

Request No. _____
 FY _____
 Date Logged _____
FOR OFFICE USE ONLY

SITE SAFETY PLAN

Date _____

OFFICE OF DRILLING SERVICES

A complete and signed Site Safety Plan and Hazardous Waste/Materials Questionnaire is due by close of business Tuesday of the week prior to the scheduled drilling start-up date.
 Please fax to ODS Scheduling at (916) 227-4408.

Geologist / Engineer _____	Telephone No. _____	Senior Geologist / Engineer Signature _____	Telephone No. _____
PROJECT INFORMATION		District _____	County _____
Geographic Name / Bridge Name _____		Route _____	Post Mile / KP _____
E.A. No. _____	FA - Activity Code _____	Special Designation _____	

Local Hospital Basic Emergency Trauma Center **Please attach map with route to hospital from site(s) clearly marked**

Name: _____ Is there clear Cell Phone reception and transmission at the Site(s)? Yes No Unknown

Address: _____

Phone No.: _____

Please describe any known Physical Hazards at the Site(s):

UTILITY CLEARANCE (USA) DATA

USA Ticket No.: _____ USA Exp. Date: _____

Location Description as Mapped by USA:

<u>Members Contacted by USA</u>	<u>Did you receive a Member Call-Back?</u>	<u>Did you have a Field Meet with Member?</u>	<u>Did the Member mark or flag their utilities at the site(s)?</u>
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
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_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are there Non-Member Utilities at the Site(s)? Yes No

Non-Members Contacted: _____

Are there Overhead Utility lines at the Site(s)? Yes No

Have you been briefed on the location(s) of Non-Member Utilities at the site(s)? Yes No

Are the locations Marked or Flagged? Yes No

Remarks

Please remember to document your field (tailgate) safety meeting on form PM-S-0110