FALL PROTECTION WORK PLAN

Fall protection is required at 4 feet. This written plan is required at or above 10 feet and be available on site.

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<thead>
<tr>
<th>Location and work conducted</th>
<th>Job site supervisor/competent person</th>
<th>Date</th>
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Notes:

### IDENTIFY FALL HAZARDS

- Bridge decks
- Catwalks
- Connect girders
- Drilling shafts
- Environmental
- Excavations
- Bridge decks
- Forming
- Impalement hazards
- Pouring
- Tower crane
- Tieback strands
- Walkways/ramps
- Welding at height
- Work decks
- Work over water (PFD)

Personal hoisting
- Forklift
- Man lift
- Scissor lift
- Other: 

### DESCRIBE PROTECTION METHOD

**Fall restraint:**
- Type of harness: ____________________________
- Type of lanyard: ____________________________
- Anchorage: _________________________________
- Guard Rails? □ Yes □ No
- Safety monitor system/warning lines? □ Yes □ No
- Safety watch system? □ Yes □ No

Name of trained safety monitor: ____________________________

Name of competent person (per form F417-102-000): ____________________________

**Fall arrest:**
- Type of harness: ____________________________
- Type of lanyard: ____________________________
- Anchorage: _________________________________

Have workers been trained in the Fall Protection Work Plan details? □ Yes □ No

Has all fall protection equipment been inspected prior to use? □ Yes □ No

Emergency response notification procedures reviewed? □ Yes □ No

If a worker is injured, the site supervisor will evaluate the worker’s condition and administer first aid. If the worker’s condition appears serious, the supervisor or other designated person will call 911 or other local emergency number to request assistance.

**Method of post fall rescue/retrieval:** _____ Self-rescue device  Other: ____________________________

**Overhead protection**
- 3½ inch toe boards
- Debris nets
- Hard hats
- Warning signs
- Other (Describe): ____________________________

**Tool handling, storage, and securing**
- Tool belts
- Tool buckets
- Other (Describe): ____________________________
Assembly, disassembly, and maintenance of all equipment will be done according to manufacturer’s recommended procedures. Inspections will be conducted and documented per manufacturer’s specifications of all safety equipment, including before each use. Any defective equipment will be tagged and removed from service.

Prior to being permitted into areas where fall hazards exist, workers will be trained and instructed on this Fall Protection Work Plan, including the items described below:

1. Identify all fall hazards in the job site.
2. Describe/demonstrate the method of fall arrest or fall restraint that will be provided.
3. Describe/demonstrate the correct procedures for the assembly, maintenance, inspection, and disassembly of the fall protection system that will be used.
4. Describe the correct procedures for the handling, storage, and securing of tools and materials.
5. Describe the method of providing overhead protection for people who may be in, or pass through the area below the job site.

The following workers have been trained and instructed on the elements of this Fall Protection Work Plan:

<table>
<thead>
<tr>
<th>Worker name</th>
<th>DOC number if applicable</th>
<th>Signature</th>
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The job site supervisor/competent person’s signature verifies workers listed above have been informed and trained on the elements of this plan and the fall protection systems that will be used.

Name
Signature
Date

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

Distribution: ORIGINAL - Fall Protection Manager  COPY - Competent person, maintain at work site