

# ADVANCE WINDOW CLEANING

#11-19160 119 AVE. PITT MEADOWS, B.C. V3Y-2L7 TEL. 604-908-2296 FAX. 604-465-6687

## Fall Protection Site Work Plan

I.H. & S. Regulation # 11.3 (1),(2)&(3)

Date: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Customer: \_\_\_\_\_ Height: \_\_\_\_\_

Construction Site: \_\_\_\_\_ Finished Building: \_\_\_\_\_ Plant Facility: \_\_\_\_\_ Other: (explain) \_\_\_\_\_

General Contractor: \_\_\_\_\_ CSO Contact: \_\_\_\_\_

Description of Work: \_\_\_\_\_

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

Fall Hazards:

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

Fall Protection Systems: Harness \_\_, Lanyard \_\_, Grab \_\_, Safety Line \_\_, Anchor Point \_\_, Lock Out \_\_, Guard Rails \_\_, Safety Monitor \_\_, Warning Lines \_\_, Horizontal Lifeline \_\_, Control Zone \_\_, Tie-Off to Scaffold Structure \_\_, Other(explain) \_\_\_\_\_

Rescue Procedures:

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

Employee names: (1) \_\_\_\_\_ (4) \_\_\_\_\_  
(2) \_\_\_\_\_ (5) \_\_\_\_\_  
(3) \_\_\_\_\_ (6) \_\_\_\_\_

Additional Comments:

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

FOR DIAGRAM USE SEPARATE PAGE