### IDENTIFICATION

|  |  |
| --- | --- |
| Job Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Job Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Competent Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

### EXCAVATION CHARACTERISTICS

|  |  |  |  |
| --- | --- | --- | --- |
| Length | Width | Depth | Slope |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Soils Type** | **Moisture Content** |  | **Activities** |  |
| A | Dry |  | In Excavation |  |
| B | Moist |  | Nearby |  |
| C | Wet |  |  |  |

### PROTECTIVE SYSTEMS AND DOCUMENTATION

Protective System Properly Installed?  Yes  No

Protective System Data Available?  Yes  No

### PROCEDURES

Air testng required?  Yes  No Performed?  Yes  No

Confined space?  Yes  No Safety Watch in use?  Yes  No

### INSPECTION

Surface Encumbrances  Yes  No (Describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adjacent Activities (Describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Barricades or Perimeter warning properly marked?  Yes  No

Proper Access Provided? (ladders accessible < 25 ft or ramps)  Yes  No

Cross Over walk ways with railings provided as needed?  Yes  No

Recent or Continuing Precipitation?  No  Light  Medium

Heavy Water Accumulation in bottom?  Yes  No

Pumps Operating?  Yes  No

Spoils, tools and materials away from edge?  Yes  No

Signs of imminent failure or distress (sloughing, spalling, bulging or cracks in walls or near edge on surface)?  Yes  No

Other Hazards Observed?  Yes  No If yes, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Corrective Action Required?  Yes  No If yes, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Corrective Action has been taken and verified?  Yes  No

**Excavation Safe For Entry??**  **Yes  No**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Time Inspected By:

Note: A completed, dated and signed copy of this inspection checklist should be posted at entry point for each excavation prior to entry each day.