

# Site Specific Safety Plan



#### Site Specific Safety Plan

The purpose of this document is to provide a location in which a Contractor preparing to begin work on behalf of VRE can attest to consideration of, and help identify Environmental, Health, and Safety (EHS) issues at the project location.

# The desired outcome of this plan will be:



The safest possible worksite



Open communications and clear expectations between VRE, the Contractor and Subcontractors regarding potential safety hazards well in advance of job/task execution



Associated costs for EHS compliance will be captured ahead of task

This document shall be completed and approved by an officer of the Contractor and then forwared to VRE to be approved. Once approved, this plan shall be used in the site safety process and fully understood by all appropriate Contractor personnel.

#### Plan Approvals

| Officer of Contractor Organization | VRE Chief Safety Officer |
|------------------------------------|--------------------------|
| Printed Name                       |                          |
| Signature                          |                          |
| Date                               |                          |

This document is intended to aid a Contractor in properly developing an understanding of the work environment about to be encountered. It is not to be understood as an exhaustive list of worksite hazards or replace the need for a more comprehensive or stringent safety plan - where applicable. By signing this document, VRE certifies that it has received this Plan and acknowledges it to be a good-faith effort from the Contractor in beginning the site safety process.

VRE does not assume any liability for any of the hazards, or potential hazards noted in this document and for areas omitted from this plan.

| Project Title           |
|-------------------------|
| VRE Contract Number     |
| Contractor's Name       |
| Location(s) of Project  |
| Project Duration Period |

#### Description of Scope of Work

#### (Large Projects\*)

Contractor's Project Safety Manager (include name, qualifications, planned schedule on project and detailed description of duties:

\*A large project is defined as having a total contract value in excess of \$5million dollars or whenever work includes one or more of the following:

- Bridge work above tracks
- Tunnel work below tracks
- Cranes and rigging where required crane capacity is greater than 50-tons
- Confined space entry
- Excavations greater than 4-feet

#### How to complete this plan:

Evaluate each subject topic and determine if it is required. If required, place a checkmark in the "yes" column and provide specific details in the "remarks" column. If more space is needed, find the blank Attachment A page, at the end of the document, and make as many copies as necessary. Remember to use the item number from the "item #" column to associate any supplemental remarks.

If you don't believe the category will be a factor in your project, check "N/A" and move to the next section.

Check marks under the "no" section will require remarks

#### Section I General Safety Plan Information

| Item# | Subject  | Requ  | ired? | Description/Response |  |  |
|-------|--|-------|-------|----------------------|--|--|
|       | Site Safety on VRE/Railroad Property   | N/A[] |       | N/A []               |  |  |
| GS1   | Describe your plan for providing safety training for employees.  | Yes   | No    |                      |  |  |
| GS2   | Describe your plan for continued training and enforcement of compliance (formal and informal) of employees |       |       |                      |  |  |
| GS3   | Describe your plan for handling waste materials.   |       |       |                      |  |  |

| GS4 | Describe your planned security procedures for preventing damage or theft of in-place work, property, and equipment owned by VRE or the Contractor. |  |  |
|-----|--|--|--|
| CCE | Describe very an analysis and an analysis to   |  |  |
| GS5 | Describe your emergency procedures to manage site emergencies, evacuations, extreme/sudden weather and other circumstances                         |  |  |
| GS6 | What type of PPE will be used for this project?  |  |  |
|     |  |  |  |
| GS7 | Describe your plan for providing Personal Protective Equipment (PPE) to employees and visitors who may arrive without PPE.                         |  |  |

| GS8  | Will any special PPE be required, i.e respirators? If yes, what type?   |  |
|------|---|--|
|      |   |  |
|      |   |  |
|      |   |  |
| GS9  | Will eye wash and shower stations need to be set up on the jobsite?   |  |
| GS10 | Has personnel received training for special PPE requirements?   |  |
| GS11 | Is there verification of medical respiratory protection clearance available to the VRE Project Management Team? |  |
| GS12 | Will respirators be worn on a voluntary basis?  |  |
| GS13 | Is a de-con area required for suiting up/down?  |  |
| GS14 | Will perimeter barricades be used?  |  |
| GS15 | Will caution/danger signage be needed?  |  |
| GS16 | Will Hot Work (welding/cutting/grinding/soldering/electrical) need to occur?                                    | Permission to conduct Hot Work is required from VRE before taking place. |
| GS17 | Will Hot Work (welding/cutting/grinding/soldering/electrical) permits be required?                              |  |
| GS18 | Will fire blankets/protective shields/screens be required?  |  |
| GS19 | Are fire-watch personnel properly trained?  |  |
| GS20 | Describe your After-Work watch plan   |  |
| GS21 | Will any utility interruption permit or railroad/municipality-issued dig tickets be required?                   |  |

#### **Section 2 Railroad Operating Environment**

| Item# | Subject   | Required? |    | Description/Response             |
|-------|---|-----------|----|----------------------------------|
|       | Roadway Worker Protection<br>(RWP)<br>(49 CFR 214 Subpart C)  | N/A       |    |                                  |
| RR1   | Will work be confined to VRE track territory?   | Yes       | No | If no: Amtrak [ ] CSX [ ] NS [ ] |
| RR2   | Describe your plan to ensure all employees who will perform service in an area where RWP training is required receive proper training.      |           |    |                                  |
| RR3   | Describe your plan to ensure ongoing compliance with applicable RWP regulations and host railroad/VRE requirements.                         |           |    |                                  |
| RR4   | Describe your plan to coordinate with the host railroad Employee in Charge to establish protection or to establish acceptable work windows. |           |    |                                  |

| RR5 | Describe your plan to check for, investigate, and discipline violations of Roadway Worker Protection requirements. |  |  |
|-----|--|--|--|
|     |  |  |  |

| Item # | Subject   | Requ | ired? | Description/Response             |
|--------|---|------|-------|----------------------------------|
|        | Blue Signal Protection<br>(49 CFR 218 Subpart B)  |      | (]    |                                  |
| RR6    | Will work be confined to VRE territory?   | Yes  | No    | If no: Amtrak [ ] CSX [ ] NS [ ] |
| RR7    | Will individual blue tag cards with photos of isuee be distributed to applicable staff?   |      |       |                                  |
| RR8    | Describe your plan to coordinate with the VRE yard manager or host railroad point of contact to establish blue signal protection or to establish acceptable work windows. |      |       |                                  |
| RR9    | Describe your plan to establish and maintain proficiency in Blue Signal Protection requirements among staff.  |      |       |                                  |

| RR10 | Describe your plan to check for, investigate, and discipline violations of Blue Signal Protection. |  |  |
|------|--|--|--|
|      |  |  |  |

| Item# | Subject   | Requ   | ired? | Description/Response |
|-------|---|--------|-------|----------------------|
|       | Bridge Worker Safety<br>(49 CFR 214 Subpart B)  | N/A [] |       |                      |
| RR11  | Contractor has full understanding and ensures full compliance with all applicable elements of 49 CFR 214 Subpart B prior to starting work.  | Yes    | No    |                      |
| RR12  | Contractor has a program in place that requires training in, adherence to, and use of safe procedures associated with climbing techniques and procedures to be used on or about the bridge structure. |        |       |                      |
| RR13  | Will scaffolding be involved in the work and will it fully comply with the requirements of 49 CFR 214.109?  |        |       |                      |
| RR14  | Will fall protection systems be involved in<br>the work and will it fully comply with the<br>requirements of 49 CFR 214.109 and all<br>other applicable requirements?                                 |        |       |                      |

| RR15 | Will water that may pose a drowning risk or greater in depth than four (4) feet will be present at the worksite? If yes, a plan shall be developed to manage compliance with this hazard. |  |  |  |  |
|------|---|--|--|--|--|
|      |   |  |  |  |  |

## **Section 3 Life Saving Commitments – Stored Energy**

| Item # | Subject  | Requ   | ired? | Description/Response  |  |         |  |  |
|--------|--|--------|-------|---|--|---------|--|--|
|        | Lockout/Tagout (LOTO)  | N/A [] |       | N/A [ ]   |  | N/A [ ] |  |  |
| SE1    | Will LOTO be required?   | Yes    | No    | If yes, Contractor Superintendent will inspect LOTO source and ensure LOTO procedures are followed. |  |         |  |  |
| SE2    | Are LOTO procedures available?   |        |       |   |  |         |  |  |
| SE3    | Has a responsible person been assigned for overseeing LOTO requirements? |        |       |   |  |         |  |  |

| Item# | Subject   | Requ | ired? | Description/Response |
|-------|---|------|-------|----------------------|
|       | Pipe and Vessel Pressure Testing  | N/A  | []    |                      |
| SE4   | Will any pipe/vessel pressure testing be required?  | Yes  | No    |                      |
| SE5   | Will pipe/vessel testing be performed within design specifications?   |      |       |                      |
| SE6   | Has a Pressure Testing Safety Plan been developed and approved?  Note- Pressure Testing Safety Plans may be requested by VRE Project Management Team for approval. Hydrostatic is the preferred testing method. |      |       |                      |

| Item# | Subject                                  | Requ    | ired? | Description/Response            |
|-------|--|---------|-------|---------------------------------|
|       | Compressed Gas                           | N/A [ ] |       |                                 |
|       |  |         |       |                                 |
| SE7   | Will cylinders be brought on site?       | Yes     | No    | Type of cylinders and quantity: |
|       |  |         |       |                                 |
|       |  |         |       |                                 |
| SE8   | Are there plans for safe use and storage |         |       |                                 |
|       | on site?                                 |         |       |                                 |
|       |  |         |       |                                 |
|       |  |         |       |                                 |

## **Section 4 Life Saving Commitments – Fall Protection**

| Item# | Subject  | Requ | ired? | Description/Response   |
|-------|--|------|-------|--|
|       | Ladders/Scaffolding  | N/A  | []    |  |
|       |  |      |       |  |
| FP1   | Will ladders be required? (All ladders shall have a min 300 lb rating)                               | Yes  | No    | Metal ladders will be approved by VRE Project Management Team.         |
| FP2   | Will scaffolding be required?  (Scaffold tags and inspections are required when scaffolding is used) |      |       | Provide person(s) name, contact information and training verification. |
| FP3   | Will fall protection be required? List equipment to be used.   |      |       |  |

| Item# | Subject   | Requ   | ired? | Description/Response  |
|-------|---|--------|-------|---|
|       | Fall Protection, Leading Edge Work, Elevated Surfaces (no safety monitors)  | N/A [] |       |   |
| FP4   | Has a Fall Protection Rescue Plan been developed? If yes, attach and describe the plan.   | Yes    | No    |   |
| FP5   | Will fall protection be required? (No safety monitors). 100% protection > 6 feet is required.   |        |       | Systems to be used:   |
| FP6   | Are competent/qualified persons identified to perform system and equipment inspections, identify hazards and anchor points as needed? |        |       | Provide individual's name, qualifications/certifications and contact information. |

| Item # | Subject                       | Requ    | ired? | Description/Response  |
|--------|-------------------------------|---------|-------|---|
|        | Roof Work                     | N/A [ ] |       |   |
| FP7    | Will roof access be required? | Yes     | No    | Attach Fall Protection Plan and Emergency Rescue Plan (Primary and alternate plan to be submitted prior to commencing work) |

| FP8  | Is there a plan to get materials on/off roof in place?                      |  |   |
|------|---|--|---|
| FP9  | Has a method for securing materials to prevent "blow offs" been identified? |  |   |
|      | prevent blow ons been identified:   |  |   |
| FP10 | Are chemicals or flammable/combustible materials going on roof?             |  | This is required to be approved by VRE Project Management Team. |

| Item# | Subject  | Requ | ired? | Description/Response          |
|-------|--|------|-------|-------------------------------|
|       | Fall Protection, Leading Edge<br>Work, Elevated Surfaces (no safety<br>monitors - 29 CFR 1926.502(h))                  | N/A  | []    |                               |
| FP11  | Will fall protection be required? (Mandatory for all unprotected edges and sides, 6 feet and higher above lower level) | Yes  | No    | Systems to be used:           |
| FP12  | Has a Fall Protection Rescue Plan been developed?  |      |       | Describe and attach the plan. |

| FP13 | Are competent/qualified persons identified to perform system and equipment inspections, identify hazards and anchor points as needed? | Provide individual's name, qualifications and contact information. |
|------|---|--|
|      |   |  |

# Section 5 Life Saving Commitments - Cranes & Rigging

| Item# | Subject  | Requ | ired? | Description/Response   |
|-------|--|------|-------|--|
|       | Cranes & Rigging   | N/A  |       |  |
| CR1   | Will crane operations be required? If yes, discuss with your PM team about the need to have a Crane Operations and Safety Plan established and available for inspection.   | Yes  | No    |  |
| CR2   | Have all overhead lines been identified and has a plan been established to communicate and/or mark their presence?   |      |       |  |
| CR3   | Will any special lifting devices be needed?  |      |       |  |
| CR4   | Will any Critical Lifts take place? A Critical Lift meets any of the following criteria: 1) exceeds 75% of the capacity of the crane or derrick; 2) requires more than one crane or derrick; 3) involves lifts over people or critical work processes. |      |       | Discuss with the VRE Project Management Team about the need to develop a critical lift plan and activity summary.      |
| CR5   | Has all rigging equipment been inspected?  |      |       | Submit verification of inspection training to the VRE Project Management Team (prior to commencing work).              |
| CR6   | Is all equipment appropriate for the task(s)?  |      |       |  |
| CR7   | Have all required safety inspections been completed?   |      |       | Be prepared to make inspection logs completed for equipment/lift devices available to the VRE Project Management Team. |
| CR8   | Will traffic control be provided? (pedestrian, passenger & vehicular)  |      |       | Be prepared to provide flaggers' names and evidence of training to the VRE Project Management Team.                    |

## **Section 6 Life Saving Commitments – Confined Spaces**

| Item# | Subject   | Requ | ired? | Description/Response   |
|-------|---|------|-------|--|
|       | Confined Spaces*  *OSHA Definition  | N/A  | []    |  |
| CS1   | Will any confined space work be performed? Note: Atmospheric testing must be conducted and documented daily prior to entry into a Confined Space. | Yes  | No    |  |
| CS2   | Will any Confined Space Entry permits be required?  |      |       |  |
| CS3   | Have affected personnel been trained for Confined Space entry?  |      |       |  |
| CS4   | Will external rescue team services be used? If yes, specify the name of the provider.   |      |       |  |
| CS5   | Have all entry procedures been provided and documented?   |      |       | Be prepared to provide Confined Space Plan to VRE Project Management Team. |

#### **Section 7 Life Saving Commitments – Excavations**

| Item# | Subject  | Requ | ired? | Description/Response |
|-------|--|------|-------|----------------------|
|       | Excavations  | N/A  | []    |                      |
| EX1   | Will equipment be brought on site? If yes, specify type.             | Yes  | No    |                      |
| EX2   | Will any work activities involve excavations greater than four feet? |      |       |                      |
| EX3   | Will a trench box/shoring be needed?                                 |      |       |                      |
| EX4   | Does fencing/barricade need to be installed?                         |      |       |                      |

## Section 8 Life Saving Commitments - Mobile/On Track Equipment

| Item # | Subject  | Requ   | ired? | Description/Response  |
|--------|--|--------|-------|---|
|        | Mobile Equipment / Powered Industrial Fork Trucks / Lifts / Booms / Ballast Regulators / | N/A [] |       |   |
| ME1    | Will any mobile powered equipment be required?   | Yes    | No    | If yes, list types to be brought on site and keep daily/shift inspection logs on the equipment. |
| ME2    | Will you be using any special attachments? Ex. Jibs, manlifts, etc.                      |        |       |   |
| ME3    | Are operators trained/certified for operations of equipment?                             |        |       | Be prepared to produce verification of training to VRE Project Management Team.                 |
| ME4    | Is there a plan for fuel transfer/storage or battery changes?                            |        |       | Spill kit/containment pad required containing 80% equipment capacity.                           |

#### Section 9 Life Saving Commitments - Caught-In/Struck-By

| Item# | Subject  | Required? |    | Description/Response |
|-------|--|-----------|----|----------------------|
|       | Caught-In/Struck-By  | N/A [ ]   |    |                      |
| OF1   | Are employees familiar with pinching and crushing point locations?   | Yes       | No |                      |
| OF2   | Are special precautions taken when working around belts, pulleys, chains, etc.?  |           |    |                      |
| OF3   | Are employees aware of the hazards associated with overhead loads and swing radius?  |           |    |                      |
| OF4   | Are vehicles equipped with appropriate back-up alarms, horns and lights?   |           |    |                      |
| OF5   | Is contractor prepared to comply with the requirement to provide a spotter for all vehicles reversing with restricted rear vision? |           |    |                      |

#### **Section 9 Life Saving Commitments – Chemical Hazards**

| Item# | Subject  | Required? |    | Description/Response   |
|-------|--|-----------|----|--|
|       | Chemical Hazards   | N/A []    |    |  |
| CH1   | Are MSDS/SDS available at job site and available for inspection by the VRE Project Management Team?      | Yes       | No |  |
| CH2   | Are employees trained to handle/use and store specific materials?  |           |    |  |
| CH3   | Does storage and use meet all internal, VRE, state and federal regulations?                              |           |    |  |
| CH4   | Do employees working with OSHA regulated chemicals have proper training for the job? (silica, RCS', Etc) |           |    | Be prepared to produce evidence of successful training to VRE Project Management team. |
| CH5   | Are there any additional exhausts or fans needed during application/curing time?                         |           |    |  |
| CH6   | Will sealant be applied to this job? Please specify quantity and job type.                               |           |    |  |
| CH7   | Will this require off-hours application to avoid contact with passengers.                                |           |    |  |

| CH8  | Will any flammable gases and/or liquids be used?   |  |  |
|------|--|--|--|
| CH9  | Have provisions for their storage been made?   |  |  |
| CH10 | Will appropriate containers be utilized? Safety Cans are required.                                     |  |  |
| CH11 | Are secondary containment and spill kits required?   |  |  |
| CH12 | Will designated smoking areas be identified?   |  |  |
| CH13 | Have the appropriate number of fire extinguishers been identified?                                     |  |  |
| CH14 | Have emergency phone numbers been identified and plan to be posted in a conspicuous location?          |  |  |
| CH15 | Is there a plan for waste disposal in places that are capable of being rain and leak proof?            |  |  |
| CH16 | Are all characterization, containerization, segregation, storage and disposal requirements understood? |  |  |
| CH17 | Is there a plan for water/wastewater discharges in place?  |  | Be prepared to make plan available to VRE Project Management Team. |
| CH18 | Is an Erosion Control Plan in place?   |  | Be prepared to make plan available to VRE Project Management Team. |
| CH19 | Is there a Spill Plan in place?  |  | Be prepared to make plan available to VRE Project Management Team. |

## Section 10 Life Saving Commitments - Drug & Alcohol Prohibition

| Item # | Subject   | Required? |    | Description/Response |
|--------|---|-----------|----|----------------------|
|        | Drug & Alcohol  | N/A [ ]   |    |                      |
| DA1    | Contractors and subcontractors must agree to the zero-tolerance drug and alcohol prohibition (influence, use, possession) from all VRE contract work. | Yes       | No |                      |

#### **Appendix A - Supplemental Information Sheet**

Use this page to provide supplemental content to any of the elements above. Reproduce this portion as many times as is needed.

| Section # | Item# | Subject |
|-----------|-------|---------|
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