be added to the material presented as long as the information is presented in English as well.

Note: After Dec. 1, 2015, distributors may not ship containers labeled by the chemical manufacturer or importer unless the label on the container meets GHS labeling requirements.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

SAFETY DATA SHEETS (SDS formerly MSDS)

An SDS will be obtained and maintained for each hazardous chemical in the workplace. SDS for each hazardous chemical will be readily accessible during each work shift to employees when they are in their work areas.

SDS will be obtained from the chemical manufacturer, importer or distributor. The name on the SDS will be the same as that listed on the chemical inventory list. SDS for chemicals or process streams produced by the company will be developed and provided by the safety Director.

The safety director will maintain the master file of all original SDS. Hard copies of the master file will be located at: All jobsites where employees are working, safety director's office and purchasing department's office.

SDS for new products or updated SDS for existing products will be obtained by the purchasing agent and forwarded to the safety director. The safety director will then update the master file with new and/or updated SDS.

If problems arise in obtaining an SDS from the chemical manufacturer, importer or distributor, a phone call will be made to request an SDS and to verify that the SDS has been sent. The phone call will be logged and a letter will be sent the same day. The company will maintain a written record of all efforts to obtain SDS. If these efforts fail to produce an SDS, the local OSHA office will be contacted for assistance.

EMPLOYEE INFORMATION AND TRAINING

Employees included in the hazard communication program will receive the following information and training prior to exposure to hazardous chemicals and when new chemical hazards are introduced to their work area:

- Requirements of the OSHA Hazard Communication Standard 29 CFR 1910.1200 (General Industry) or 29 CFR 1926.59 (Construction Industry)
- Operations in the work area where hazardous chemicals are present

PAR 3 LANDSCAPE & MAINTENACE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

- Location and availability of the hazard communication program, chemical inventory list and SDS
- Methods and observations used to detect the presence or release of a hazardous chemical in the work area, such as monitoring devices, visual appearance or odor of hazardous chemicals when being released
- Physical, health, simple asphyxiation, combustible dust and pyrophoric gas hazards, as well as hazards not otherwise classified of the chemicals in the work area
- Measures employees can take to protect themselves from hazards, such as appropriate controls, work practices, emergency and spill cleanup procedures, and personal protective equipment to be used
- Explanation of the labels received on shipped containers
- Explanation of the workplace labeling system
- Explanation of the SDS, including order of information and how employees can obtain and use the appropriate hazard information

Note: To facilitate understanding of the new GHS system, the OSHA HCS requires that employees be trained regarding the new label elements and SDS format by Dec. 1, 2013. Employers are required to update the hazard communication program and to provide any additional training for newly identified physical or health hazards no later than June 1, 2016.

NON-ROUTINE TASKS

The safety director and the immediate supervisor of an employee performing a non-routine task, such as cleaning machinery and other process equipment, is responsible for ensuring that adequate training has been provided to the employee on any hazards associated with the non-routine task. Employees share in this responsibility by ensuring that their immediate supervisor knows that the non-routine task will be performed.

Special work permits are required for the performance of certain non-routine tasks, such as entry to confined spaces, breaking and opening piping systems, and welding and burning. For some special tasks, employees are required to follow special lockout/tag out procedures to ensure that all machinery motion has stopped and energy sources are isolated prior to and during the performance of such tasks.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

HAZARD COMMUNICATION PROGRAM

INFORMING CONTRACTORS

Prior to beginning work, The general contractor or builder will inform subcontractors with employees working on the job site of any hazardous chemicals that the subcontractors' employees may be exposed to while performing their work. The general contractor or builder will also inform subcontractors of the location of SDS sheets and engineering or work practice control measures to be employed by the subcontractor, personal protective equipment to be worn by the subcontractors' employees, and any other precautionary measures that need to be taken to protect their employees during the workplace's normal operating conditions and in foreseeable emergencies.

To ensure that other contractors work safely on job sites our SDS sheets will be delivered to every job site. This will advise other contractors the appropriate controls that will be established to ensure that other company employees are not exposed to safety and health hazards from work being performed by Par 3 Landscape & Maintenance.

The safety director and or supervisor will inform contractors of the workplace labeling system and the availability and location of SDS for any chemical to which contractors' employees may be exposed while performing their work.

RECORDS KEEPING

Records pertaining to the hazard communication program will be maintained by the safety Director. The safety director will keep the following records:

- Chemical inventory list
- Hazardous material reviews
- Copies of phone call logs and letters requesting SDS
- Employee training records
- Warnings issued to employees for not following the hazard communication program

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Chemical exposure may cause or contribute to many serious health problems such as heart ailments, kidney and lung damage, sterility, cancer, burns and rashes. Some chemicals may also be safety hazards and have the potential to cause fires, explosions and other serious accidents.

If properly used for the purpose they are intended nearly all chemicals can be used safely; however, chemicals can have serious effects if they are abused or misused.

Some chemicals are relatively safe when used alone but become unstable or poisonous when combined with another substance. Drain cleaners contain powerful chemicals but can be used safely if the manufacturer's instructions are followed; however, if some drain formulas are poured in standing water containing bleach deadly fumes are created.

Flammable substances such as paints can be used safely; however, if used near an open flame or stored in high temperatures they may become hazardous. Other substances are stable under normal conditions but become dangerous when heat, pressure or other factors are applied.

HEALTH HAZARDS

Chemicals have three major hazards: health, fire and reactivity. The first one is the health hazard. Chemicals labeled as health hazards are chemicals that have shown through studies may cause short-term (acute) or long-term (chronic) health effects to people who are exposed to them. The concentration and length of exposure are important factors. Sometimes a long period of exposure is required and effects don't show up for many years.

Dose is often the factor, which determines whether a substance is harmful. Tranquilizers for example taken as prescribed by a doctor can help a person; however, an overdose of tranquilizers or nearly any drug can be fatal. Another example is salt. The average American can consume about one pound of salt over the course of a year with few ill effects; however, the same amount eaten in an hour would endanger anyone's health.

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Chemicals vary in toxicity. Even the briefest exposure or the smallest dose of a highly toxic chemical can result in severe illness, injury or death. All chemicals should be handled as instructed and with respect. A carcinogen, a substance which studies have shown may cause cancer, is an example of a health hazard. Benzene, asbestos and cigarettes are among substances identified as a carcinogen. In many cases both high and frequent exposure are required before cancer is likely to occur.

Other classes of chemicals which may cause health hazards are corrosives which actively attack metal or tissue such as acids or alkalis, highly toxic chemicals which are poisonous even in small doses such as hydrogen cyanide, toxic chemicals which at a high dose can be poisonous including alcohol, a sensitizer which may cause an allergic reaction following repeated exposure including some kinds of dusts and pollen, irritant chemicals that can cause inflammation to skin, eyes and membranes such as gasoline and reproductive toxins which can cause chromosome damage, sterility or have effects on fetuses. Other chemicals can cause damage to the nervous system, liver, blood, skin, lungs and eyes.

In order for a chemical to be harmful, it must enter the body. There are three routes in which a chemical can enter the body. They can pass through the skin, which is absorption, through the respiratory system, which is inhalation, and by swallowing which is ingestion.

The degree of toxicity of a chemical can be determined by the threshold limit value (TLV) or by the permissible exposure limit (PEL). The TLV is established by the American Conference of Governmental Industrial Hygienists and the PEL is determined by OSHA.

The TLV and the PEL are the established amount of a chemical the average worker can be exposed to eight hours a day, five days a week without suffering any adverse effects. The average is stressed because some workers may be more tolerant or more sensitive to certain chemicals.

The toxicity of a chemical is expressed in parts per million (PPM) for vapors and milligrams per cubic meter (MG/M3) for dusts and mists.

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PHYSICAL HAZARDS

The remaining two hazards of a chemical, fire and reactivity, are considered physical hazards. Classified as a physical hazard are those chemicals, which because of their chemical makeup may pose a serious and immediate danger under certain conditions. A substance, which is highly flammable, for example is a physical hazard if it is used near an open flame or stored at high temperatures. Combustible liquids, explosive compounds, compressed gases, oxidizers, organic peroxides, pyrophoric and unstable or water reactive substances can also present a physical hazard.

HAZARD COMMUNICATION SAFETY DATA SHEETS (SDS)

The Hazard Communications Standard (HCS) requires chemical manufacturers, distributors or importers to provide Safety Data Sheets (SDS) formerly known as Material Safety Data Sheets (MSDS) to communicate the hazards of hazardous chemical products. As of June 1, 2015, the HCS will require new SDS to be in a uniform format and include the section numbers, the headings and associated information under the headings below.

Section 1, Identification includes product identifier, manufacturer or distributor name, address, phone number, emergency phone number, recommended use, restrictions on use.

Section 2, Hazard(s) identification includes all hazards regarding the chemical, required label elements.

Section 3, Composition/information on ingredients includes information on chemical ingredients, trade secret claims.

Section 4, First-aid measures includes important symptoms/effects acute and/or delayed; required treatment.

Section 5, Fire-fighting measures lists suitable extinguishing techniques, equipment; chemical hazards from fire.

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Section 6, Accidental release measures lists emergency procedures, protective equipment and proper methods of containment and cleanup.

Section 7, Handling and storage lists precautions for safe handling and storage, including incompatibilities.

Section 8, Exposure controls/personal protection lists OSHA's permissible exposure limits (PEL); threshold limit values (TLV); appropriate engineering controls; personal protective equipment (PPE).

Section 9, Physical and chemical properties lists the chemical's characteristics.

Section 10, Stability and reactivity lists chemical stability and possibility of hazardous reactions.

Section 11, Toxicological information includes routes of exposure; related symptoms, acute and chronic effects; numerical measures of toxicity.

Section 12, Ecological information *

Section 13, Disposal considerations *

Section 14, Transport information *

Section 15, Regulatory information *

Section 16, Other information includes the date of preparation or last revision.

**Note: Since other agencies regulate this information, OSHA will not be enforcing Sections 12 through 15 (29 CFR 1910.1200(g)(2)).

Employers must ensure that SDS(s) are readily accessible to employees. See Appendix D of 1910.1200 for a detailed description of SDS contents.

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HAZARD COMMUNICATION PROGRAM

HEALTH

FLAMMABILITY

INSTABILITY

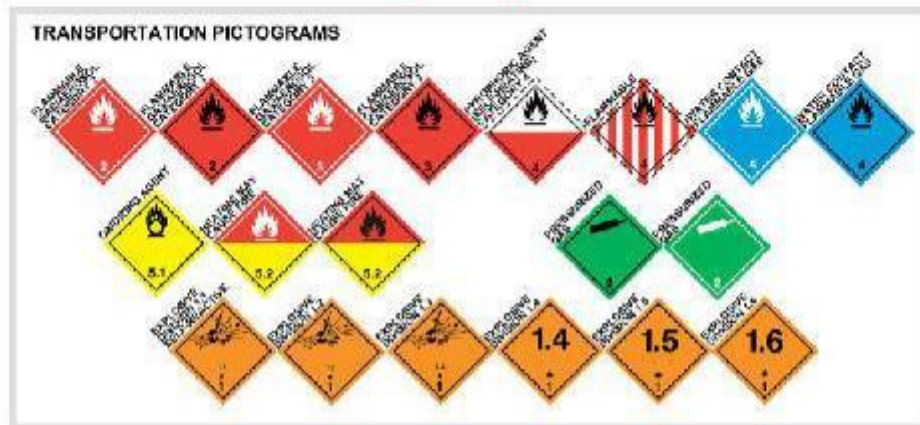
PERSONAL PROTECTION

Alcohol

Reactivity

A = Highly reactive
B = Strongly reactive
C = Moderately reactive
D = Slightly reactive
0 = Non-reactive

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LABELING

Hazard labels will be used to identify potential problems with chemicals. The label consists of four diamonds within a large diamond. The left diamond is blue and represents health hazard. The number within this diamond ranges between 0 and 4.

- 0 No significant hazard.
- 1 Irritating, use with caution.
- 2 Hazardous, avoid inhalation.
- 3 Severe hazard, use protective equipment.
- 4 Extreme hazard, do not breathe vapor or contact liquid.

The top diamond is red and represents fire hazard. The number within the top diamond ranges from 0 to 4.

- 0 Will not burn.
- 1 Must be preheated above 200 degrees Fahrenheit.
- 2 Has a flashpoint between 73-200 degrees Fahrenheit.
- 3 Flashpoint is below 73 degrees but has a boiling point above 100 degrees Fahrenheit.
- 4 The flashpoint is below 73 degrees and has a boiling point below 100 degrees Fahrenheit.

The right diamond is yellow and represents reactivity hazard. The number within the right diamond ranges from 0 to 4.

- 0 Normally stable.
- 1 Unstable if heated, possibly water reactive.
- 2 Violent chemical change possible.
- 3 Serious explosion hazard.
- 4 Extreme explosion hazard. Vacate area if material is exposed to fire.

The bottom diamond is white. This diamond is used to designate ACIDS, BASES, OXIDIZERS, SOLVENTS and NEUTRAL chemicals. These chemicals must be stored separately.

The SDS is used to determine which hazard codes apply to each chemical.

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SUMMARY

Some things to remember when working with a chemical are:

Never work alone. Employees engaged in hazardous activities should be within sight and hearing of another employee. These activities include chemical mixing, which involves toxic or reactive chemicals, certain laboratory activities and any processes where hazardous decomposition may occur.

Contact lenses should not be worn while working with chemicals because vapors can become trapped or adhere to the lens of your eye.

Employees should never eat or drink at workstations where chemicals or open containers are being used. After working with chemicals or before eating always, wash your hands.

If you detect any unusual odors in your work area, contact your foreman or supervisor. The presence of a chemical odor is not always a reliable detector. The odor of many chemicals can be sensed well below the safe level while the odor of other chemicals cannot be sensed until well above the safe level.

Before disposing of any chemical, check with your foreman or supervisor for proper procedures.

Do not mix chemicals with which you are not familiar. Two common chemicals that are lethal when mixed are bleach and ammonia. You may not be able to predict how some chemicals may react when mixed.

It is our company's responsibility to provide you with information and guidelines to follow when using chemicals; however, it is your responsibility as an employee to adhere to these guidelines. Your good health can never be replaced. Protect it in the work place as well as at home.

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COMMONLY USED TERMS IN MATERIAL SAFETY DATA SHEETS

The following are some terms commonly found on Safety Data Sheets (SDS) provided by manufacturers:

Vapor pressure: The pressure exerted by the vapor above a liquid surface usually expressed in millimeters of mercury. Molecules of a liquid are always in motion. The amount of motion depends upon the temperature of the liquid to the space above. The motion of the escaping molecules is confined to the space above if the liquid is in a closed container.

Specific gravity: The relative weight of a given volume of liquid compared to the weight of an equal volume of water. Most flammable liquids are lighter than water and most non-flammable liquids are heavier than water. For example, five gallons of isopropyl alcohol (a flammable liquid) weigh 32.85 pounds, five gallons of water weigh 41.55 pounds and five gallons of trichloroethane (a non-flammable liquid) weigh 59.85 pounds.

Flashpoint: The lowest temperature at which a liquid gives off enough vapor to form a flammable mixture with oxygen present in the air at the surface of the liquid or within a container. For example, the flashpoint of gasoline vapor is -40 degrees Fahrenheit. This means that at a temperature of -40 degrees Fahrenheit or above gasoline emits enough vapor to catch fire from a source of flame or spark.

Explosive range: The range of concentration of the flammable vapor in air in which a flash or fire can occur if the vapor is ignited. The upper and lower limits of the range are usually expressed in percent by volume. Any concentration below the lower limit is too lean to burn. Any concentration above the higher limit is too rich to burn. For example, the range for gasoline is 1.4% to 7.6%. The vapors will only burn between these limits.

Evaporation rate: The ratio of time required to evaporate a measured volume of a liquid to the time required to evaporate the same volume of a reference liquid (usually ethyl ether) under ideal test conditions. The higher the ratio of time required to evaporate a liquid versus a reference liquid, the slower the evaporation rate.

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Water solubility: The percentage of a substance that will dissolve in water. This is important in determining spill clean-up methods and extinguishing agents.

Percent volatile: The percentage of a liquid that will evaporate at room temperature. Gasoline is 100% volatile, which means over a period of time it will completely evaporate.

pH: A means of expressing the degree of acidity or alkalinity of a solution. The pH range is from 0 to 14. Water is neutral and has a pH of 7. A pH above 7 indicates an alkaline base; the higher the number the stronger the alkaline base. A pH below 7 indicates an acid; the lower the number the stronger the acid.

Threshold limit value (TLV): The time weighted average concentration for a normal 8-hour day and 40-hour week to which nearly all workers can be repeatedly exposed day after day without suffering any adverse effects. Because of wide variation in individual susceptibility, a small percentage of employees may experience discomfort from some substances at concentrations at or below the threshold limit; a smaller percentage may be affected more seriously by aggravation of a pre-existing condition or by development of an occupational illness. These limits are not fine lines between safe and dangerous concentrations.

Short-term exposure limits (STEL): A 15 minute time weighted average exposure, **which** should not be exceeded at any time during a workday even if the eight-hour time weighted average is within the TLV. Exposures at the STEL should not be longer than 15 minutes and should not be repeated more than 4 times a day. There should be at least 60 minutes between successive exposures at the STEL.

Ceiling limit: The concentration that should not be exceeded during any part of the working exposure.

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EMERGENCY RESPONSE INVOLVING HAZARDOUS MATERIALS INCIDENT

The following policies and procedures have been established to ensure the safety of employees and others in the event of a spill or leak of a hazardous material.

- A spill is an unexpected release of any hazardous material from a container.
- A leak is a release of any hazardous material from a container via a puncture or weak spot in the container.

All spills or leaks involving hazardous materials must be reported to our safety director and purchasing agent immediately.

Purchasing Agent
702-253-7878

Safety Director
702-253-7878

Our purchasing agent and/or safety director will coordinate all activity necessary to ensure the incident is handled in a safe and proper manner from initial response through testing, reporting, clean up and documentation including the following as deemed necessary:

- I. Identification of the spilled or leaked material and review of the Safety Data Sheet (SDS) for pertinent information that will be needed to handle the situation.
- II. Protective actions if necessary to preserve the health and safety of emergency responders and the public during an incident involving release of hazardous materials that have created a danger to health or the environment.
- III. Isolation of hazard area by denying access to the area by anyone not directly involved in emergency response operations, field work testing conducted due to the spill or leak or the clean-up of the hazardous material and contaminated area.
 - A. Anyone with access to the contaminated area must be required to wear appropriate personal protective equipment as advised on the SDS for the hazardous material involved in the incident.
- IV. Evacuation of people from a threatened area to a safer place if there is danger to an area surrounding the site of the spill or leak.
- V. Respond appropriately to correct the condition and return the situation to a safe condition. Assure all clean up and decontamination procedures are performed consistent with procedures and information available including data on SDS and in compliance with local agencies and EPA standards.
- VI. Notification of proper authorities and agencies as required by the situation.

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EMERGENCY RESPONSE INVOLVING HAZARDOUS MATERIALS INCIDENT

Every hazardous materials incident is different. Each will have special problems and concerns which is why it is important for employees to let the purchasing agent and/or Safety Director determine what actions are needed and coordinate the process as deemed necessary.

The following addresses and phone numbers are to be used to notify the proper authorities in case of an emergency involving a spill or leak of hazardous materials if an employee is unable to contact the purchasing agent or our Safety Director and an immediate danger exists:

Clark County Government Center
500 South Grand Central Parkway
Las Vegas, NV 89115
Phone: 702-455-0000

Department of Air Quality
4701 West Russell Road, Suite 200
Las Vegas, NV 89118
Phone: 702-455-5942

Fire Department Station 51
2626 East Carey
North Las Vegas, NV 89030
Phone: 702-649-4222

In An Emergency Dial 911

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

BLOOD BORNE PATHOGENS EXPOSURE CONTROL PROGRAM

In compliance with Federal Register 1910.1030(c)(1)(I) we have designed our Blood Borne Pathogens Control Program to eliminate or minimize employee exposure to blood borne pathogens. All foremen are to have a copy of Federal Register 1910.1030 in their procedure manuals for training and reference.

- I. Employees will receive instructions on how to access our Blood Borne Pathogens Exposure Control Program at time of hire in our safety program by going to the office.
 - A. Employees will receive blood borne pathogens awareness training from our new hire orientation program and through our weekly toolbox meetings prior to beginning work at a job site.

- II. Employees who work at job sites that have the following conditions have the potential for exposure to blood borne pathogens:
 - A. Effluent drained on ground when plumbers hook up to sewer systems.
 - B. Contaminants in restrooms when plumbers complete hook ups.
 - C. Exposure to contaminants in portable toilets.

- III. All supervisors are to have a first aid kit in their vehicle. Only supervisors are authorized to render first aid and they are limited to treatment of minor cuts and abrasions only. Medically trained personnel are not provided by the company.

- IV. “Good Samaritan” acts such as assisting another worker with an injury are considered an occupational exposure.

- V. Through our Blood Borne Pathogens Exposure Control Program, we provide awareness training of blood borne pathogen hazards to all employees. We do not provide protective equipment or supplies.
 - A. Universal precautions should be observed to prevent contact with blood or potentially infectious materials. Where it is difficult to differentiate between body fluid types all such body fluids shall be considered potentially infectious materials.

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BLOOD BORNE PATHOGENS EXPOSURE CONTROL PROGRAM

- B. The following practices should be observed to minimize exposure.
 - 1. Wash or use antiseptic soap immediately after contamination.
 - 2. Perform all procedures involving blood or potentially infectious materials in such a manner as to minimize splashing, spraying or generation of droplets of these substances.

- VI. If there has been an exposure incident you are entitled to a confidential medical evaluation and a follow up evaluation; however, you must report such an incident to your foreman Immediately.
 - A. Your exposure to bodily fluids must be reported to your supervisor or the Safety Director.
 - B. You must have blood drawn no later than 10 calendar days after exposure.
 - C. You must have blood tested for HIV by antibody testing no later than 30 calendar days after exposure and test results must be negative.
 - D. You must be tested or diagnosed with as HIV positive no later than 18 months after exposure.
 - E. You must file a worker's compensation claim with Par 3 no later than one year from the date of diagnosis, or positive blood tests if you wish to receive benefits under the worker's compensation system.

- VII. Supervisors are to complete a Supervisor's Report of Injury form when an exposure to blood borne pathogens incident is reported to them and submit the report to our Safety Director who will present the report to our General Safety Committee at the next meeting for their review.

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INFECTION CONTROL PROGRAM

It is our policy that medical care will be provided for employees who have been exposed to a communicable disease on the job. We will ensure job placement does not compromise the health and safety of employees. We will maintain confidentiality of all records.

- I. Employees will receive our Infection Control Program and training as follows:
 - A. At time of hire by accessing our safety program at the office upon request.
 - B. At a toolbox meeting conducted by foremen prior to beginning work at a job site.

- II The following are types of communicable diseases.
 - A. HIV - Human Immunodeficiency Virus.
 - B. MRSA - Methicillin Resistant Staphylococcus Aureus.
 - C. TB - Tuberculosis.
 - D. Hepatitis B Virus.

- III. There is a potential for exposure to communicable diseases through the following conditions.
 - A. Punctures.
 - B. Lacerations.
 - C. Mucous membrane exposure (splash in eye or nose).
 - D. Contamination of open wound.

- IV. MRSA is an infection caused by bacterium “staphylococcus aureus” or “staph” also known as a “super bug” which has become resistant to many of the commonly used antibiotics. There are two strains that exist and are based on the origin of exposure - HA-MRSA (hospital acquired) and CA-MRSA (community acquired). Please note the following information regarding MRSA.
 - A. Anyone can get MRSA. Persons most susceptible have significant exposure to bodily fluids or skin contact or in the regular course of employment have involvement handling or exposure to MRSA.

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INFECTION CONTROL PROGRAM

- B. Avoid contact with others that have uncovered wounds.
- C. Do not share personal items that come in contact with your skin, nose, mouth or other areas with exposed bodily fluids. These items include but are not limited to respirators, clothing, uniforms and towels that may have come in contact with the infected wounds.
- D. MRSA is transmitted primarily by person-to-person contact with secretions from skin lesions, nasal discharge or by hand.
- E. MRSA begins as a pimple that has popped, begins to drain and/or has pus. It appears like a spider bite, a boil or infected mosquito bite that progresses to a painful swollen red area with drainage.
- F. The following facilitate transmission of MRSA.
 - 1. Contact - avoid skin-to-skin contact with people.
 - 2. Contaminated surfaces - equipment, shared items.
 - 3. Compromised skin - cuts, abrasions.
 - 4. Crowding - assembly areas.
 - 5. Lack of cleanliness - absence of proper hygiene or housekeeping.
- G. MRSA prevention is based on awareness, cleanliness and education.
 - 1. Disinfect areas most likely to be contaminated with one part bleach and ten parts water.
 - 2. Wash hands regularly with soap and water or use a 60% or more alcohol base sanitizer.
 - 3. Keep cuts and wounds clean and covered by bandages until healed.
 - 4. Develop a written cleaning schedule listing items and surfaces to be disinfected using bleach or alcohol where applicable.
 - 5. Bandages should be discarded in a separate plastic bag. Remove bandages while wearing plastic gloves and discard with bandage.
- V. Immediately following exposure to communicable diseases the following steps should be taken.
 - A. Lacerations and punctures should be cleansed with topical antiseptic solution and 60% or higher alcohol.
 - B. Mucous membrane exposure (eye, mouth, nose or ear) should be flushed with water.

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INFECTION CONTROL PROGRAM

- C. Employee should report the exposure to foreman immediately and complete worker compensation injury report notifying our office of exposure. Supervisor and employee are to ensure that the employee receives medical attention at the clinic, or Call 911 if it is a potentially life-threatening situation.
 - D. Tetanus vaccine should be administered if not previously done within the last ten years.
- VI. Employee cooperation is required for infection control.
- A. Employee will be required to participate in medical follow up.
 - B. If employee refuses to be tested for HIV, AIDS, virus, MRSA, etc. employee must sign a release form.
 - C. Workers compensation will be notified of the incident and all action taken to date.
 - D. Physical exams and lab tests will be completed based upon the most current Center for Disease Control (CDC) protocol.
 - E. Employee will sign a consent form for testing.
 - F. Employee shall be evaluated clinically and serologically for evidence of infection as soon as possible after exposure.
 - G. If employee does not want to continue follow up after initial testing demonstrates negative antibody response the employee must sign a release slip.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

PERSONAL PROTECTIVE EQUIPMENT ASSESSMENT, SELECTION AND TRAINING

If hazards necessitating the use of personal protective equipment are present or likely to be present, responsibilities of our foremen will include the following prior to beginning work at a job site:

- I. Foremen are to assess hazards requiring personal protective equipment at the job site utilizing our Task Hazard Analysis (THA) form. The THA form will need to be filled out documenting the analysis was completed and training that is determined will be required.
 - A. **SURVEY:** Conduct a walk-through of the areas in question. The purpose of the survey is to identify sources of hazards to workers and co-workers. Consideration should be given to the following basic hazard categories:
 1. Impact
 2. Penetration
 3. Compression (roll over)
 4. Chemical
 5. Heat
 6. Harmful dust
 7. Light (optical)
 8. Other
 - B. **SOURCES:** During the walk-through survey foreman should observe:
 1. Sources of motion (i.e. machinery or processes where any movement of tools, machine elements or particles could exist or movement of personnel that could result in collision with stationary objects).
 2. Sources of high temperatures that could result in burns, eye injury or ignition of protective equipment, etc.
 3. Types of chemical exposures.
 4. Sources of harmful dust.
 5. Sources of light radiation (i.e. welding, brazing, cutting, furnaces, heat treating, high intensity lights, etc.).
 6. Sources of falling objects or potential for dropping objects.
 7. Sources of sharp objects, which might pierce the feet or cut the hands.
 8. Sources of rolling or pinching objects, which could crush the feet.
 9. Layout of work place and location of co-workers.
 10. Electrical hazards.
 11. Sources of sound, which could be a hazard.
 12. Location of emergency equipment.
 13. Hazard warning signs (or lack of).
 14. Injury/accident data should be reviewed with our Safety Director to help identify problem areas.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

PERSONAL PROTECTIVE EQUIPMENT ASSESSMENT, SELECTION AND TRAINING

- II. After gathering information for the job site assessment by the walk-through survey, foremen need to organize and analyze data.
 - A. **ORGANIZE DATA:** Organize the data and information for use in the assessment of hazards. The objective is to prepare an analysis of the hazards in the environment to enable proper selection of protective equipment.
 - B. **ANALYZE DATA:** Having gathered and organized data on a work place an estimate of the potential for injuries should be made. Each of the basic hazard categories (shown under “Survey”) should be reviewed and a determination made as to the type, level of risk and seriousness of potential injury from each of the hazards found in the area. The possibility of exposure to several hazards simultaneously should be considered. Use our Assessment of Hazards Necessitating the Use of Personal Protective Equipment Checklist as a guide.
 - C. **REASSESSMENT OF HAZARDS:** It is the responsibility of foremen to reassess the work place hazard situation as necessary by identifying and evaluating new equipment and processes, reviewing accident records with our Safety Director and reevaluating the suitability of previously selected personal protective equipment.
- III. Supervisors are to select and have each affected employee use the types of personal protective equipment that will protect the affected employee from hazards identified in the hazard assessment.
 - A. Become familiar with potential hazards, the type of protective equipment that is available and what it can do (i.e. splash protection, impact protection, etc.).
 - B. Compare the hazards associated with the environment (i.e. impact velocities, masses, projectile shape, radiation intensities) with the capabilities of the available protective equipment.
 - C. Select the protective equipment, which ensures a level of protection greater than the minimum required to protect employees from the hazards.
- IV. Supervisors are to communicate selection decisions to each affected employee, fit the user with the protective device and give instructions on care and use of the personal protective equipment. It is very important that users be made aware of all warning labels for and limitations of their personal protective equipment.
- V. Foremen are to select personal protective equipment that properly fits each affected employee.
 - A. **FITTING THE DEVICE:** Careful consideration must be given to comfort and fit. Personal protective equipment that fits poorly will not afford the necessary protection. Continued wearing of the device is more likely if it fits the wearer comfortably.

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PERSONAL PROTECTIVE EQUIPMENT ASSESSMENT, SELECTION AND TRAINING

Protective devices are generally available in a variety of sizes. Care should be taken to ensure the right size is selected.

- B. DEVICES WITH ADJUSTABLE FEATURES:** Adjustments should be made on an individual basis for a comfortable fit that will maintain the protective device in the proper position. Particular care should be taken in fitting devices for eye protection against dust and chemical splash to ensure devices are sealed to the face. In addition, proper fitting of hard hats is important to ensure they will not fall off during work operations. In some cases, a chinstrap may be necessary to keep a hard hat on an employee's head. (Chinstraps should break at a reasonably low force, however, to prevent a strangulation hazard.) Manufacturer's instructions should be followed carefully.

- VI.** Supervisors are to follow these guidelines in selecting specific types of personal protective equipment and training employees on potential hazards and the proper use, maintenance and limitations of personal protective equipment.

A. SELECTION GUIDELINES FOR EYE AND FACE PROTECTION:

1. Each affected employee shall use appropriate eye or face protection when exposed to eye or face hazards from flying particles, molten metal, liquid chemicals, acids or caustic liquids, chemical gases or vapors, or potentially injurious light radiation.
2. Each affected employee shall use eye protection that provides side protection when there is a hazard from flying objects. Detachable side protectors (i.e. clip-on or slide-on side shields) meeting the pertinent requirements of this section is acceptable.
3. Each affected employee who wears prescription lenses while engaged in operations that involve eye hazards shall wear eye protection that incorporates the prescription in its design or shall wear eye protection that can be worn over the prescription lenses without disturbing the proper position of the prescription lenses or the protective lenses.
4. Eye and face personal protective equipment shall be distinctly marked to facilitate identification of the manufacturer.
5. Each affected employee shall use equipment with filter lenses that have a shade number appropriate for the work being performed for protection from injurious light radiation.
6. Foremen are to refer to the Federal Register 29 CFR Part 1910 Subpart I and the Occupational Safety and Health Standards for the Construction Industry, CFR 29, Part 1926 Subpart E for tables and guidance in the proper selection of eye and face protection to protect against specific hazard sources.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

PERSONAL PROTECTIVE EQUIPMENT ASSESSMENT, SELECTION AND TRAINING

- B. **SELECTION GUIDELINES FOR HEAD PROTECTION:** All head protection is designed to provide protection from impact and penetration hazards caused by falling objects. Head protection is also available which provides protection from electric shock and burn. When selecting head protection knowledge of potential electrical hazards is important. Foremen are to refer to Federal Register 29 CFR Part 1910 Subpart I for guidelines on different classes of hardhat protection. Where falling object hazards are present hard hats must be worn. Examples of falling object hazards are as follows:
1. Working below other workers who are using tools and materials, which could fall.
 2. Working around or under conveyor belts, which are carrying parts or materials.
 3. Working below machinery or processes, which might cause material or objects to fall.
- C. **SELECTION GUIDELINES FOR FOOT PROTECTION:** Safety shoes and boots which meet the ANSI Z-41-1991 Standard provide both impact and compression protection. Where necessary safety shoes can be obtained which provide puncture protection. In some work situations, metatarsal protection should be provided and in other special situations, electrical conductive or insulating safety shoes would be appropriate.
1. Safety shoes or boots with impact protection would be required for carrying or handling materials such as packages, objects, parts or heavy tools which could be dropped as well as for other activities where objects might fall onto the feet.
 2. Safety shoes or boots with compression protection would be required for work activities involving skid trucks (manual material handling carts), around bulk rolls and around heavy pipes all of which could potentially roll over an employee's foot.
 3. Safety shoes or boots with puncture protection would be required where sharp objects such as nails, wire, tacks, screws, large staples, scrap metal, etc. could be stepped on by an employee causing a foot injury.
- D. **SELECTION GUIDELINES FOR HAND PROTECTION:** Gloves are often relied upon to prevent cuts, abrasions, burns and skin contact with chemicals that are capable of causing local or systemic effects following dermal exposure. OSHA is unaware of any gloves that provide protection against all potential hand hazards and commonly available glove materials provide only limited protection against many chemicals; therefore, it is important to select the most appropriate glove for a particular application and to determine how long it can be worn and whether it can be reused.

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PERSONAL PROTECTIVE EQUIPMENT ASSESSMENT, SELECTION AND TRAINING

It is also important to know the performance characteristics of gloves relative to the specific hazard anticipated (i.e. chemical hazards, cut hazards, flame hazards, etc.). These performance characteristics should be assessed by using standard test procedures. Before purchasing gloves, our purchasing agent will request documentation from the manufacturer showing the gloves meet appropriate test standard(s) for the hazard(s) anticipated.

Other factors to be considered for the glove selection in general include:

1. As long as the performance characteristics are acceptable, in certain circumstances it may be more cost effective to regularly change cheaper gloves than to reuse types that are more expensive.
2. The work activities of the employee should be studied to determine the degree of dexterity required, the duration, frequency and degree of exposure to the hazard and the physical stresses that will be applied.
3. In selecting gloves for protection against chemical hazards the toxic properties of the chemical(s) must be determined; in particular, the ability of the chemical to cause local effects on the skin and/or to pass through the skin and cause systemic effects.
 - a. Generally any “chemical resistant” glove can be used for dry powders.
 - b. For mixtures and formulated products, (unless specific test data is available) a glove should be selected based on the chemical component with the shortest breakthrough time since it is possible for solvents to carry active ingredients through polymeric materials.
 - c. Employees must be able to remove gloves in such a manner as to prevent skin contamination.

E. **SELECTION GUIDELINES FOR HEARING PROTECTION:** Wherever it is not feasible to reduce the noise levels or duration of exposures to those specified in Table D-2 Permissible Noise Exposures, Occupational Safety and Health Standards for the Construction Industry (29 CFR Part 1926.52) ear protective devices shall be provided and used.

1. Ear protective devices inserted in the ear shall be fitted or determined individually by competent persons.
2. Plain cotton is not an acceptable protective device.

F. **SELECTION GUIDELINES FOR RESPIRATORY PROTECTION:** See section in this Safety Program on our Respiratory Protection Program.

G. **CLEANING AND MAINTENANCE:** It is important that all personal protective equipment be kept clean and properly maintained. Cleaning is particularly important for eye and face protection where dirty or fogged lenses could impair vision.

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PERSONAL PROTECTIVE EQUIPMENT ASSESSMENT, SELECTION AND TRAINING

1. Personal protective equipment should be inspected, cleaned and maintained at regular intervals so that the personal protective equipment provides the requisite protection.
 2. Contaminated personal protective equipment, which cannot be decontaminated, should be disposed of in a manner that protects employees from exposure to hazards.
- H. **TRAINING:** The following guidelines specify training employees are to receive after a foreman has completed an assessment of a job site, determined hazards necessitating the use of personal protective equipment and has selected the appropriate personal protective equipment. Foremen are to use our Personal Protective Equipment Training Checklist as a guide.
1. When personal protective equipment is necessary.
 2. What personal protective equipment is necessary.
 3. How to properly put on, adjust and wear personal protective equipment selected.
 4. Limitations of personal protective equipment selected.
 5. Proper care, maintenance, useful life and disposal of personal protective equipment selected.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

SUBSTANCE ABUSE POLICY

Par 3 Landscape & Maintenance endeavors to maintain a safe, healthy work environment. Our written Substance Abuse Policy/Drug and Alcohol Testing Policy is an important part of our Safety Program. It prohibits the unlawful use of controlled substances under Nevada criminal statutes or alcohol within company property, vehicles and job sites. It also prohibits the unlawful use of controlled substances such as prescription drugs including medical marijuana or alcohol away from work in a manner that impairs an employee's abilities while at work. **All employees need to read, understand and abide by this policy.**

- I. Do not bring alcohol or drugs, including medical marijuana, to the work place. The possession or sale of alcohol and/or drugs, including medical marijuana, within the company's offices, vehicles, job sites or supporting areas (yards, parking lots, etc.) on company time will be grounds for immediate termination. Use of illegal drugs, prescription drugs including medical marijuana, and alcohol that may impair an employee's performance at work is strictly prohibited in maintaining the highest standards of worker safety.
- II. The use of alcohol or drugs at any time such that it could adversely affect the safe performance of your job will be grounds for immediate termination. The company will not tolerate any employee being impaired at work from use of alcohol or drugs, legal or illegal.
 - A. If you are taking a prescription or over-the-counter drug, you are personally responsible for confirming with your physician that you may safely perform your normal job duties while taking it.
 - B. If you are taking a drug, including medical marijuana that could impair your performance you must advise your foreman and safety director. If duties, which are not hazardous, are available, your foreman or safety director will reassign you; otherwise, you will not be allowed to work. Employees should not report to work impaired.
 - C. The company expects every employee to report to work without alcohol or drugs in their system and to remain that way while at work. Employees are warned that some drugs, especially marijuana, remain in the system for extended periods. Usage of such drugs even away from the work place may lead to violation of this policy in that they may impair an employee's abilities and safe performance of their job duties.
 - D. Substance abuse of any kind while driving a company vehicle will be grounds for immediate termination.
- III. Urine, saliva and any other tests deemed appropriate to determine whether there are drugs, including medical marijuana, or alcohol in your system may be required at the discretion of our safety director, supervisor or management. Generally testing will also be required under the following conditions:

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Reports have been made to us of the possibility of you using or dealing illegal drugs.

You receive an injury requiring medical attention.

Employees who require medical attention after a work place injury are required to submit to an alcohol impairment test and a drug to detect the use of any controlled substances within two hours after we have been notified of the injury.

Employees are reminded that all injuries must be reported to their manager, supervisor, or the safety director. Immediately, and our Employee Report of Injury form must be completed and submitted to the office as soon as possible.

You are scheduled to work at a job site where the general contractor or owner requires drug testing prior to allowing employees on the job site or requires random drug testing.

Employees who have a CDL driver's license and a CDL medical card and who are working in the capacity as a CDL driver for Par 3 may be subject to random drug/alcohol tests. The time and location of the test will be determined by the CDL driver's supervisor.

- IV. Any employee who refuses to be tested is subject to termination. All testing must occur within two hours after the directive requiring it. Approved clinics in Nevada will be utilized for alcohol impairment, post injury or random drug testing. Employees are reminded that all
 - A. Upon written request employees have the right to obtain a copy of their written test results.
 - B. Test results for employees will be maintained in confidential files separate from other personnel documents.

- V. Any employee who tests positive for drugs, including medical marijuana or alcohol will receive a Pre-Adverse Action Disclosure notice along with a copy of the test results and a copy of Summary of Your Rights Under the Fair Credit Reporting Act. An employee who feels the information shown on the test results is not accurate should notify us immediately and may request a retest of the original specimen.

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- A. If the retest is positive or an uncontested original test is positive the employee will receive an adverse action notice and may be immediately terminated, and will not be allowed to return to work until a negative test result is obtained and only then at the discretion of management.
 - B. If management determines an employee may return to work after a negative test is obtained at a later date, the employee will be subject to frequent random testing.
 - C. Upon written request employees have the right to explain in a confidential setting a positive test result. An exception will be made for individuals who test positive for off-duty marijuana use but have a valid prescription for medical marijuana consistent with Nevada statutes; however, it should be noted employees will not be allowed to work “impaired” or “under the influence” of marijuana. Use of illegal drugs, medical marijuana and alcohol at work is strictly prohibited in maintaining the highest standards of worker safety. Any employee found to be under the influence of these substances or impaired at work will be terminated immediately.
- VI. The company’s management and its agents have the right to search its offices, vehicles, job sites and supporting areas (yards, parking lots, etc.) for alcohol and drugs, including medical marijuana.

If you have questions concerning our substance abuse policy/drug and alcohol testing policy, please discuss them with your foreman/ supervisor or our safety director. It is the responsibility of every employee to understand and abide by this policy.

Any employee who has a problem with drugs or alcohol is encouraged to come forward. An employee voluntarily admitting they have an alcohol or substance abuse problem will not be terminated or disciplined but they will be required to abide by frequent random alcohol and drug testing and must receive negative test results in order to continue working.

In order to provide a safe, healthy working environment for all employees, we must keep drugs, alcohol and impaired individuals out of our work environments.

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EARTH MOVING EQUIPMENT PROGRAM

The CFR 1926.602 standard states that only certified, trained employees may use or operate earth-moving equipment. The manufacturer's operation and safety manuals are considered an important part of the earth moving equipment and our safety program. They are to be kept on the machine in a storage compartment and are to be utilized by users and operators of this equipment.

The purpose of our safety program guidelines is to provide policies, procedures and common sense reminders for the use and maintenance of earth moving equipment. It is our intent to promote a safe working environment for all employees.

I. BASIC JOB SITE SAFETY

A. Prior to starting work at any job site our task hazard analysis (THA) needs to be utilized to determine what, if any personal protective equipment will be required by the job conditions. See the "Personal Protective Equipment Assessment, Selection and Training", and "Respiratory Protection Program" sections of our safety program for more detailed information. General items to review include the following:

1. Hard hats
2. Safety shoes
3. Safety glasses, goggles or face shield
4. Work gloves
5. Hearing protection
6. Fall protection requirements
7. Respirator or filter mask

B. Know emergency procedures for the job site location where you will be working.

1. Find out where fire extinguishers and emergency equipment are located.
2. Find out where emergency help can be obtained in a hurry.
3. Find out where the closest emergency medical facilities are located.

II. SAFETY GUIDELINES PRIOR TO USE OF EARTH MOVING EQUIPMENT

A. Know how to operate the piece of machinery you are using.

1. Purpose of all controls, gauges and dials.
2. Rated workload, speed range, braking and steering characteristics, turning radius and operating clearances.
3. Read, understand and follow the "DANGER", "WARNING", "CAUTION" and other signs on the piece of equipment.

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4. Read and understand the manufacturer's operator's manual before using the piece of equipment. Notify your supervisor or the safety director if the manual is not located on the equipment.
5. If there is something in the manufacturer's manual you don't understand, discuss it with our safety director or your supervisor before using any piece of equipment.

III. PROTECTIVE AND SAFETY DEVICES

- A. All protective and safety devices are to be kept in place and in proper working order. Make certain all guards, railings, covers, emergency shutoff switches and safety signs are installed. These may include the following:
 1. Gate, chain and/or bar closures
 2. Safety bars (mechanical locks)
 3. Stabilizers or outriggers
 4. Extending axles
 5. Turntable lock
 6. Emergency controls
 7. Interlock devices
 8. Continuously activated control
 9. Ground controls
 10. Control lever locks
 11. Audible and/or visual alarms
- B. Know which devices are required on the piece of equipment you are using.
- C. Never remove or modify protective or safety devices.

IV. SAFETY INSPECTION PRIOR TO USE OF EARTH MOVING EQUIPMENT

- A. Before using an earth moving machine it must be inspected.
 1. Check for missing, damaged or unreadable safety signs.
 2. Check for broken, missing, damaged or loose parts.
 3. Check pivot pins for damaged or missing retaining devices.
 4. Check the tires for cuts, bulges and pressure as specified by the manufacturer.
 5. Perform all maintenance procedures outlined by the manufacturer.
 6. Check for cracked welds and other evidence of structural damage.
 7. Check hydraulic system for leaks and damage.
 8. Check outriggers, stabilizers and extending axles if the machine is so equipped.

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9. Check control stations including auxiliary/emergency controls.
10. Check seatbelt function.

- B. Any piece of equipment that does not pass inspection needs to be removed from service until the deficiencies are corrected.

IV. EARTH MOVING EQUIPMENT PREPARATIONS

- A. As part the maintenance of earth moving equipment and as part of our safety program the equipment needs to be kept clean and safe.

1. Before attempting to clean earth-moving equipment, be sure to apply the brakes, chalk the wheels, and turn off the engine.
2. Clean steps, railings, ladders and the floor. Remove grease and/or oil. Brush away dust or mud.
3. Replace slip-resistant tape or paint as required. Slippery surfaces can be hazardous.
4. Keep work surfaces and elevating mechanisms clean and clear of debris.
5. Do not leave tools, equipment or materials lying on the floor. Loose items on the floor can cause an accident.

- B. All attachments must be lowered to the stowed position and all power turned off before fueling.

- C. Charge batteries only in a well-ventilated area.

VI. GROUND OR FLOOR LEVEL WORK AREA SAFETY

- A. Inspect the surface over which you will travel and work.

1. Look for holes, debris, obstacles, drop-offs or rough spots.
2. Look for weak spots or covers on ramps or floors.
3. Look for oil spills, wet spots, slippery surfaces, soft soil or standing water.

- B. Watch for anything that might make you lose control or cause the machine to tip over.

1. Clean away debris and trash.
2. Pick up anything that might puncture a tire.
3. Make sure aisles, ramps, doorways and passages are clear.

- C. Make sure you know how you will approach the overhead work area and where you will place the machine for proper clearance and be able to maintain the proper distance from electrical lines and apparatuses.

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VII. EARTH MOVING EQUIPMENT STARTING AND TESTING SAFETY

- A. Walk completely around the piece of machinery making sure no one is under it, on it or close to it before starting the equipment. Let other workers and bystanders know you are starting the equipment and wait until everyone is clear.
- B. Use precautions while getting on or off a piece of earth moving equipment.
 - 1. Use handrails, ladders or steps (as provided) when mounting the machine.
 - 2. Never use control levers as a handhold when climbing on or off equipment.
 - 3. Never step on foot controls when climbing on or off.
 - 4. Never attempt to get on or off moving equipment.
 - 5. Never jump from a piece of equipment, always use 3 points of contact to enter or leave a work platform.
- C. Make certain that all fenders, brakes, are in proper working order and in accordance with 1926.602(a)(4) and 1926.602(a)(5).
- D. Follow the starting procedures recommended by the manufacturer of the earth-moving piece of equipment. Check all instruments, gauges and indicator lights.
 - 1. After starting the equipment, recheck all gauges and lights. Check the audible and/or visual alarms (if provided).
 - 2. Make sure everything is functioning correctly. Check all control functions including emergency stop mechanism if equipped. If any deficiencies are found report them and remove the machine from service until it has been repaired.

VIII. EARTH MOVING EQUIPMENT OPERATION

- A. Make sure the earth moving equipment is ready for the job you want it to do. Know the rated workload of the equipment and do not exceed it.
- B. Before raising any attachments make sure that the load is even placed.
- C. Do not carry materials in the driver's compartment unless the machine is specifically designed to do so.
- D. Do not at any time add a load that exceeds the rated capacity of the equipment.
- E. Do not carry overhanging loads unless approved by the manufacturer.
- F. Check the work area for hazards that might cause the earth moving equipment to tip over. Any time a machine is being used to lift or dig the outriggers must be activated.

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EARTH MOVING EQUIPMENT PROGRAM

- G. Maintain specified distances from electric power lines and apparatuses (refer to manufacturer's manual).
- H. Under the OSHA construction standard pertaining to material handling equipment, equipment covered by 29 CFR 1926.602(a) ("earthmoving equipment"), must have ROPS. Section 1926.602(a)(6) requires such equipment to have ROPS in accordance with the requirements in 1926 subpart W (1926.1000-1926.1003), because the uneven surfaces that are typical of construction sites pose a danger of roll-over.

IX. EARTH MOVING OPERATING PRACTICES

- A. Operate controls smoothly.
 - 1. Never jam an operating control from one travel direction to the other. Return to neutral, stop and then proceed in the other direction.
 - 2. Avoid sudden stops, starts, turns or changes in direction.
 - 3. Never attempt to work the controls except from the operator's control station.
- B. Never leave the work platform without first lowering all attachment to the ground and turning off the machine.
- C. If the machine needs to be left unattended lower the attachments, shut off the engine, engage the parking brake and take necessary steps to prevent unauthorized use in accordance with the manufacturer's instruction manual.
- D. Never override any hydraulic, mechanical or electrical safety device.
- E. When driving the equipment keep hand and feet inside the vehicle at all times.
- F. Stay alert as to the condition of the machine. If something on it breaks, loosens or malfunctions stop using the equipment immediately.
 - 1. Stop work, shut off the engine and report the problem immediately.
 - 2. Do not operate the equipment again until the condition has been corrected by authorized personnel.
- G. Never allow unqualified, untrained or unauthorized persons to operate any piece of earth moving equipment.
- H. Keep everyone clear of a piece of earth moving equipment.
 - 1. Never allow ground personnel near the machine.
 - 2. Never permit anyone to stand or pass under a raised load.
 - 3. Make certain everyone is clear of the equipment before you begin lowering the attachments.
 - 4. Never drive an earth-moving machine up to someone standing in front of a fixed object.
 - 5. Never move or position any part of an aerial platform over anyone.

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EARTH MOVING EQUIPMENT PROGRAM

X. EARTH MOVING TRAVEL SAFETY

- A. Before traveling on equipment, be sure you are wearing your seatbelt.
- B. Whenever possible travel with attachments as low to the ground as possible, or stowed position for maximum stability.
- C. Limit travel speed to ground conditions and operate controls slowly and smoothly. When traveling at a high speed avoid sharp turns and sudden stops. Allow sufficient distance for a safe stop.
- D. Before moving your earth moving equipment, know and understand the manufacturer's restrictions regarding travel of the equipment including as applicable:
 - 1. Position of stabilizers and/or outriggers.
 - 2. Position of extendible axles.
 - 3. Attachment position
 - 4. Traversing or elevating on grades or slopes.
- E. Always keep your attention in the direction of travel and be sure to check clearance above, below and on all sides. Use a lookout when your view is obstructed.
- F. Do not use "high" speed in confined areas.
- G. When traveling with the attachment in a raised position (only as approved by the manufacturer) use extreme caution and very slow speed. Pay particular attention to overhead hazards and your travel path.
- H. Do not tow an earth-moving piece of machinery without referring to your manufacturer's manual for specific towing instructions.
- I. Never drive an attachment into a stationary object.
- J. Never use the bucket to push the earth-moving machine along the ground or attempt to free the equipment by lifting the wheels off the ground with the bucket.
- K. Never use the equipment to push or pull another object and never push or pull the equipment by another vehicle except as approved by the manufacturer.

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XI. RAISE AND LOWER ATTACHMENTS SAFELY

- A. Make sure the equipment is on firm level ground before using the bucket to dig.
- B. If so equipped make sure extendible axles, outriggers or stabilizers are fully deployed.
 - 1. Outriggers or stabilizers may require blocking to provide a stable load-bearing surface.
 - 2. Always check clearance on both sides of the equipment before extending outriggers, stabilizers or axles.
- C. If the attachments of the equipment become entangled with an adjacent structure do not attempt to free the equipment by pushing pulling or tugging. Call for assistance from appropriate qualified personnel to free the equipment.
- D. Never alter, remove or substitute any item, which would reduce the overall weight or base stability of the equipment such as counterweights, foam filled tires, batteries, etc.
- E. When lowering the attachments to the ground the operator must make sure that all other personnel and objects remain clear of the descending attachment or load and other movable parts of the machine.
- F. When the attachment has been raised be extremely cautious to prevent any object from striking or interfering with the operating controls.

XII. GENERAL EARTH MOVING EQUIPMENT SAFETY GUIDELINES

- A. Secure all materials to keep them from shifting or falling.
- B. Keep the floor clear of debris and loose objects, which might cause you to slip.
- C. Under no circumstances may an employee use an earth moving piece of equipment as a work platform (i.e. bucket).
- D. Do not lean outside of the cab under any circumstances.
- E. Seatbelts must be work at all times as well as all other forms of PPE.

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- F. Never allow anyone to tamper with, service or operate a piece of machinery while personnel are on the platform except for in an emergency situation.

XIII. EARTH MOVING EQUIPMENT SAFETY

- A. When transporting the earth moving equipment on a truck or trailer know the overall height to avoid contacting overhead obstructions such as bridges, power lines, etc.
- B. Refer to the manufacturer's manual when preparing an earth-moving machine for transport.
Make sure all tie downs and blocks are in place and the attachments are completely lowered and secured in the stowed position.
- C. If the earth moving equipment is to be hauled refer to the manufacturer's manual for loading procedures. Check truck and ramp capacities and grade of incline.
- D. Never raise, swing or rotate the attachments while equipment is loaded on a truck for transporting.
- E. Do not tow earth-moving equipment without referring to the manufacturer's manual for specific towing instructions.

XIV. EARTH MOVING EQUIPMENT PARKING SAFETY

- A. Park your equipment in a designated area or in an out-of-traffic area and only on level ground.
- B. Wheels must be chocked, and the parking brake must be set.

XV. EARTH MOVING EQUIPMENT SHUTDOWN SAFETY

- A. Travel to a suitable parking area.
 - 1. Place attachments in the stowed position.
 - 2. Come to a full stop
 - 3. Place controls in neutral.
 - 4. Idle engine for gradual cooling.
 - 5. Shut off engine or electrical power.
 - 6. Take necessary steps to prevent unauthorized use.

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- B. Refer to the manufacturer's instruction manual for specific requirements of each type of earth moving equipment regarding the shutdown procedure.

XVI. EARTH MOVING DISMOUNTING SAFETY

- A. Observe proper shutdown practices before dismounting.
- B. Never dismount from moving equipment.
- C. Dismount carefully keeping your feet and hands away from the controls.
- D. Always maintain 3 points of contact while dismounting.
- E. Never jump off any piece of machinery.

XVII. EARTH MOVING EQUIPMENT TIRE AND WHEEL SAFETY

- A. Check tires.
 - 1. Correct pressure.
 - 2. Cuts or bulges.
 - 3. Nails or spikes.
 - 4. Uneven or excessive wear.
 - 5. Missing valve caps.
- B. Check wheels.
 - 1. Damaged rims.
 - 2. Missing or loose wheel nuts, bolts or bearing caps.
 - 3. Proper torque specifications (refer to manufacturer's manual).
 - 4. Obvious misalignment.
- C. Have cuts or punctures repaired by authorized personnel before adding air. If pneumatic refer to manufacturer's manuals for inflation procedures.
- D. Tires are to be repaired only by a Par 3 Mechanic or an authorized tire repair center using the proper procedures and safety equipment.

Do not operate an earth moving piece of equipment unless you have been properly trained, the equipment has been inspected, is in good operating condition and has all safety devices in place.

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FALL PROTECTION PROGRAM

On July 6, 1995, Occupational Safety and Health Standards for the Construction Industry, CFR 29, Part 1926, and Subpart M Fall Protection went into effect. OSHA has consolidated construction related fall protection requirements in one place under Subpart M. The new Subpart M standard consists of the following:

- 1926.500: Scope, application and definitions applicable to Subpart M.
- 1926.501: Duty to have fall protection.
- 1926.502: Fall protection systems criteria and practices.
- 1926.503: Training requirements.
- Appendix A: Determining roof widths.
- Appendix B: Guardrail systems.
- Appendix C: Personal fall arrest systems.
- Appendix D: Positioning device systems.
- Appendix E: Sample fall protection plans.

Our supervisors will have a copy of the complete Subpart M standard in their Procedure Manual for training and reference. Copies are also available in the office.

The new Subpart M for fall protection includes harnesses, lifelines, lanyards, safety nets, covers, guardrails and the safety monitoring and warning line systems. Other construction related standards have unique fall protection requirements. Their requirements are exceptions to the new Subpart M and supersede it as follows:

- Subpart R Steel Erection
- Subpart S Underground Construction, Caissons, Cofferdams, and Compressed Air
- Subpart V Power Transmission and Distribution
- Subpart X Stairways and Ladders

The requirements of the new Subpart M do not apply when making an inspection, investigation or assessment of a job site prior to construction work commencing or after the project has been completed. Anytime during construction, however, all employees exposed to fall hazards regardless of job function must be protected from falls by at least one of the OSHA required methods.

Prior to beginning work at any job site a Task Hazard Analysis (THA) will be completed of the job site and our work procedures to identify fall hazards and determine what elements of this standard are applicable. Our safety director, supervisors, foremen and purchasing agent will be responsible for determining when we will be able to utilize conventional fall protection systems and when it may be necessary to use alternative systems.

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If it is determined that it will be infeasible or will create a greater safety hazard to use a conventional fall protection system during some leading edge work and/or during residential construction activities our company may develop and implement a written fall protection plan specifically for that job site. If an alternative fall protection system is used the written fall protection plan developed must meet the specific requirements identified in Subpart M.

In determining whether conventional fall protection systems are acceptable or if an alternative fall protection method will be needed it must first be determined what the hazards are, if the hazards can be avoided or removed from the site and if there is another way to do the job without having employees exposed to the fall hazard.

- I. Locate all fall hazards: walking/working, leading edges, holes, excavations, dangerous equipment, or surfaces not otherwise addressed. For each fall hazard located determine the following:
 - A. Can the hazard be removed or eliminated.
 - B. Can a conventional fall protection system be used safely. If it can be demonstrated that using conventional fall protection systems during some leading edge work and/or during residential construction activities would create a greater safety hazard a written fall protection plan can be developed for an alternative fall protection system.
 - C. Can stepstools, ladders or lifts be utilized.
 - D. Can employees be protected through an alternative fall protection system. If it is determined that an alternative fall protection system is the best protection from fall hazards for employees at a job site the following guidelines must be followed:
 1. An alternative fall protection system will require a written fall protection program complying with Subpart M that OSHA will accept.
 2. The fall protection program must be written by someone qualified through extensive knowledge, training and experience and who will be able to identify fall hazards to which employees will be exposed.
 3. The fall protection program must be site specific and must be maintained up to date.
 4. Changes to the fall protection program must be approved by a qualified person.
 5. The fall protection program must be kept on site during the performance of all activities, which it covers.
 6. The usage of the fall protection program must be under the supervision of a competent person.

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7. The fall protection program must include specifics as to why a conventional fall protection system will not be used on the job site. The alternatives must be detailed. Reasons why scaffolds and ladders (which are covered under Subpart L and Subpart X) cannot be used must also be shown.
 8. If an employee ever falls, there is a serious accident or a near-miss, an investigation of the cause must be done immediately to determine if any changes must be made in the fall protection program to prevent future incidents.
 9. Employees will need to be trained under the fall protection program written for the job site.
 10. Alternative work practices under the fall protection program written for alternative fall protection will need to be enforced.
- E. Alternative fall protection systems may include controlled access zones and safety monitoring systems. Prior to determining if either of these are to be incorporated into a fall protection program, these systems will be thoroughly researched by the qualified person who is writing the fall protection program to be used in place of a conventional fall protection system.

WHEN AN ALTERNATIVE FALL PROTECTION SYSTEM IS TO BE USED AND A WRITTEN FALL PROTECTION PROGRAM IS DEVELOPED FOR A SPECIFIC JOB SITE IT WILL SUPERSEDE THE FALL PROTECTION PROGRAM IN OUR SAFETY PROGRAM. AT ALL OTHER JOB SITES OUR FALL PROTECTION PROGRAM USING CONVENTIONAL FALL PROTECTION SYSTEMS IN COMPLIANCE WITH SUBPART M WILL BE ENFORCED AS FOLLOWS:

- II. Excluding the exceptions noted earlier fall protection must be provided for all employees working 6 feet or higher above a lower level in the construction industry & 4 feet or higher under general industry tasks. Conventional fall protection systems are made up of equipment which must meet certain OSHA requirements for design and/or strength as follows:
 - A. **GUARDRAIL SYSTEMS:** Whenever there is a wall opening such as a doorway or window, a floor hole, a stairway opening or any other unprotected side or edge, workers must be protected from a fall of six feet or more. See Subpart M for complete guardrail system requirements. A typical guardrail system includes:
 1. Top-rail or edge approximately 42 inches above the walking/working surface. On window openings where there is a bottom sill less than 39 inches high there will still need to be a top-rail installed at 42 inches. When employees are using stilts, the top edge height of the top-rail or equivalent member shall be increased an amount equal to the height of the stilts platform.

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2. Mid-rails must be placed midway between the top-rail and the walking/working surface usually at about 21 inches.
3. Screens, mesh or the equivalent may be used in place of a mid-rail. These must be installed between the top-rail and the walking/working surface and must cover the entire opening.
4. Balusters, additional mid-rails and architectural panels may also be necessary. When they are used there must not be openings of more than 19 inches.
5. Guardrail systems must meet certain load requirements. All guardrail systems used must comply with the Subpart M standard including:
 - a. All surfaces must be kept smooth to prevent splinters, punctures, lacerations and snagging of clothing.
 - b. Rails must be kept from extending past their posts so that employees and equipment do not hit them.
 - c. Steel or plastic banding is too sharp for top-rails or mid-rails and cannot be used.
 - d. Guardrail systems should go all the way around any holes they are protecting.
 - e. Ramps and runways should also have a guardrail system around all unprotected edges.
 - f. Where holes are used as a point of access a gate or removable guardrail should be placed to protect against fall hazards.
 - g. Plastic or synthetic rope systems can be used but must be checked for tightness and must continue to meet the strength test.

- B. **PERSONAL FALL ARREST SYSTEMS:** Employees may also be protected against fall hazards by the use of personal fall arrest systems. A personal fall arrest system is made up of a combination of several components: anchorage points, connectors, body harnesses, lifelines, lanyards and deceleration devices. **Body belts and non-locking hooks are no longer allowed to be used as part of a personal fall arrest system. Instead body harnesses and locking snap hooks must now be used.**

Personal fall arrest systems shall when stopping a fall: limit maximum arresting forces to 1,800 pounds when a harness is used; limit free fall distance to 6 feet; limit maximum deceleration distance to 3.5 feet. Anchorages used for attachment of personal fall arrest equipment shall be independent and be capable of supporting 5,000 pounds per employee attached or maintain a safety factor of at least 2.

A competent person should make an inspection of all personal fall arrest system equipment prior to its use. If a personal fall arrest system and its components are subjected to the force of a fall each component must be removed from service and inspected by a competent person for damage before being used again. Harnesses, rip-stitch type lanyards and some other components are only design loaded to handle one fall. Any component designed for only one fall must be replaced after having sustained the force of a fall. Manufacturer's instructions must be followed when using a personal fall arrest system.

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Employees are encouraged to be involved in the decision of which type of personal fall arrest equipment they are going to use. This should be discussed with our safety director, supervisor, your foreman or our purchasing agent. Listed below are the various components of a personal fall arrest system.

1. **Lifelines:** Flexible lines are used in personal fall arrest systems by attaching one end to an anchorage point and letting it hang vertically or stretching it horizontally between two anchorage points. The lifeline is a point of connection for other components of a personal fall arrest system.
 - a. Lifelines are to be installed under the supervision of a qualified person.
 - b. Horizontal lifelines and anchorages' strength must be increased for each additional employee tied off to a single line.
 - c. If a vertical type of lifeline is used only one person can be attached to each lifeline. Vertical lifelines must have a minimum breaking strength of 5,000 pounds.
 - d. Lifelines should be made of a durable synthetic fiber or wire rope and should be protected from being cut or scraped during use.
2. **Lanyards:** Ropes or straps made of a strong synthetic fiber or wire rope which connects to a body harness at one end and a lifeline, deceleration device or an anchorage point at the other. Shock absorbing lanyards are the kind that will absorb some of the load of a fall so that the body doesn't take a full shock. A lanyard needs to be attached to the anchorage point in a way that does not reduce its required strength. There are two ways to limit free fall using a lanyard:
 - a. Use a shorter lanyard between the lifeline and your harness.
 - b. Reduce the amount of slack in your lanyard by raising your tie-off point to the lifeline. Your tie-off to the lifeline or anchor always must be level with or higher than the connection to your belt or harness.
3. **Deceleration devices:** Equipment designed to absorb much of the energy of a fall by slowing the rate of the fall. Common deceleration devices are rope grabs, rip-stitch lanyards, shock absorbers and some automatic self-retracting lines. If the device limits the free fall distance to 2 feet it must be able to withstand 3,000 pounds of force. Rope grabs are commonly used on a lifeline. A lanyard is attached to the device on one end and to the harness on the other. Self-retracting devices can be attached directly to the harness.
4. **Body harnesses:** An apparatus worn to protect the employee by spreading the shock of the fall throughout the body rather than focusing it on the mid-section as a body belt does. A full body harness is made of straps secured around the thighs, pelvis, waist, chest and shoulders. The attachment point for a body harness must be located in the center of the wearer's back either at shoulder level or above their head. Before using harnesses inspect them carefully for any damage due to wear and tear. Make sure the clips are fastened securely and are firmly attached.

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5. **Anchor points:** Components of a personal fall arrest system to which lifelines, lanyards or deceleration devices are attached. The anchor point is attached to the walking/working surface and must be secured according to the manufacturer's instructions. The anchor points should be installed under the supervision of a qualified person. Anchor points should only be used as fall protection for employees and not for equipment or materials.
 - a. Make sure the anchorage is strong enough to withstand the fall arrest force.
 - b. Inspect the anchorage for damage before hooking up.
 - c. Use an anchor that has no obstacles under it into which you could fall.
 - d. An anchorage must be able to support a weight of at least 5,000 pounds for each worker attached.
 - e. An anchorage must be independent from supporting or suspending a worker.
 - f. Check the manufacturer's labels regarding equipment stretch and deceleration distance.
 - g. The farther your attachment to the lifeline is from the line's anchor the more the line can stretch.
 6. **Using tie-offs:** Tying off is connecting your harness directly or indirectly to a secure anchor.
 - a. Tie off before you get into a position from which you could fall.
 - b. Follow the manufacturer's instructions on the best tie-off methods for your equipment.
 - c. Tie-offs that use knots are weaker than other methods of attachment. They can reduce the lifeline or lanyard strength by 50 percent or more. A stronger lifeline or lanyard should be used to compensate for the weakening effect.
 - d. Tying off around H-beams or I-beams can weaken the line because of the cutting action of the beam's edge. You can prevent this by using webbing lanyard or a wire-core lifeline.
 - e. Tie-offs where the line passes over or around rough or sharp surfaces reduces its strength drastically.
 - f. The location of the tie-off should avoid the hazard of obstructions in the potential fall path of the worker.
- C. **POSITIONING DEVICE SYSTEMS:** Designed to allow an employee to work on an elevated vertical surface with both hands free to do the work. If a positioning device system is to be used refer to the section in Subpart M that details the requirements for this system. These systems are not normally used in residential construction.

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- D. **SAFETY NET SYSTEMS:** Safety net systems are used to catch employees who have fallen. OSHA requires the installation of safety nets as close as possible under the walking/working surface where employees need to be protected, but in no case more than 30 feet below. If a safety net system is to be used refer to the section in Subpart M that details the requirements of the system. Safety net systems are not usually practical on a residential construction site.
 - E. **COVERS:** Covers for holes in floors, roofs and other walking/working surfaces must meet the following requirements:
 - 1. Covers must be capable of supporting without failure at least twice the weight of employees, equipment and materials that may be imposed on the cover at any one time.
 - 2. All covers must be secured when installed to prevent accidental displacement by the wind, equipment or employees.
 - 3. All covers must be color-coded or marked with the word “hole” or “cover” to provide warning of the hazard.
 - 4. Covers located in roadways and vehicular aisles must be capable of supporting without failure at least twice the maximum axle load of the largest vehicle expected to cross over the cover.
- III. **PROTECTION FROM FALLING OBJECTS:** The fall protection regulation is designed not only to protect employees from falls but also from having objects fall on them. Good housekeeping can make a job site safer from falling objects. Materials and debris should be properly cleaned up and tools put in proper storage areas to reduce the hazard of falling objects.
- D. When an employee is exposed to falling objects a hard hat is to be worn.
 - E. Foremen will assess job sites to determine if the following measures are needed to protect employees from falling objects:
 - 1. Toe-boards, screens or a guardrail system to prevent objects falling from higher levels.
 - 2. Keep potential fall objects far enough from the edge of the higher level so that they would not go over the edge if accidentally displaced.
 - 3. Barricade the area to which objects could fall and prohibit employees from entering barricaded areas.
- IV. **TRAINING:** Prior to beginning work at a job site where it has been determined there will be fall hazards employees are to be trained to recognize fall hazards and the procedures to be used to minimize these hazards including:
- A. Nature of fall hazards at the job site.

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- B. Correct procedures for erecting, maintaining, disassembling and inspecting the fall protection systems to be used.
 - C. Use and operation of guardrail systems, personal fall arrest systems, safety net systems, warning line systems, safety monitoring systems, controlled access zones or any other protection which will be utilized.
 - D. Correct procedures for the handling and storage of equipment and materials.
 - E. Retraining will be required when there are changes made in the work place or changes are made in the types of fall protection systems or equipment to be used which makes previous training obsolete. Retraining will also be required when there is reason to believe an employee who has already been trained does not have the understanding and skill required to abide by fall protection procedures established.
- V. **CERTIFICATION:** Documentation will be maintained showing names of employees who receive fall protection training, date of training and who conducted the training.

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- I. **DRIVER APPROVAL PROCESS:** Employees who do not meet the criteria shown below will not be allowed to drive any company vehicle or their own vehicle on the company's behalf. They will not be given use of a company gas credit card, be reimbursed for gas expenses, receive a gas allowance and will not be allowed to receive gas from company gas pumps.
- A. Only approved drivers are authorized to drive a company vehicle or drive their own vehicle on behalf of the company.
 - B. Prior to obtaining approved driver status an employee needs to provide us with a copy of their motor vehicle record (MVR) for our review process.
 - C. Our general criteria for approved drivers is an employee's MVR:
 - 1. Must show LESS than four moving citations within the last 36 months.
 - 2. Must NOT show a DUI citation within the last 36 months.
 - 3. Must NOT show a reckless driving citation within the last 36 months.
 - D. We reserve the right to make a decision on an individual basis at our discretion.
 - E. MVR's must be provided prior to approval as a company driver and annually on all approved drivers.
 - F. All approved drivers need to maintain a current valid driver's license.
 - G. All approved drivers should review our entire fleet safety program.
 - H. An employee driving their own vehicle on our behalf must also provide proof of insurance on the vehicle they are driving.
- II. **SAFETY DIRECTOR, SUPERVISORS AND FOREMEN RESPONSIBILITIES:**
By action of the manager our safety director, supervisors and foremen have been given the responsibility of implementing and enforcing our fleet safety program. Their responsibilities include:
- A. Supervising the selection of employees with good driving records.
 - B. Not allowing an employee to drive a company vehicle until they have been accepted as an approved driver.
 - C. Reviewing and/or investigating all accidents and/or incidents involving a company vehicle and completing our supervisors follow up report of a vehicle accident form.

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- D. Submitting completed safety director's follow-up report of vehicle accident and/or incident form to the general safety committee for review and discussion.
- E. Participating in general safety committee meetings when selected as a member of the committee.
- F. Conducting safety meetings with foremen not on the general safety committee and communicating information as applicable from the general safety committee meetings.
- G. Following through on the status of recommendations submitted by insurance carrier loss control agents and outside regulatory agencies including OSHA.
- H. Establishing and monitoring preventative maintenance and vehicle inspection programs including procedures for follow-up corrective actions on deficiencies noted in vehicle inspection reports.
- I. Implementing regulatory requirements for hiring drivers including but not necessarily limited to:
 - 1. Employment application.
 - 2. Personal interview.
 - 3. Motor vehicle report.
- J. Looking at motor vehicle reports on existing approved drivers on an annual basis to determine if they still qualify as an approved driver.

III. SHOP MANAGER MAINTENANCE RESPONSIBILITIES:

The shop maintenance manager responsibilities shall include:

- A. Establishing a preventative maintenance program for all vehicles including procedures for follow-up corrective actions on deficiencies noted in vehicle inspection reports.
- B. Keeping necessary records for each individual vehicle.
- C. Making sure all vehicles are in safe condition prior to returning them to service including working seat belts and back up horns as applicable.
- D. Properly maintaining and caring for assigned company vehicle. Regularly servicing assigned vehicle and recording maintenance and repairs on our vehicle maintenance log. This log is to be kept in the glove compartment of the vehicle. Routine servicing shall include:
 - 1 Oil, oil filter and air filter changed every 5,000 miles.
 - 2 Fluid levels checked regularly.

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- 3 Tire air pressure checked regularly.
- 4 Caring for assigned vehicle includes keeping interior free of unnecessary debris, clutter and trash.

V. COMPANY DRIVER RESPONSIBILITIES:

Employees driving for the company have responsibilities, which include:

- A. Maintaining a valid driver's license.
- B. Attending all regular toolbox meetings.
- C. Reporting all accidents involving yourself or the company vehicle you are assigned. Accidents must be reported immediately to your supervisor and the safety director. As soon as possible follow up in writing by completing our employee report of vehicle accident involving company vehicle form and submitting it to the office. **POLICE NEED TO BE CALLED FOR ALL ACCIDENTS.**
- D. Reporting any problems, breakdowns or defects in vehicles or equipment promptly to the shop maintenance manager.
- E. Obeying the company yard and job site speed limit (5 MPH).
- F. Adhering to the company policy forbidding all types of firearms/weapons within company properties, vehicles and equipment including job sites.
- G. Working and driving in a safe manner at all times.
- H. Using seat belts at all times. Wearing seat belts is not just company policy - it is the law.
- I. Making sure the company vehicle you are assigned has the following:
 1. Current license plates/tags.
 2. Proper registration for vehicle (and trailer, if applicable).
 3. Current certificate of insurance in glove compartment of vehicle.
 4. Blank employee report of vehicle accident involving company vehicle form in glove compartment of vehicle.
 5. Vehicle maintenance log form in glove compartment of vehicle.

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V. VEHICLE SAFETY EQUIPMENT:

Safety equipment is both a company requirement and a department of transportation regulation.

- A. Safety cones must be in company vehicles at all times.
- B. Seat belts must be operable and must be worn in all company vehicles.
- C. All supervisors are to have fire extinguishers in their company vehicles.
- D. All drivers are to have first aid kits in their company vehicles.
- E. If you are towing equipment both safety chains must be used.

Employees assigned a company vehicle should verify it is properly equipped prior to driving it. If you are missing any safety equipment or have defective safety equipment, notify the shop maintenance manager immediately. If you are missing the certificate of insurance, report forms or current registration/tags notify the office.

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- VI. **LIMITATIONS UPON USE OF COMPANY VEHICLE:** The company vehicle assigned to you is provided to be personally driven by you as an employee of the company in the furtherance of the company's business. Your authority to use the vehicle and to permit its use by others is subject to the following guidelines:
- A. Employees are not allowed to use company vehicles for personal purposes. If an employee has been authorized use of a company vehicle for commuting to and from work personal use is limited strictly to commuting to and from work.
 - B. The company vehicle assigned to you may not be used or operated by anyone other than yourself. It may not be driven for personal use by yourself, your spouse, any blood relatives or adopted children.
 - C. The company vehicle assigned to you may be loaned to another employee temporarily with the prior approval of your supervisor or manager only. The supervisor or manager approving use of the company vehicle by another employee must verify the temporary driver has been approved as a driver.
 - D. It may be necessary for you to carry business associates or other employees in the company vehicle assigned to you from time to time. It is your responsibility as the driver of the company vehicle to ensure seat belts are worn by your passengers as well as by yourself.
 - E. You are prohibited from picking up hitch-hikers or giving rides to strangers.
 - F. If you have been given permission to use the company vehicle assigned to you for commuting to and from work it is your responsibility to park the vehicle in a safe area at your place of residence. No reimbursement will be made for home storage of the company vehicle.

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- VII. **VEHICLE INSURANCE AND ACCIDENTS:** The company vehicle you have been assigned is insured under a fleet policy. This insurance policy protects the company, you and any other legally qualified person who has been approved as a driver for the company and who operates the vehicle with permission of the company.
- A. As a driver of a company vehicle it is your responsibility to report all accidents immediately to the police, your supervisor and the safety director. As soon as possible you must also complete our employee report of vehicle accident involving company vehicle form and submit it to the office. Listed below are events which are considered reportable accidents:
1. The company vehicle you are driving is involved in a collision with another person's property whether it is a car, house, lawn or other type of property.
 2. The company vehicle you are driving injures another person whether the person is a pedestrian or riding in another vehicle.
 3. Another person is riding in the company vehicle you are driving and something happens which might give the person occasion to file suit for damages against you, the company or the legal owner of the vehicle.
 4. You are injured while driving a company vehicle.
 5. The company vehicle you are assigned is damaged whether or not another person, car or property is involved and whether or not the vehicle is damaged while being used or is parked.
- A. At the time of an accident involving a company vehicle you have been assigned you should take the following actions:
1. If anyone is injured see that they receive proper medical attention. Do not move an injured person unless it is absolutely necessary as further injury may result. First aid training is not provided to employees that would qualify them to treat serious injuries. Supervisors may treat minor cuts and abrasions only. Other employees need to leave all treatment for authorized persons to handle. Make the injured person comfortable until trained personnel arrive.
 2. All accidents are to be reported to the police.
 3. Write the names, addresses and telephone numbers of all witnesses on witness cards.
 4. Obtain name of other driver's insurance carrier.
 5. Note license plate numbers of all vehicles involved. Also, note the license plate numbers of any vehicles, which may have been carrying witnesses even if these people do not identify themselves. They can be traced if necessary.
 6. Only discuss the accident with someone from our company, a representative for our company and the police.
 7. Take photos of the accident, cars, damages, license plates, etc.
 8. Report the accident immediately to your supervisor and the office.

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8. Complete our employee report of vehicle accident involving company vehicle. Make a sketch on the back of the form showing street names, position of vehicles and the direction of travel at the time of the accident. Submit the completed form to the office as soon as possible.
 9. If the company vehicle you have been assigned is stolen report the theft immediately to the police and to your supervisor. Complete our report of theft form. Make a note as to whether the vehicle was locked or unlocked and where it was parked. Report any tools, equipment and materials which were stolen with the vehicle.
- B. In the event of an accident injuries receive priority. See that proper medical attention is obtained.
 - C. Do not argue or accuse anyone.
 - D. Do not voluntarily assume liability or agree to settle any claim made against you.
 - E. While it is proper procedure for you (and the other driver) to identify yourself and produce your driver's license and vehicle registration, you do not have to divulge any details of your insurance coverage other than the carrier's name and the policy number.
 - F. All claims resulting from accidents involving a company vehicle will be handled entirely by our insurance carrier's claims department. An employee should never assume any portion of the cost for repairs resulting from an accident. All settlements should be made through our insurance carrier.
- VIII. **REVOCATION OF COMPANY VEHICLE PRIVILEGES:** No employee is allowed to drive a company vehicle on either roadways or job sites until a Motor Vehicle Report (MVR) has been run. An employee's driving record will be reviewed for the prior 36-month period before they can be approved as a driver for our company.
- A. At time of hire, all employees will receive instructions on how to access our fleet safety program within our safety program. When an employee is approved as a driver they should review our fleet safety program and make sure they understand their responsibilities as a driver of a company vehicle.
 - B. Our company reserves the right to revoke the use of a company vehicle at any time at its discretion. Disciplinary action up to and including termination will result if it is established an employee has:
 1. Knowingly been involved in the manufacture, transportation, possession, sale or use of narcotic drugs while operating a company vehicle.
 2. Operated a company vehicle while under the influence of alcohol.

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3. Operated a company vehicle while under the influence of drugs which impair their ability to function as a driver whether or not the drugs are prescribed by a doctor.
4. Left the scene of an accident.
5. Lost their driver's license because of suspension, revocation, withdrawal or denial of an operator's license.
6. Caused a serious accident due to gross negligence or incompetence.

IX. **PLEASE NOTE - DRIVING A COMPANY VEHICLE IS A PRIVILEGE, NOT A RIGHT:** All company vehicles are to be operated in a safe, legal, courteous and prudent manner. Safe driving will result in fewer accidents.

- A. No employee has the authority to direct another employee to knowingly break the law.
- B. Discourteous and/or reckless operation of vehicles will not be tolerated. The operation of a company vehicle is a reflection of the company.

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FORKLIFT PROGRAM

In December of 1998, OSHA issued new regulations covering the type of training required for all forklift operators under CRF29 1910.178 and 1926.602. Only certified, trained employees may use or operate forklifts.

The purpose of our safety program guidelines is to provide policies, procedures and common sense reminders for the use and maintenance of forklifts. It is our intent to promote a safe working environment for all employees.

I. BASIC FORKLIFT INFORMATION

- A. Forklifts are specialized, multi-user vehicles which can do many tasks that require heavy lifting, moving or stacking.
- B. Forklifts allow us to load and unload materials of various sizes, shapes and weights that would otherwise be difficult to handle.
- C. Forklifts can be dangerous if they are not operated by people who are carefully trained in the safety rules that such equipment demands.
- D. A forklift even unloaded is heavier than many cars and not as well-balanced.

II. SAFETY GUIDELINES PRIOR TO USE OF A FORKLIFT

- A. To drive a forklift safely you need to understand the possible hazards and know what to do to avoid them. Forklift hazards to be aware of include the following:
 - 1. Tipping over.
 - 2. Colliding with a vehicle, equipment or person.
 - 3. Dropping a load.
- B. Know how to operate the forklift you are using. Use the manufacturer's manuals for specifics regarding each forklift.
 - 1. Purpose of all controls and instrumentation.
 - 2. Engine or motor operation.
 - 3. Steering and maneuvering.
 - 4. Visibility.
 - 5. Fork and/or attachment adaptation, operation and limitations of their use.
 - 6. Forklift capacity and stability.
 - 7. Forklift inspection and maintenance.
- C. Forklift operators need to avoid situations that could cause the forklift or the load to drop. When identifying the potential hazards of a specific job consider the following:

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1. The forklift's capacity.
2. The characteristics of the load.
3. The route to be covered including floor surfaces and conditions.
4. Any limitations in the areas where the load is to be picked up and dropped.
5. Other activities going on in the work area including pedestrian traffic.
6. The condition of the forklift itself.
7. Load balancing.

III. PROTECTIVE AND SAFETY DEVICES

- A. Trained operators must understand and use the manual provided by the forklift manufacturer as well as the safety rules required by OSHA and the company.
- B. Some of the protective and safety devices a forklift may have are as follows:
 1. A label or nameplate that tells how many pounds the forklift can carry safely.
 2. An overhead guard that protects the operator from falling objects and from being crushed if the vehicle tilts over.
 3. A load backrest extension on certain forklifts that helps keep the load from falling backward.
 4. Mast tilt controls so you can move the load forward and backward while you're getting it into position. Mast tilt controls are not to be used while you are moving.
 5. A parking brake.
 6. Lights and horn to warn others you are coming.
 7. If seatbelts are provided they must be worn.

IV. WORK AREA AND GENERAL FORKLIFT SAFETY

- A. Prior to using a forklift, inspect the area where you will be operating it for potential hazards.
 1. Make sure there is adequate lighting or extra lighting on the forklift.
 2. Make sure there is sufficient headroom under overhead installations, lights, pipes, sprinklers systems, etc.
 3. Make sure you are aware of other traffic in the area.
- B. Stunt driving and horseplay are never permitted.
- C. Never drive a forklift up to a person who is standing in front of any fixed object.
- D. Never permit a person to stand or pass under a forklift's elevated portion even if it's empty.

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- E. Never allow an unauthorized person to ride on a forklift.
- F. Keep your arms, hands and legs inside the body of the forklift.
- G. If you're working in an area that has traffic including other forklifts, vehicles or pedestrians, always make sure you are alert as to their location.

IV. FORKLIFT TRAVEL SAFETY

- A. Slow down, stop and sound the horn at places where you can't see what might be approaching from another direction.
- B. Keep a clear view of your path of travel. If your load blocks your forward view, travel with the load trailing.
- C. Slow down on wet or slippery surfaces.
- D. Slow down before making a turn; avoid sharp turns that could tip the forklift.
- E. Avoid driving over loose objects.
- F. Drive slowly and carefully over dock-boards or bridge-plates; don't exceed their rated capacity.
- G. If you're going up or down a grade of more than 10% drive with the load upgrade and raise it only enough to clear the surface.
- H. Keep a safe distance from the edge of elevated ramps or platforms.
- I. Slow down and take extra precautions when driving over uneven terrain or loose dirt.

V. LOADING AND UNLOADING FORKLIFT SAFETY

- A. Before loading make sure the load is within the forklift's rated capacity, is stable and can be centered. If a load is loose or uneven stack and/or tie the pieces.
- B. To pick up the load set the forks high and wide enough to go under it. Then drive into the loading position, put the load squarely on the forks and drive under the load until it touches the carriage slightly. Next, tilt the mast back and lift the load. Before you start to travel tilt it back a little more.
- C. As you carry the load keep it tilted back and low with the forks six to eight inches above the ground.

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1. Don't raise or lower the load while you are moving.
 2. Don't carry anything on the overhead guard.
- D. When you unload turn the forklift slowly into position and go straight at the location where items are to be unloaded.
- E. When you unload onto a stake bed or flatbed be sure the forklift's rear wheels are chocked with brakes locked on. Check to make sure the dock plate is secure, then position the load, tilt it forward and release it.
- F. To unload onto a rack or stack check how high you can safely stack materials. Raise and position the load to the correct height, move it slowly into position, tilt the load forward and lower it onto the rack or stack. Finally, pull the forks back slowly, then back out slowly looking over your shoulder.

VII. FORKLIFT PARKING SAFETY

- A. Parking areas should be designated on flat surfaces in a space that doesn't block traffic flow.
- B. OSHA has specific procedures to follow when you leave a forklift unattended or are for any reason 25 or more feet away from it.
1. Fully lower the load-engaging means.
 2. Neutralize the controls.
 3. Shut off the power.
 4. Set the brakes.
 5. Remove the key.
 6. If you are parking on an incline block the wheels.

VIII. FORKLIFT REFUELING OR RECHARGING SAFETY

- A. Refueling or recharging must be performed with the forklift engine turned off and in assigned, ventilated areas away from anything that could cause a fire or explosion.
- B. Smoking is prohibited.
- C. Fire extinguishers as well as spill and cleanup equipment should be nearby.

IX. FORKLIFT MAINTENANCE

- A. Forklifts need to be inspected regularly and must be carefully maintained.
1. Check the forklift daily before use to make sure everything is working properly and is in good shape. Follow procedures from the manufacturer's manual.

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2. Make sure there are no leaks and that forks aren't bent or damaged.
- B. Never use a forklift that has a defect or that sparks or smokes, needs a repair or is any way unsafe. Leave repairs to authorized personnel.

X.FORKLIFT OPERATOR TRAINING

- A. Training can only be done by knowledgeable and experienced trainers.
- B. Training must consist of a combination of formal instruction and practical demonstrations and exercises.
- C. Training must encompass a wide range of subjects and skills specified in OSHA regulations.
- D. Refresher training must be given as required by OSHA.
- E. Operators must be evaluated at least once every three years.
- F. Training is to be certified in writing.

Do not operate a forklift unless you have been properly trained, the forklift has been inspected, is in good operating condition and has all safety devices in place.

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The complete standard for the use of respirators in the construction industry is in the State of Nevada Occupational Safety and Health Standards for the Construction Industry, CFR 29, Part 1926.103. Please reference standard CFR 1910.134 for additional information.

The purpose of our respiratory protection program is to ensure the protection of all employees from hazards through proper use of respirators. In emergencies or when environmental controls either fail or are inadequate to prevent harmful exposure to employees appropriate respiratory protective devices shall be provided by the company and their use will be enforced.

Procedures outlined in this program will be used in the selection and use of respirators.

- I. Respirators will be selected based on hazards to which the employee will be exposed. Our foremen will be assessing job site hazards requiring personal protective equipment including respiratory protective equipment prior to work beginning on a job site. See the section in this Safety Program on our Personal Protective Equipment Assessment, Selection and Training Program. Foremen will need to:
 - A. Determine what the hazard is by utilizing our Task Hazard Analysis (THA) form.
 - B. Choose equipment that will perform the function intended and is certified for this function.
 - C. Make the proper selection of respirator according to the guidance of ANSI Publication, Practices for Respiratory Protection, ANSI Z88.2-1969.
 - D. Consider the chemical and physical properties of the contaminant, the toxicity and concentration of the hazardous material and the amount of oxygen present in selecting the proper respirator.
 - E. Consider the nature and extent of the hazard, work rate, area to be covered, mobility, work requirements and conditions, and the limitations and correct characteristics of the available respirators in selecting the proper respirator.
- II. The user will be instructed and trained in the proper use and maintenance of respirators and their limitations. A representative from our vendor supplying us with respiratory protection equipment will conduct training sessions. These training sessions will include the use, limitations and maintenance of the respirators they are supplying our company. They will also give employees a qualitative fit test.
- III. Where practical respirators will be assigned to individual employees for their exclusive use.
- IV. Employees will be responsible for proper cleaning of respirators they use.
 - A. Respirators will be thoroughly cleaned and disinfected at the end of each day's work.

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- B. Respirators used by more than one employee will be thoroughly cleaned and disinfected after each use.
- V. Employees will be responsible for storing respirators in a convenient, clean and sanitary location.
 - A. Respirators are to be protected from dust, sunlight, heat, extreme cold, excessive moisture or damaging chemicals.
 - B. Protection against any mechanical damage should also be provided. Respirators should be stored so that face pieces and exhalation valves rest in a normal position to prevent the rubber or plastic from reforming into an abnormal shape.
 - C. Manufacturer's suggested storage instructions are to be followed.
- VI. Employees will be responsible for inspection of the respirators they are using.
 - A. Respirators used routinely are to be inspected during cleaning. Worn or deteriorated parts are to be replaced.
 - B. Respirators are to be inspected for wear and deterioration of their components before and after each use. Special attention should be given to rubber or plastic parts which can deteriorate. The face piece, especially the face and seal surface, headband, valves, connecting tube, fittings and canister must be in good condition. A respirator check must include a check of the tightness of the connections.
 - C. All defects need to be reported to a foreman, our Safety Director or purchasing agent. A respirator in need of repair will not be used until the repair is completed. Repairs must be made only by experienced persons using parts specifically designed for the respirator. The manufacturer's instructions should be consulted for any repair and no attempt should be made to repair or replace components or make adjustments or repairs beyond the manufacturer's recommendations.
- VII. Foremen will be responsible for appropriate surveillance of work area conditions and degrees of employee exposure or stress.
 - A. Job site conditions will need to be reassessed as work progresses. Changes in operating procedures, temperature, air movement, humidity and work practices may influence the concentration of a substance in the work area atmosphere.
 - B. Conditions or situations that need to be called to the attention of our Safety Director and/or the General Safety Committee are to be documented by completion of our Employee Safety Information Report form.

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- VIII. Our safety director and general superintendent will be responsible for inspection and evaluation of our respiratory protection program to determine the continued effectiveness of the program. They are to inspect job sites randomly for individual employee and foreman compliance with our respiratory protection program using our respirator protection program inspection checklist as a guide.
- IX. Employees will not be assigned to tasks requiring the use of respirators until they have seen a physician and have been evaluated to determine if they are physically able to perform the work and use the necessary respiratory protection equipment following OSHA guidelines. The examining physician is to be given our respirator user medical clearance form to complete and return to the office.
- X. Respirators must be MSHA/NIOSH certified. Only approved respirators are to be used.
- XI. **SUMMARY OF FOREMEN RESPONSIBILITIES PRIOR TO BEGINNING WORK AT A JOB SITE:**
- A. Determine if there are or will be respiratory hazards on the job site.
 - B. Identify the kind of respiratory hazard.
 - C. Select the appropriate respirator for the hazard.
 - D. Ensure that each employee who will be exposed to a respiratory hazard receives the proper equipment and training including:
 - 1. Nature of respiratory hazard and what may happen if the respiratory protective equipment is not used properly.
 - 2. Engineering and administrative controls being used and the need for the respirator as added protection.
 - 3. Reasons for the selection of a particular type of respirator.
 - 4. Methods of putting on the respirator and checking its fit and operation.
 - 5. Proper wear of the respirator. Respirators should not be worn when conditions prevent a good face seal. Such conditions may be a growth of beard, sideburns, and a skull cap that projects under the face piece or temple pieces on glasses.
 - 6. Respirator maintenance and storage.
 - 7. Proper method for handling emergency situations.
 - 8. Information that improper respirator use or maintenance may cause overexposure and that combined use of poorly fitted and maintained respirators can cause chronic disease or death from overexposure to air contaminants.
 - E. Assess job site conditions, employee exposure and stress. Take immediate steps to correct any hazardous situation and complete our employee safety information report form if unsafe conditions or practices are observed.

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- XII. **SUMMARY OF EMPLOYEE RESPONSIBILITIES:** Each employee who is required to wear respiratory protection equipment has the responsibility to:
- A. Always use respiratory equipment as instructed.
 - B. Guard against damaging the respiratory protection equipment.
 - C. Go immediately to an area of “clean air” if their respiratory protection equipment malfunctions.
 - D. Report any malfunctioning of respiratory protective equipment to our foremen including:
 - 1. Discomfort.
 - 2. Resistance in breathing.
 - 3. Fatigue due to respirator usage.
 - 4. Interference with vision or communications.
 - 5. Restriction of movement.
 - E. Clean and disinfect respiratory protective equipment at end of each day.
 - F. Store respiratory protective equipment in clean and sanitary location protected from dust, sunlight, heat, extreme cold, excessive moisture or damaging chemicals.
 - G. Inspect respiratory protective equipment before and after each use.
 - H. Follow the manufacturers’ suggested instructions regarding respiratory protective equipment.
- XIII. Types of respiratory hazards are as follows:
- A. **CHEMICAL HAZARDS:** Toxic materials can enter the body in three ways: (1) through the gastrointestinal tract (when swallowed); (2) through the skin; (3) through the lungs. Of these three modes of entry the respiratory system presents the quickest and most direct avenue of entry because of its close association with the circulatory system and the constant need for oxygen.
 - B. **RESPIRATORY HAZARDS:** There are four basic types of inhalation hazards: (1) oxygen deficient; (2) particulates; (3) gases and vapors; (4) a combination of particulates, gases and vapors. When the oxygen content is below 19.5% (such as high altitude or other conditions under pressure) air-supplied not air-purifying respirators must be worn. In assessing exposure conditions keep in mind a painter could end up in an oxygen deficient environment when painting in a confined space where paint vapors could displace the oxygen in the air.

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C. **BIOLOGICAL EFFECTS:** Particles of airborne solids or liquids (such as paint spray mist) can irritate the upper respiratory tract and produce allergies, fibrosis, fever or even cancer. When fine particles collect in the lungs they impair health simply by occupying the space normally used for oxygen transfer. Some particles such as lead can be absorbed directly into the bloodstream and damage other organs in the body. Usually you cannot see harmful gases and vapors and you cannot always smell them either. They are essentially part of the air. These invisible agents can also irritate the respiratory tract, lead to pneumonia, cause loss of feeling, systemic poisoning, unconsciousness and death.

XIV. **BASIC CLASSIFICATIONS OF RESPIRATORS:** There are two basic classifications of respirators:

A. **AIR PURIFYING:** Use filters or a sorbent to remove harmful substances from the air. They range from simple disposable to sophisticated powered air purifying respirators.

1. Air purifying respirators do not supply oxygen and may not be used in an oxygen deficient atmosphere or an atmosphere that is immediately dangerous to life or health (IDLH).
2. **Chemical Cartridge Air Purifying Respirators:** When painting your half-mask air-purifying respirator should be used with a black cartridge approved for not more than one-tenth percent organic vapors. A pre-filter should be placed outside the cartridge usually in a snap on cover. With a pre-filter your respirator is approved for use in dust, mists and organic vapors from solvent or reducer in the paint mixture.

B. **ATMOSPHERE SUPPLYING:** Designed to provide breathable air from a clean air source other than the surrounding contaminated work atmosphere. They range from supplied air respirators to self-contained breathing apparatus.

XV. The time needed to perform a given task including the time necessary to enter and leave a contaminated area is one factor that determines the type of respiratory protection needed.

XVI. The air supply rate is another factor to consider when using respirators. The wearer's work rate determines the volume of air breathed per minute. The volume of air supplied to meet the breathing requirements is of great significance when using atmosphere supplying respirators such as self-contained and air-line respirators that use cylinders because this volume determines their operating life.

XVII. **FIT TESTING**

A. Qualitative fit testing involves the introduction of a harmless odorous or irritating substance into the breathing zone around the respirator being worn. If no odor or irritation is detected a proper fit is indicated.

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- B. Although respirators are designed for maximum efficiency they cannot provide protection without a tight seal between the face piece and wearer. Consequently beards and other facial hair can seriously affect the fit of a face piece. To assure proper respirator protection a face piece must be checked each time the respirator is worn.

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RESPIRATORY PROTECTION PROGRAM

January 1999

REVISIONS AND CLARIFICATIONS

DUE TO REVISIONS IN OSHA 29 CFR 1910.134 and 29 CFR 1926.103

It is the policy of Par 3 Landscape to provide its employees with a safe and healthful work environment. The guidelines in this program are designed to help reduce employee exposure to occupational dusts, fumes, mists, radionuclides, gases and vapors. The primary objective is to prevent excessive exposure to these contaminants. This is accomplished when feasible by accepted engineering and work practice control measures. When effective engineering controls are not feasible or while they are being implemented or evaluated respiratory protection may be required to achieve this goal.

The purpose of our respiratory protection program is to ensure the protection of employees which are assigned work tasks requiring respirator use. Respirators are to be utilized in accordance with the procedures outlined in this program and have been selected for use in work areas in which known respiratory hazards exist. Compliance with the requirements of this program is a condition of employment and will be strictly enforced. Our program has been developed in accordance with requirements established by OSHA 29 CFR 1910.134 and 29 CFR 1926.103 and may be updated and revised as operations and/or regulatory requirements change.

I. RESPONSIBILITIES:

- A. **MANAGEMENT:** Par 3 landscape will maintain records of employee training, fit testing and physical/medical examinations in accordance with OSHA regulations for respiratory protection as shown in 29 CFR 1910.134 and 29 CFR 1926.103. Our Safety Director is designated to oversee our respiratory protection program and conduct evaluations of program effectiveness.

- B. **SAFETY DIRECTOR:** Our safety director will oversee the respiratory protection program by:
 - 1. Reviewing with foremen respirator requirements for each new job site.
 - 2. Selecting and designating employees for assignment to job tasks which require respiratory protection.
 - 3. Providing medical surveillance to ensure that designated employees are physically qualified to utilize the respirators which are necessary in their work.
 - 4. Providing employees with approved and properly selected respiratory protective equipment and parts, a change schedule for canisters and filters, cleaning, disinfecting, storing, inspecting and repairing respirators and procedures for proper use of respirators in routine and foreseeable emergency situations.
 - 5. Providing employees with annual fit testing and ensuring employees are properly trained to utilize and maintain the equipment assigned.
 - 6. Maintaining employee fit testing and training documentation.
 - 7. Providing a formal annual evaluation of the respiratory protection program.

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C. SUPERVISORS:

1. Supervisors will maintain ongoing surveillance of employee exposure or stress. If conditions change such that respirator effectiveness may be affected our safety director will reevaluate the respirator selection.
2. Upon assignment to a new job site supervisors will review respirator requirements for the new job site with our safety director.
3. Supervisors will instruct all employees assigned to each new job site requiring respirators as to the need, use, limitations and care of their respirator according to training procedures established by our safety director.
4. Supervisors will periodically spot check respirators for fit, usage and condition.

D. EMPLOYEES: Employees shall be responsible for:

1. Inspecting, cleaning, disinfecting, storing and repairing respiratory protective equipment in accordance with instructions and training received.
2. Wearing only the types of respirators for which they have been fitted and assigned.
3. Proper utilization of respirators including putting the respirator on correctly and performing negative and positive pressure test to ensure an adequate face seal.
4. Ensuring an adequate face seal by not having beards or other facial hair that prevents direct contact between the face and the edge of the respirator.
5. Reporting any malfunction of respirator equipment to their foreman or our safety director immediately.
6. Participating in medical surveillance and training relative to our respiratory protection program.

II. MEDICAL SURVEILLANCE: Our safety director will conduct medical surveillance to ensure that employees are not assigned to tasks requiring the use of respirators unless they have been found physically capable of performing such work.

- A. An employee who is or will be a respirator user will complete a respirator medical evaluation questionnaire. This form is available from our safety director. A copy of the completed questionnaire will be presented to the physician prior to medical examination for respirator qualification.
- B. The physician will review the employee's medical history questionnaire, determine the physical conditions relevant to respirator use and determine if necessary an appropriate medical examination for an employee's eligibility for assignment to work tasks which require respirator use. After review and/or examination the physician will certify in writing that the employee is able to wear a respirator.
- C. Employees will be reexamined at intervals determined necessary by the physician and as required by OSHA guidelines.

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III. SELECTION AND USE OF RESPIRATORS

- A. Respirators have been determined to be necessary in spray paint areas during the pressurized spray application of paint products. This type of operation is likely to involve the emission of vapors and dusts into the employee's breathing zone. The material safety data sheets for the majority of these products recommend that employees utilize negative pressure, half mask, and cartridge type respirators with organic vapor cartridges with filters. Some of these products require employees to utilize airline respirators due to their extremely hazardous nature and poor warning properties.
1. Airline respirators will be used by employees during spray painting applications in paint spray booths. The utilization of air supplied respirator equipment in these areas will ensure the employee is adequately protected from air contaminants emitted during these painting operations.
 2. A check of the breathable air supply will be made periodically using a Draeger pump and tubes for carbon monoxide to ensure carbon monoxide levels in the supplied air is less than 10 parts per million.
- B. Negative pressure half mask respirators with the appropriate organic vapor cartridges with filters have been selected for employee use during paint spray applications. To ensure that organic vapor cartridges and filters are changed prior to the end of service life, the manufacturer will be contacted to determine at what intervals the cartridges and filters are to be changed based on objective information, air monitoring data and identification and evaluation of the respiratory hazards in the workplace.
- C. Employees performing the work tasks described above are required to utilize the respirator equipment which has been provided. Failure to do so will result in immediate disciplinary action.
- D. **EXCEPTION:** You are not required to participate in our Respiratory Protection Program if the respirator use is voluntary and if you are utilizing a filtering face piece (i.e. dust mask).
- E. Employees using a respirator will be allowed to leave the work area for any of the reasons shown below. If an employee leaves the work area for any of these reasons they are not to reenter until the specific problem has been identified and corrected. This may require repair or replacement of the respirator.
1. To wash face and face piece as necessary to prevent skin or eye irritation.
 2. Detection of vapor or gas breakthrough, changes in breathing resistance or face piece leakage.
 3. To replace the respirator or filter, cartridge or canister.
 4. Upon malfunction of the respirator.

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5. If severe discomfort in wearing the respirator is detected.
6. Illness of the respirator wearer including: sensation of dizziness, nausea, weakness, breathing difficulty, coughing, sneezing, vomiting, fever or chills.

- IV. **RESPIRATORY FIT TESTING PROCEDURES:** Qualitative fit testing will be conducted according to OSHA accepted protocols. Fit testing will be conducted prior to initial use, whenever a different face piece is used, if there are changes in the employee's physical condition, and annually utilizing irritant smoke. Instruction will be given to ensure the employee is capable of properly putting on and taking off the respirator, performing both negative and positive face seal tests and obtaining a proper face piece to face seal prior to fit testing. A written record of the test results will be maintained by our safety director.
- V. **EMPLOYEE TRAINING:** Training shall be provided annually to all employees who are required to use respirators in the performance of their work and whenever deemed necessary by our Safety Director to reestablish employee proficiency. Employees using respirators will be provided appropriate medical surveillance to ensure their qualification. Training will include the following:
- A. Nature of the respiratory hazards which may be encountered during routine situations and emergencies including warnings concerning improper use.
 - B. An explanation of the engineering controls provided in their work area to minimize exposure to respiratory hazards.
 - C. Reasons for selection of the particular type of respirator which has been provided for their use.
 - D. Capability and limitations of the selected respirator.
 - E. Methods of putting on and removing the respirator and checking its fit and operation.
 - F. Proper use of the respirator.
 - G. Procedures and schedules for cleaning, disinfecting, storing, inspecting and repairing respirators.
 - H. Recognition of medical signs and symptoms that may limit or prevent the effective use of respirators.
 - I. An employee must be given an opportunity during training to wear the respirator in a safe air environment for a period of time to become familiar with it and to practice adjustments.

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VI. RESPIRATOR INSPECTION, MAINTENANCE AND STORAGE

- A. **INSPECTION:** All respirators shall be inspected by the wearer immediately before and after each use and during cleaning. Inspection shall include the following:
1. Checking the condition of respirator for wear, distortion and missing parts that might compromise respirator function and effectiveness.
 2. Checking for dirt, paint or contaminant residue that could compromise the respirator.
- B. **REPAIRS:** All replacement of parts or repairs shall be done in conjunction with our safety director and/or purchasing agent. All respirators or parts found unusable will be discarded immediately. An adequate and properly selected supply of respirators and parts will be maintained and is available for employee use.
- C. **CLEANING AND DISINFECTING:** Respirators which are intended for further use will be maintained in a clean and sanitary condition. Employees will clean their mask type respirators with a mild detergent solution in warm water and dry the respirators prior to storage.
- D. **STORAGE:** Respirators will be placed in ziplock bags and stored in a manner to protect the respirator from environmental damage and distortion.
- E. **CHANGE SCHEDULE:** Our safety director will identify and evaluate the respiratory hazard(s) in the workplace and implement a change schedule for cartridges and filters that is based on objective information or data and will ensure that cartridges are changed before the end of the service life.

VII. RESPIRATOR PROGRAM EVALUATION: The following procedures will be utilized in continual evaluation of the respirator program. A formal evaluation will be conducted annually by our Safety Director to determine continued program effectiveness.

- A. **WEARER ACCEPTANCE:** The effectiveness of a respirator program is largely determined by the degree of worker acceptance. Observe wearers during normal activities and by soliciting their comments.
- B. **EXAMINATION OF RESPIRATORS IN USE:** Respiratory protection is no better than the respirator in use even when worn conscientiously. Periodic equipment inspections are to be conducted by our Safety Director.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

COMMUNICATION AND TRAINING METHODS

The initial training of new employees and the on-going training of all employees are vital parts of our safety program. It is only by ensuring every employee is aware of their responsibilities and the role they play in our safety program that we can work together to create a safe work environment for all employees. As part of our safety program we have established the following methods of communicating safety information, company policies and training programs to employees.

- I. **WRITTEN SAFETY PROGRAM:** All employees receive instructions on how to access our safety program either on-line or at the office. It is a condition of employment that employees read, understand and abide by policies and procedures outlined in our safety program. Employees sign and return a tear-out acknowledgment form from their safety program documenting they understand this. See the section in this safety program on employee responsibilities.

- II. **REGULAR TOOL BOX MEETINGS:** Supervisors are responsible for conducting weekly toolbox meetings at job sites and documenting the meetings by completing toolbox meeting forms. Problems, suggestions and recommendations resulting from toolbox meetings should be recorded on the toolbox meeting form for review by the general safety committee. See the section in this safety program on foreman responsibilities. Topics to be covered during toolbox meetings are as follows:
 - A. New hire orientation topics
 - B. New job site topics
 - C. Suggested on-going training topics
 - D. Special topics
 - E. Site specific emergency action plan

- III. **ANNUAL SAFETY TRAINING SESSION:** Annually a comprehensive safety training session will be conducted. Attendance is mandatory for all employees. Hazardous materials, blood borne pathogen awareness and MRSA awareness are some of the topics discussed. Documentation is maintained showing names of employees who attended and date training was received.

- IV. **FALL PROTECTION:** Prior to beginning work at any job site a careful evaluation will be made of the job site and our work procedures to determine what fall protection systems will be utilized and employees will be trained to recognize fall hazards and the procedures to be used to minimize these hazards. See the section of this safety program on our fall protection program.

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COMMUNICATION AND TRAINING METHODS

- V. **SPECIAL TRAINING SEMINARS:** Periodically training seminars can be conducted by representatives from our insurance carrier or vendors regarding topics such as fall protection, scaffolding, equipment and other areas of safety concerns. Training seminars are documented with date, time, place, topic of discussion, and employees attending seminar.
- VI. **RESPIRATOR TRAINING SESSIONS:** Employees working with hazardous materials requiring respirators will attend respirator training sessions prior to using these materials in the work place. See the section in this safety program on our respirator protection program.
- VII. **SAFETY POLICY POSTERS:** Company safety posters are posted at job site trailers and company bulletin boards as a reminder of our commitment to a safe work place.
- VIII. **QUARTERLY SPECIAL TOOL BOX MEETING AGENDAS:** Quarterly we produce special toolbox meeting agendas. Our safety director reviews the topics on the agenda with all foremen and the foremen then use the special agendas at the next weekly tool box meeting they conduct. The quarterly agendas are a comprehensive list of topics that need to be covered on a regular basis to ensure our policies and procedures are understood and followed by all employees.
- IX. **SAFETY INCENTIVES:** The general safety committee will offer safety incentives at various times to encourage employee participation in our goal to provide a safe, healthy, accident free work environment.
- X. **EMPLOYEE SAFETY REPORTS OR SUGGESTIONS:** Employees are encouraged to make safety suggestions or to report unsafe work place conditions or practices by completing our employee safety information report form. Employees are advised on the form, "...the use of this form or other reports of unsafe conditions or practices is protected by law. It is illegal for an employer to take any action against an employee in reprisal for exercising rights to participate in communications involving safety." An employee may submit our employee safety information report form anonymously.

Knowing how important communication is in enforcement of safety we have indicated several places in our safety program employees are to contact the Acting Chairman of our General Safety Committee or our Safety Director if they feel there is an unsafe work practice or condition, if they are not receiving adequate or proper training in weekly tool box meetings or if there is any safety problem they have not been able to solve directly with their foreman:

Acting chairman of General Safety Committee
702-253-7878

Safety Director
702-253-7878

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

TOOL BOX MEETINGS **TRAINING GUIDELINES FOR FOREMEN**

Foremen / supervisors are encouraged to conduct weekly toolbox meetings at job sites or yards. Toolbox meetings are to be used to train new and existing employees in general safety guidelines, accident and injury prevention, hazardous materials, blood borne pathogens and MRSA awareness, proper use and types of equipment needed for specific situations including personal protective equipment and emergency procedures.

Foremen / supervisors should have the following documentation in their possession for reference, training and reporting of information.

I. SAFETY PROGRAM NOTEBOOK

- J. Safety Program
- K. Supply of Report Forms

II. PROCEDURE MANUAL

- A. Written Hazard Communication Program aligning with the Globally Harmonized System of Classification and Labeling of Chemicals (GHS)
- B. OSHA Hazard Communication Standard
- C. Federal Register Standard Part 1910.1030 Blood Borne Pathogens
- D. Safety Data Sheets (SDS)--separate if too bulky for Procedure Manual
- E. Current List of Designated Medical Facilities
- F. Emergency Numbers Applicable to Job Sites

All weekly toolbox meetings are to be documented by completion of our toolbox meeting form. Our toolbox meeting form has a list of suggested topics to be covered at toolbox meetings in addition to the new hire orientation and new job site topics. A properly completed toolbox meeting form will document when and where meeting was held, who attended and what topics were discussed. Toolbox meeting forms should also be used to document problems or suggestions discussed during the meetings.

Toolbox meetings are to be used by foremen to pass along information from management or special training seminars foremen have attended.

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TOOL BOX MEETINGS **TRAINING GUIDELINES FOR FOREMEN**

INDICATORS WHICH MAY SHOW A NEED FOR TRAINING OR RETRAINING

Every employee's attitude should be one of determination that accidents can be prevented. It is the responsibility of our foremen to be sure there is a concerted effort under way at all times to follow all safe work procedures and health practices which are a part of our safety program. Foremen / supervisors are not to silently condone unsafe or unhealthy actions at job sites.

Listed below are specific indicators foremen / supervisors should use as a guideline for determining if additional training is needed by individual employees or crews:

- I. Excess waste or scrap.
- II. High labor turnover.
- III. Increase in the number of "near misses" which could have resulted in injuries or illnesses.
- IV. Recent upswing in actual accident experience.
- V. High injury or illness incidence.
- VI. Change in products or processes used.
- VII. New equipment.
- VIII. Repeated questioning by employees seeking answers which may seem obvious to you.

Foremen / supervisors are to give particular attention to new employees. Considerable losses can be avoided over a period of time by foremen making the effort to train new employees during their first few hours and days to do things the right way. At the same time attention must be paid to regular crew members even employees who have been with our company for a long period of time. An employee who continues to repeat an unsafe procedure is not working safely even if an accident has not resulted from the situation.

PAR 3 LANDSCAPE & MAINTENANCE SAFETY PROGRAM

GUIDELINES FOR OSHA INSPECTIONS RESPONSE & RECORDKEEPING

It is company policy that all employees are to follow federal and or state safety and health regulations and guidelines. As with any company, we may be audited or inspected by OSHA or a state agency for reasons such as a scheduled inspection, employee complaint, fatality, or random inspection. In the event of an inspection by a federal or state inspector the following procedures and policies are to be followed.

When an OSHA compliance officer reports to one of our jobsites or facilities, the following individuals shall follow these protocols:

Jobsite protocol for Foremen or Supervisors

- Always be courteous and helpful.
- Direct the compliance offer to an area where employees are not currently working, such as a jobsite trailer where the opening conference can be held.
- Ask to see identification – their identification should state that they work for the U.S. department of Labor or if by a state agency then it will have the state identification seal.
- Advise the compliance offer that it is our company policy that our safety director must be contacted and dispatched to the jobsite where the inspection is taking place.
- Ask the inspector to wait for the safety director to arrive before starting the inspection. The compliance officer does not have to wait for the safety director to arrive.
- The foreman/supervisor must take detailed notes as well as pictures of any infractions or violations committed by our employees.
- NEVER admit fault to any alleged violations or agree to pay any violations.
- Report these items to the safety director as soon as possible.
- Determination of fault is the job of the Committee Chairman.

Office protocol for receptionist / Office admin

- Always be courteous and professional
- Ask to see identification – their identification should state that they work for the U.S. department of Labor or if by a state agency then it will have the state identification seal.
- Direct the compliance offer to a conference room where a meeting can be held. DO NOT direct the officer to any other areas of the building.
- Advise the compliance offer that it is our company policy that our safety director must be contacted he can attend the meeting.
- Call your manager and the safety director.
- The safety director or the manager will then oversee the inspection.
 - A. Immediately call the safety director
 - B. Call Corporate or legal counsel
 - C. Call Owner or COO.

Safety Director has the following responsibilities

- He shall act as the company representative and document all violations as well as activities that the compliance officer may perform.
- He shall use the company's OSHA inspection checklist, photographs, video, etc..
- Upon completion of the inspection he should forward all correspondence, reports, photos, videos, to legal counsel, Owner, & COO.

The following personnel shall be present at an OSHA inspection

- Safety director
- Manager or supervisor

OSHA inspection process

- Opening conference

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GUIDELINES FOR OSHA INSPECTIONS RESPONSE & RECORDKEEPING

- The inspection tour
- The closing conference

Violations

Violations are considered “alleged violations” until they become a final order of the Occupational Safety and Health Review Commission.

- A. A citation must be posted at the facility or worksite for three days following its receipt, or until the condition creating the alleged violation is abated (corrected).
- B. Management or employees should not admit to violations of safety standards.

If the company appeals (contests) an alleged violation, copies of the appeal must be posted at the facility or worksite.

In the case of an appeal, management and/or employees may be asked to testify on behalf of the company. Therefore, use the attached OSHA inspection checklist.

Upon completion of an OSHA inspection, the company must provide all required documentation to upper management or the safety director.

OSHA RECORDKEEPING

To ensure that Par 3 Landscape & Maintenance meets reporting requirements and is in compliance with OSHA recordkeeping standards, the following summary has been created to assist all divisions and is a guideline for posting annual summaries and various reporting.

OSHA Logs / Annual Summaries

- The 10 employee rule is the minimum guideline for reporting requirements overall, not jobsite specific. In other words, separate OSHA logs are not required unless the jobsite will be in operation for more than one year. Otherwise, all temporary jobsites will be recorded on one log that is maintained at the office of Par 3.
- Annual summaries do not have to be posted at a jobsite unless the jobsite is in operation for more than one year and we have maintained a separate OSHA log. Then it would be posted at the jobsite in the jobsite trailer.

Our policy will be to maintain the OSHA 300 log and post the annual summary at the office location and at any jobsite that lasts one year or longer. Additionally, we should fax or overnight copies upon request to meet the Federal and more stringent State standards.

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OCCUPATIONAL SAFETY AND HEALTH STANDARDS FOR THE CONSTRUCTION INDUSTRY, CFR 29, PART 1926

Occupational safety and health standards for the construction industry, CFR 29, Part 1926 will be readily accessible to all employees, as well as CFR 29, 1910. All foremen / supervisors will have a copy and copies will be available at the office. This should be used for training and as a reference book. Outlined below are the major sections and topics covered by the OSHA Standards for Construction and some of our policies and procedures and how they relate to it. All employees and in particular our foremen should become familiar and comfortable using the OSHA standards.

Any safety problem or hazard which an employee feels is not being properly handled should be brought to the immediate attention of the Acting Chairman of our General Safety Committee or our safety director.

Acting Chairman of General Safety Committee
702-253-7878

Safety Director
702-253-7878

Employees are encouraged to submit our employee safety information report form to report any unsafe condition or practice. Employees may also use this form to submit a suggestion for improving safety. The use of this form or other reports of unsafe conditions or practices is protected by law. It is illegal for an employer to take any action against an employee in reprisal for exercising rights to participate in communications involving safety. Employees may submit an employee safety information report without filling in their name on the report if they want to remain anonymous.

- I. **SUBPART A, GENERAL:** This section is a general introduction to the Standards for Construction. It establishes the relationship of the occupational safety and health act (OSHA), to previous legislation covering safety and health in the industry.
- II. **SUBPART B, GENERAL INTERPRETATIONS:** This section contains the “general duty” obligation of construction employers and defines the responsibilities of prime contractors and subcontractors. It establishes the employer’s duty to provide a work environment that meets legislative standards for the safety and health of all employees. Employers cannot require employees to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous to their health and safety.
 - A. It is the responsibility of our foremen to be on the lookout for hazards that could cause injury to employees.
 1. When hazards are identified they should be reported immediately to our safety director and corrective action should be taken which will either remove the hazard or give employees the protection or training deemed necessary.
 2. Foremen / supervisors are to follow up with a written report of the hazards identified by completing our near miss/potential accident report form including corrective action that was taken or is pending. The report is to be submitted to our safety director for review at the next general safety committee meeting.

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- B. Our Safety Director and general superintendent are to make safety inspections a routine part of their visits to job sites.
 - 1. When hazards are identified corrective action is to be taken immediately to either remove the hazard or give employees the protection or training deemed necessary.
 - 2. The hazard identified should be discussed with our foremen at the job site to determine why they had not already identified the hazard and taken corrective action.
 - 3. A Near Miss/Potential Accident Report form should be completed and submitted at the next General Safety Committee. Any corrective action taken or pending should be shown in the report.
- C. It is the responsibility of our employees to report all safety and health hazards to their foremen immediately.
- D. It is the responsibility of our employees to follow all safety and health rules and practices and to protect themselves against on-the-job hazards.

III. **SUBPART C, GENERAL SAFETY AND HEALTH PROVISIONS:** This section establishes the basic safety and health mandates for compliance with OSHA standards and creating a safe and healthful construction work place.

- A. By implementing our safety program our company has initiated and is maintaining an accident-prevention program and is educating employees in the recognition, avoidance and prevention of unsafe conditions in the work place. An important part of our safety program is the training of our employees since neither specific hazards nor the ways to avoid accidents is necessarily obvious to the untrained employee.

IV. **SUBPART D, OCCUPATIONAL HEALTH AND ENVIRONMENTAL CONTROLS:** In addition to following up on the general sanitation, noise protection and illumination provisions contained in Subpart C, this contains regulations for controlling the major environmental hazards of radiation, airborne contaminants and specifically methylenedianaline and lead. It also contains the standards on hazard communication and emergency response. See the sections in this safety program on our hazard communication program and our emergency response involving hazardous materials incident program.

- A. **First aid and medical attention:** After blood borne pathogens and MRSA awareness training foremen are to have first aid kits in their vehicles. First aid kits are to be checked weekly to ensure expended items are replaced.

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OCCUPATIONAL SAFETY AND HEALTH STANDARDS **FOR THE CONSTRUCTION INDUSTRY, CFR 29, PART 1926**

1. Only minor cuts and abrasions may be treated and only after blood borne pathogens and MRSA awareness training has been completed.
2. For injuries that are not life-threatening requiring medical attention foremen/ supervisors are to maintain a current list of designated medical facilities in their procedure manual. The injured employee should be directed or taken to the closest designated facility.
3. For life-threatening injuries the closest medical attention should be obtained. Do not move a seriously injured person unless absolutely necessary as further injury may result.
4. Foremen/ supervisors are to familiarize themselves with the general contractor/builder's emergency procedures established for the job site and keep appropriate emergency numbers including the number of the nearest medical facility in their procedure manual.
5. Emergency procedures, first aid procedures and limitations as well as designated medical facilities and emergency medical facilities should be discussed at the first tool box meeting prior to beginning work at a job site.

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- B. **Gas, Vapors, Fumes, Dusts and Mists:** Administrative, environmental and/or engineering controls must first be implemented whenever feasible to limit employee exposure to gas, vapors, fumes, dusts and mists. When such controls are not feasible or do not completely eliminate the hazard protective equipment or other protective measures must be used to keep exposure of employees to air contaminants within the limits prescribed in Subpart D. Whenever respirators are used their use shall comply with Subpart E. See the section in this safety program on our respiratory protection program.
- V. **SUBPART E, PERSONAL PROTECTIVE AND LIFE SAVING EQUIPMENT:** This section covers equipment for foot, head, hearing, eye, face and respiratory protection. It is very specific about the types of equipment required or recommended for various hazards and about how they should be used. See the sections in this safety program on our personal protective equipment assessment, selection and training program and our respiratory protection program.
- VI. **SUBPART F, FIRE PROTECTION AND PREVENTION:** This section covers standards relating to fire protection and prevention. Most fires start small but can rage out of control quickly. Stopping them before they start requires that everyone work together to detect possible fire hazards and report them promptly.
- A. Prior to beginning work at a job site our foremen are to familiarize themselves with the general contractor/builder's emergency procedures for the job site including procedures for fire. Emergency procedures, telephone numbers and the location of all fire-fighting equipment should be noted in each foreman's procedure manual.
- B. All foremen/ supervisors are to have a fire extinguisher in their vehicle that meets with OSHA's fire protection standard for the products to which they are exposed. Fires involving different substances create different conditions which make them extremely difficult to extinguish if the wrong type of fire extinguisher is used.

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- C. Emergency procedures and training regarding fires including the location of all job site fire-fighting equipment and the foreman's fire extinguisher should be included in the first job site tool box meeting.
 - 1. If employees have access to portable fire extinguishers they must be trained with the general principles of fire extinguisher use and the hazards involved with incipient stage firefighting.
 - 2. Foremen/ supervisors are to receive training from our purchasing agent or safety director at the time they are given a fire extinguisher for their vehicle. Training is to be refreshed annually and fire extinguishers are to be returned to our fleet maintenance manager annually for a maintenance check.
- D. When a fire breaks out your first reaction should be to call the fire department. When the fire is small take fast action with the right extinguisher to put it out or keep it contained. Fire extinguishers are effective only when fires are in their first stages. It is essential fire extinguishers be kept immediately accessible and are promptly used.
- E. Employees should never join in firefighting unless their help is specifically requested by their foreman or the fire fighters and they have been trained in firefighting.
- F. The following areas of fire prevention and protection should be discussed at weekly tool box meetings:
 - 1. Good job site housekeeping.
 - 2. Care, use and storage of flammable liquids.
 - 3. Observance of "no smoking" rule in all designated areas.
 - 4. Responsibility of employees for preventing fires.
- VII. **SUBPART G, SIGNS, SIGNALS AND BARRICADES:** This section provides the standard colors and shapes for accident-prevention signs and tags. Caution signs, traffic-control devices, accident prevention signs and tags and crane and hoist signals must all conform to uniform standards. For maximum impact they must be easily visible and instantly recognizable. Once tags and signs no longer apply they should be removed.
- VIII. **SUBPART H, MATERIALS HANDLING, STORAGE, USE AND DISPOSAL:** This section prescribes methods for stacking, moving, handling, storing and discarding the most common materials on construction sites. These regulations are designed to control the risks of slipping, falling materials, fire or explosion when supplies are not stored or handled properly.
 - A. Problems with materials handling have their origins in inadequate planning, storage, housekeeping, training and equipment selection and usage. Our foremen will be responsible for the proper training of employees to eliminate injuries associated with

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Materials handling. Indicators to watch for which will help detect potential problems at a job site are:

1. Occurrences of sprains and strains, especially backs and struck-by incidents.
2. Crowded, cluttered work areas.
3. Manual handling of materials over 50 pounds.
4. Repetitive handling of materials.
5. Excessive temporary storage of materials.
6. High rate of damage to materials or equipment.

IX. **SUBPART I, TOOLS--HAND AND POWER:** This section focuses on hand tools, power-operated hand tools (electric, pneumatic, fuel-powered, hydraulic and powder-actuated), abrasive wheels and tools, woodworking tools, jacks of all sorts, air receivers and mechanical power-transmission apparatus. Because many of the tools covered in this section are familiar the tendency to overlook safe practices presents a real risk of serious injury. Tools must be in compliance with this standard and be properly maintained and used whether they are supplied by our company or belong to our employees.

A. **Powder-actuated tools:** Only employees who have been trained will be allowed to operate a powder-actuated tool.

1. Powder-actuated tools used by employees are to meet all applicable requirements of ANSI A10.3-1970 safety requirements for explosive-actuated fastening tools.
2. All authorized instructors will have read and be familiar with OSHA standards regarding powder-actuated tools and be capable of training and testing operators prior to issuing a qualified operator's card.
 - a. Prior to being assigned their use employees who will be using low velocity guns will be trained by authorized instructors provided by the vendor selling low velocity guns to us.
 - b. After being trained our employees will be certified and licensed to operate low velocity guns and will receive a qualified operator's card.

X. **SUBPART J, WELDING AND CUTTING:** This section covers welding, cutting and heating operations including gas welding and cutting, arc welding and cutting, fire prevention and toxic material protection. Use of cylinders, provision of mechanical ventilation, confined space work and safeguarding against contact with toxic metals and preservative coatings are particularly specified. Even workers who are not "welders" must be aware of the hazards in handling fuel cylinders and in being near a welding or cutting work area.

XI. **SUBPART K, ELECTRICAL:** This section covers the electrical safety requirements necessary to safeguard construction employees including installation safety requirements, safety-related work practices, safety-related maintenance and environmental considerations

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and safety requirements for special equipment. It is the responsibility of our foremen to train employees in weekly tool box meetings with basic information regarding this standard including:

- A. Electrical hazards on the job site.
- B. Restricted activities or areas on the job site.
- C. Personal protective equipment required if applicable.
- D. Safe work practices if working on or near electrical equipment.
- E. Lockout/tag-out procedures.
- F. Extension cord sets and flexible cords.
- G. Use and care of electrical tools and equipment.

XII. **SUBPART M, FALL PROTECTION:** Fall protection is covered in many parts of the construction standards. Requirements for specific operations are covered in Subpart L--Scaffolding;; Subpart S--Underground Construction, Caissons, Cofferdams and Compressed Air; Subpart V--Power Transmission and Distribution and Subpart X--Stairways and Ladders.

Subpart M provides the basic standards for all fall protection systems and for mandatory employee training in fall hazards. In construction work two factors complicate the risks of either falling or being hit by falling materials: first the “edges” are constantly changing and second the work force is often scattered and highly mobile. These factors mean that any opening or edge that presents a hazard must be guarded in such a way that even a casual passerby is protected. Achieving this protection calls for basic training for employees, constant vigilance from our foremen and the use of fall protection systems. See the section in this safety program on our fall protection program.

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- XII. **SUBPART O, MOTOR VEHICLES AND MECHANIZED EQUIPMENT:** This section covers requirements for equipment and motor vehicles that are operating at an off-highway site not open to public traffic. The regulations concentrate on safe practices and procedures for all vehicles and heavy equipment engaged in ground transportation and the manipulation of materials.
- A. Our safety director or shop maintenance manager are responsible for deciding which motor vehicles or equipment will be used for transporting and moving materials in the yard and at job sites.
 - B. Our shop maintenance manager is responsible for inspection and maintenance of vehicles and equipment used for transporting and moving materials in the yard and at job sites.
 - C. Our foremen/ supervisors are responsible for making sure only trained employees operate vehicles and equipment used for transporting and moving materials at job sites. They are also responsible for ensuring vehicles and equipment is used in a safe manner.
 - D. Employees should not operate vehicles or equipment to transport or move materials until they have received training in safe operating procedures.
 - E. Employees are not to remove, displace, damage, destroy or carry off any safety device furnished and provided for their use or the use of another person. Employees are not to interfere with the use of any method or process adopted for the protection of themselves or another person. Any employee who by-passes or ignores safety features on vehicles or equipment will be subject to immediate discipline up to and including termination.
 - F. Employees are to report any breakdowns or defects in vehicles or equipment promptly to the shop maintenance superintendent and follow up with a written report by completing and submitting our employee safety information report form. Continued use of an unsafe structure, equipment or vehicle is prohibited pending correction of the unsafe condition. See the section in this safety program on our fleet safety program.

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- XIII. **SUBPART P, EXCAVATIONS:** This section covers the safe work practices workers and supervisors need to follow for excavation and trenching operations.

- XIV. **SUBPART Q, CONCRETE AND MASONRY CONSTRUCTION:** This section covers the general requirements for concrete and masonry construction and the equipment and tools associated with it. It also details the practices to be used for cast-in place concrete work, precast concrete work, masonry construction and lift-slab construction.

- XV. **SUBPART W, ROLLOVER PROTECTIVE STRUCTURES (ROPS); OVERHEAD PROTECTION:** This section provides the design, performance, testing and installation requirements for rollover and overhead protection for material handling equipment.

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- XVII. **SUBPART CC, CRANES AND DERRICKS IN CONSTRUCTION:** This section applies to power-operated equipment, when used in construction that can hoist, lower and horizontally move a suspended load.

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DEFINITIONS

ANSI: American National Standards Institute

Authorized person: a person approved or assigned by the employer to perform a specific type of duty or duties or to be at a specific location or locations at the job site.

Competent person: a person 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.

Designated person: a person who is an “authorized person” as defined above.

Hazardous substance: a substance which by reason of being explosive, flammable, poisonous, corrosive, oxidizing, irritating or otherwise harmful is likely to cause death or injury.

Qualified person: a person who by possession of a recognized degree, certificate or professional standing or who by extensive knowledge, training and experience has successfully demonstrated their ability to solve or resolve problems relating to the subject matter, the work or the project.

PAR 3 LANDSCAPE & MAINTENANCE - SAFETY PROGRAM

ACKNOWLEDGMENT OF SAFETY PROGRAM

- I hereby acknowledge I have been instructed I can access Par 3 Landscape & Maintenance’s written safety program at the office.
- I understand it is a condition of employment with Par 3 Landscape & Maintenance that I read, understand and abide by the policies and procedures established by the company in its written safety program.
- I understand my responsibilities as an employee in helping to achieve the company’s goal of eliminating all occupational accidents and incidents and creating a work environment that is both safe and healthy.
- I understand if I have questions regarding the company’s written safety program I should discuss them with my foreman, supervisor or the safety director.
- I understand if I feel I am not receiving proper or sufficient training I should contact the Acting Chairman of the general safety committee or the Safety Director at 702-253-7878.
- I understand if I have an unsafe condition or practice to report or if I have a safety suggestion I would like to recommend I should complete an employee safety information report and submit it directly to the office. I know this form may be completed and submitted anonymously if desired.
- I understand it is illegal for an employer to take any action against an employee in reprisal for exercising rights to participate in communications involving safety.
- **I UNDERSTAND THE CONTENTS OF THIS SAFETY PROGRAM DO NOT CONSTITUTE THE TERMS OF A CONTRACT OF EMPLOYMENT.**

Employment with Par 3 Landscape & Maintenance is on an “at-will” basis. Our employment relationship may be terminated at any time by either the employee or the company for any reason not prohibited by law.

EMPLOYEE’S COPY OF ACKNOWLEDGMENT FORM.

Employee’s Name: _____

Date: _____

Employee’s Signature: _____