

Grayson Rural Electric Cooperative Corporation

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Telephone 606-474-5136 • 1-800-562-3532 • Fax 606-474-5862

July 1, 2011

RECEIVED
JUL 05 2011
PUBLIC SERVICE
COMMISSION

Office of General Counsel
Kentucky Public Service Commission
211 Sower Boulevard
Post Office Box 615
Frankfort, Kentucky 40602

Re: Settlement Agreement
Case # 2010-00249

Dear Sir or Madam:

Enclosed you will find copies of the crew safety visits and the monthly safety meetings for the months of April, May, and June 2011 as requested per the settlement agreement. If you should need further information please contact me.

Thanks,



Robert Potter
Manager of Operations

Jv

enclosures

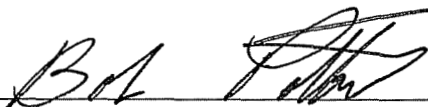
Monthly Safety Report - April
May 06, 2011

There were no lost time accidents to report this month.

The regular Monday morning safety meetings were held by various staff members of Grayson Rural Electric.

- April 04, 2011—Kyle Clevenger, Asst. Manager of Operations, was in charge of the meeting. He read from the Safety Manual 503 Vehicle Operations 503.1—503.5. Carol Ann talked about taking O.T.C. medications and safety. Andrea gave an update on the new IVR phone system.
- April 11, 2011—Don Combs, Mgr. of Finance & Accounting, was in charge of the meeting. His topic was “Onsite Observation”. Nancy gave an update on Hepatitis shots and handed out safety achievement packets. Bob Potter, Manager of Operations, talked about the cleanup in the lot and work being done on the fence around the lot.
- April 18, 2011—Carol A Fraley, President & C.E.O., was in charge of the meeting. She read from the Safety Manual, General Rules 101 Application, through 110 Housekeeping. Julie Lewis had the monthly safety give-a-way. Bob Potter discussed the storm outages over the week end.
- April 25, 2011—Bonita Gearhart, Executive Assistant, was in charge of the meeting. Robert Brown had a slide presentation on Distracted Driving and Defensive Driving. He talked about the 3 types of distraction while driving which were visual, manual, and cognitive. Bob Potter discussed the weekend storm outages.

Bob continues to mention the necessity and importance of hard hats, rubber gloves and the importance of using ground chains. A line is not dead until it is grounded.



Bob Potter, Manager of Operations


Monthly Safety Report - May
June 10, 2011

There were no lost time accidents to report this month.

The regular Monday morning safety meetings were held by various staff members of Grayson Rural Electric.

- May 02, 2011—Andrea McCleese, Technical Services Supervisor, was in charge of the meeting. Andrea started her meeting with the pledge to the flag. She showed and explained the new Special Equipment change form to everyone. She discussed line inspections and also gave an update on the new IVR phone system that was activated on April 1st. Bob Potter, Manager of Operations, handed out certificates for the completion of Advanced Telelink System Training to Andrea McCleese, Brian Poling, Kim Bush, and Peggy Skaggs.
- May 09, 2011—Brian Poling, Mgr. of Technical Services, was in charge of the meeting. Rick Overby from E.K.P.C. attended the meeting. His topic was on Lock Out/Tag Out and the 10 steps of switching. Bob Layman was there to check the fire extinguishers.
- May 18, 2011—Bob Potter, Manager of Operations, was in charge of the meeting. Employees from King's Daughters Medical Center attended for a Health Screening. Screenings included lipid profile, blood pressure, blood sugar, blood oxygen and an EKG. There were also handouts on heart, stroke, and tobacco education.
- May 24, 2011—Priscilla Sparks, Dir. Of Purchasing/Accounts Payable, was in charge of the meeting. She had the monthly safety give-a-way. Mike Blevins, Maintenance Leadman, had a meeting on first aid kits. He discussed how often they needed to be checked and that everyone needs to know how to use them. Bob Potter talked about the good results of the safety achievement and thanked everyone for their help in getting those results. Carol Fraley talked about last week's annual meeting.
- May 31, 2011—Sherry Buckler, General Accounting Supervisor, was in charge of the meeting. She read from the Safety Manual 113: Cellular Telephones & Electronic Wireless Communication Devices. An AT & T representative attended to sign employees up for a discount. Kyle Clevenger warned everyone about the heat and to work safe.

Bob continues to mention the necessity and importance of hard hats, rubber gloves and the importance of using ground chains. A line is not dead until it is grounded.



Bob Potter, Manager of Operations

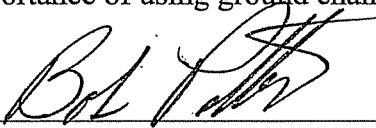
Monthly Safety Report - June
June 29, 2011

There were no lost time accidents to report this month.

The regular Monday morning safety meetings were held by various staff members of Grayson Rural Electric.

- June 08, 2011—Kim Bush, Mgr. of Marketing & Member Services, was in charge of the meeting. Jeff Hohman from E.K.P.C. attended the meeting and showed a video on the Blue Grass Energy substation fire. The fire was caused by a snake and had 4,000 consumers without power. Bob Potter talked about what a good job the men were doing getting their work done in the hot weather. Carol Fraley reminded everyone to be careful during collections.
- June 13, 2011—Kyle Clevenger, Assistant Mgr. of Operations, was in charge of the meeting. Kyle read from the Safety Manual, pages 107 – 110 Vehicle Operations. Bob Potter reported the work order inspection went well and the clean-up had already been completed.
- June 20, 2011—Don Combs, Manager of Finance & Accounting, was in charge of the meeting. His topic was on retirement living and questions to consider when planning your retirement. He handed out a budget worksheet for everyone to fill out. Carol Fraley talked about Relay for Life. She reminded everyone it was wet and to watch about slips, trips, and falls. Bob Potter also reminded everyone to work safe.
- June 29, 2011—Carol Fraley, President & C.E.O., was in charge of the meeting. She gave certificates to Joe Sargent and Scott Speaks for completion of the pipeline emergency response & damage prevention training program. Bill Massey from K.A.E.C. attended for the monthly safety meeting. He read from the Safety Manual and discussed substation training. Linville Spangler from East Kentucky Power attended and had training at the substation. Bob Potter, Manager of Operations, reminded everyone to be careful over the holiday week end. Bradley Cherry had the monthly safety give-a-way.

Bob continues to mention the necessity and importance of hard hats, rubber gloves and the importance of using ground chains. A line is not dead until it is grounded.



Bob Potter, Manager of Operations

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bill Potter

Date: 4-13-11

Position: Supt

Time: 11:00 AM

Company: GRECC

County: Carter

Address: Grayson Ky

Location: Fully 00946601

Phone #: 1-800-562-3535

Crew Members:
Mark Hutchison
Chris Mearns
Robert Brown

Name of Line Crew Observed: Mark Hutchison

Weather Conditions: 58°

Job Description: Pole washed out rem Pole and Hung service & frame on E Pole

Energized Work Being Performed: YES NO: Truck #'s 147 138
 Overhead Underground Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves			<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves			<input checked="" type="checkbox"/>	
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike of <u>GRECC</u>	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present	<input checked="" type="checkbox"/>			

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Mark Tuttle

Inspector's Signature: Bob Feltz

Safety & Loss Coordinator Signature: Bob Feltz

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Pitts Date: 4-13-11
 Position: Supt Time: 12:30 PM
 Company: GRECC County: Castro
 Address: Grayson Ky Location: North Anglen B1
 Phone #: 1-800-562-3532 Crew Members:

Name of Line Crew Observed: Richard
 Weather Conditions: 58°
 ✓ Richard Easton
Scott Specker
D. McArthur
Tom Tross

Job Description: Set Mid Span Pole and service to trailer

Energized Work Being Performed: YES _____ NO: Truck #'s 151
 Overhead Underground _____ Voltage 7200 163

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	✓			
Job procedure covered	✓			
Energy Control procedure	✓			
PPE used	✓			
Job hazards	✓			
Emergency procedures	✓			
Special precautions	✓			
Work Area Protection	✓			
Appropriate Work Signs			✓	
Flagman required			✓	
Flag person used			✓	
Flag person properly equipped			✓	
Traffic cones in place			✓	
Trucks grounded	✓			
Truck chocks used	✓			
Personal protective grounds	✓			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	✓			
Safety gasses	✓			
Rubber gloves	✓			
Rubber sleeves	✓			
FR Clothing	✓			
Fall Protection	✓			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	✓			
Sleeves	✓			
Line hoses			✓	
Blankets			✓	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	✓			
Decals in Place	✓			
Proper Clearance	✓			
Rolling Grounds In Place			✓	
Public Hazards Present	✓			

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: ✓ Richard Easton

Inspector's Signature: Bob Fitts

Safety & Loss Coordinator Signature: Bob Fitts Supt

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: B.A. J. [Signature]
 Position: Supt
 Company: Pike.
 Address: 71/C

Date: 4-11-11
 Time: 11:30 AM
 County: Greene
 Location: Crain Cr.

Phone #: 800-343-7453

Crew Members:

Name of Line Crew Observed:
Bob Evans

[Signature]
Chuck Kelley
Michael Birt
Shane McDaniel

Weather Conditions: Sunny 82°

Job Description: Laying old single phase on 2nd phase line + pulling two phases in

Energized Work Being Performed: YES
 Overhead Underground

NO: 85102 Truck #'s 20-A 48
 Voltage 7200 38H 463

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds			<input checked="" type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	✓			
Safety gasses	✓			
Rubber gloves	✓			
Rubber sleeves	✓			
FR Clothing	✓			
Fall Protection	✓			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	✓			
Sleeves	✓			
Line hoses	✓			
Blankets	✓			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	✓			
Decals in Place	✓			
Proper Clearance	✓			
Rolling Grounds In Place	✓			
Public Hazards Present			✓	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES ✓ NO: _____

Corrective Actions Needed: Yes _____ NO ✓

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Bob G... [Signature]

Inspector's Signature: Bob Fetter [Signature]

Safety & Loss Coordinator Signature: Bob Fetter [Signature]

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Pettit
 Position: Supt
 Company: Pike
 Address: N/A
 Phone #: _____

Date: 4-11-11
 Time: 10:00 AM
 County: Carter
 Location: Leon
 Crew Members: _____

Name of Line Crew Observed: Doug Rogers
 Weather Conditions: cloudy

Doug Rogers
John Pettit
Merlin McHenry
Jason Porter

Job Description: change out H struct to a C1-3 single pole

20-A-75
38-H-441
85-63

Energized Work Being Performed: YES NO: _____
 Overhead Underground _____ Voltage 7200 Truck #'s _____

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds			<input checked="" type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Line hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Blankets	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: *Doug Ryan*

Inspector's Signature: *Bob Potts*

Safety & Loss Coordinator Signature: *Bob Potts Supt.*

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts
 Position: Supt
 Company: Pike
 Address: W.D.
 Phone #: same #

Date: 4-6-11
 Time: 2:00 PM
 County: Carter
 Location: Paradise Hill
Grayson
 Crew Members:

Name of Line Crew Observed:
Jonny Seagraves
 Weather Conditions: 55°
Cloudy

Martin Tice
Jim Bow
Bo Hall

Job Description: Reorg Primary
on three phase line

Energized Work Being Performed: YES NO: _____ Truck #'s _____
 Overhead Underground _____ Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Truck chocks used	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Personal protective grounds			<input checked="" type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	✓			
Safety glasses	✓			
Rubber gloves	✓			
Rubber sleeves	✓			
FR Clothing	✓			
Fall Protection	✓			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	✓			
Sleeves	✓			
Line hoses	✓			
Blankets	✓			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	✓			
Decals in Place	✓			
Proper Clearance	✓			
Rolling Grounds In Place			✓	
Public Hazards Present			✓	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Taylor

Inspector's Signature: Bob Potter

Safety & Loss Coordinator Signature: Bob Potter

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts
 Position: Supt
 Company: Grayson RECC
 Address: 109 Bagby Park
Grayson Ky
 Phone #: 1-800-562-3532

Date: 5-13-11
 Time: 11:00 AM
 County: Carter
 Location: Rt 2 Brushy
 Crew Members: WO# 46394

Name of Line Crew Observed: Mark Hutchison

Mark Hutchison
James Williams
Philip Morris
Robert Brown

Weather Conditions: Cloudy 60.

Job Description: Build New 3 Phase
Line to Rock Crusher

Energized Work Being Performed: YES NO: Truck #'s Same
 Overhead Underground Voltage 7500

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds			<input checked="" type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves			<input checked="" type="checkbox"/>	
Rubber sleeves			<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection			<input checked="" type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves			<input checked="" type="checkbox"/>	
Sleeves			<input checked="" type="checkbox"/>	
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike of GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: *[Signature]*
 Inspector's Signature: *Bob Potter Supt.*
 Safety & Loss Coordinator Signature: *Bob Potter*

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: B. J. Feller
 Position: Supt
 Company: Grayson RECC
 Address: 109 Bagby Park
Grayson Ky
 Phone #: 1-800-562-3532

Date: 5-13-11
 Time: 1:00 pm
 County: Carter
 Location: Wells Br.
 Crew Members:

Name of Line Crew Observed: Richard Easton
 Weather Conditions: Cloudy 60°

Richard Easton
Bryan Kerr
J. Marshall

Job Description: Traning and set pole for dead line

Energized Work Being Performed: YES _____ NO: ✓ Truck #'s same
 Overhead ✓ Underground _____ Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	✓			
Job procedure covered	✓			
Energy Control procedure	✓			
PPE used	✓			
Job hazards	✓			
Emergency procedures	✓			
Special precautions	✓			
Work Area Protection	✓			
Appropriate Work Signs	✓			
Flagman required	✓			
Flag person used	✓			
Flag person properly equipped	✓			
Traffic cones in place	✓			
Trucks grounded	✓			
Truck chocks used	✓			
Personal protective grounds	✓			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety glasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses	<input checked="" type="checkbox"/>			
Blankets	<input checked="" type="checkbox"/>			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pipe or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Richard Easton

Inspector's Signature: Bob Pitts Supt

Safety & Loss Coordinator Signature: Bob Pitts

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Pitts
 Position: Supt
 Company: Pipe
 Address: W/C
 Phone #: _____

Date: 5-17-11
 Time: 8:22 AM
 County: Carter
 Location: Old Pt 7
 Crew Members: Carter co

Name of Line Crew Observed:
Bob Evans

Bob Evans
Michael Burton
Shane McDaniel
Chuck Kelley

Weather Conditions: 50° Cloudy

Job Description: changing out cross arm hot.

Energized Work Being Performed: YES NO: _____
 Overhead Underground _____ Voltage: 7200 Truck #'s 85102
20A48
38H463

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds			<input checked="" type="checkbox"/>	

PPÉ Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses	<input checked="" type="checkbox"/>			
Blankets	<input checked="" type="checkbox"/>			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Rob [Signature]

Inspector's Signature: Bob [Signature]

Safety & Loss Coordinator Signature: Bob [Signature]

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts
 Position: Supt
 Company: Piko
 Address: 7/12
 Phone #: 1-606-255-6075

Date: 5-16-11
 Time: 1:00 pm
 County: Carter
 Location: Rt 2 Bursky
 Crew Members: WO # 46394

Name of Line Crew Observed:
Doug Rogers

Doug Rogers
John Flynn
Jason Poth
Merlin McHenry

Weather Conditions: Cloudy 61°

Job Description: Setting 3 Phase pole on line

Energized Work Being Performed: YES NO: _____ Truck #'s same
 Overhead Underground _____ Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required	<input checked="" type="checkbox"/>			
Flag person used	<input checked="" type="checkbox"/>			
Flag person properly equipped	<input checked="" type="checkbox"/>			
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	✓			
Safety glasses	✓			
Rubber gloves	✓			
Rubber sleeves	✓			
FR Clothing	✓			
Fall Protection	✓			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	✓			
Sleeves	✓			
Line hoses	✓			
Blankets	✓			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	✓			
Decals in Place	✓			
Proper Clearance	✓			
Rolling Grounds In Place			✓	
Public Hazards Present	✓			

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: *Doug Ryan*

Inspector's Signature: *Bob Pella*

Safety & Loss Coordinator Signature: *Bob Pella Supt.*

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts
 Position: Supt
 Company: Pike
 Address: M/K
 Phone #: same

Date: 5-26-11
 Time: 10:00 AM
 County: Elliott
 Location: Rocky Br.
 Crew Members:

Name of Line Crew Observed:
Tony

Tony
DeHalo
Martin Rice
Ray Boice

Weather Conditions: 80° Sunny

Job Description: CHANGING SINGLE
PHASE Pole
46677

Energized Work Being Performed: YES NO:
 Overhead 7000 Underground _____ Voltage 7200 Truck #'s 8N108-2042
38H451

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Line hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Blankets	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Bike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Taylor

Inspector's Signature: BA Potts

Safety & Loss Coordinator Signature: BA Potts Supt.

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bd Jolly
 Position: Supt
 Company: Grayson RECC
 Address: 109 Bagby Park
Grayson Va
 Phone #: 1-800-567-3532

Date: 6-20-11
 Time: 12:00 PM
 County: Greene
 Location: Leatherwood
 Crew Members:

Name of Line Crew Observed: Mark Hutchinson

Mark Jackson
Chris Moore
James Withrow
Don Martin

Weather Conditions: 72°
Cloudy

Job Description: Changed out A4
built a service 35'
Pole to Building WOTF
46764

Energized Work Being Performed: YES NO: Truck #'s 138
 Overhead Underground Voltage 7500 142
146

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required	<input checked="" type="checkbox"/>			
Flag person used	<input checked="" type="checkbox"/>			
Flag person properly equipped	<input checked="" type="checkbox"/>			
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves			<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Mark Hatch

Inspector's Signature: Bob Patten

Safety & Loss Coordinator Signature: Bob Patten

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Allen

Date: 6-13-11

Position: Supt

Time: 11:50 AM

Company: GRECC

County: Elliott Co.

Address: 109- Bagby Park
Grayson, W. Va

Location: Sandy Hook

Phone #: 1-800-562-3532

Crew Members:

Name of Line Crew Observed: Richard Easton

Richard Easton
Donnie Martin
Ben King

Weather Conditions: 80°
Sunny

Job Description: New Tap 1
Pole
WO# 46227
46547

Energized Work Being Performed: YES NO:
Overhead Underground

Truck #'s 135
151
162
Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Job procedure covered	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Energy Control procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
PPE used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Job hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Emergency procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Special precautions	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Work Area Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Truck chocks used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Personal protective grounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves			<input checked="" type="checkbox"/>	
Rubber sleeves			<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection				
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or <u>GRECC</u>	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: _____ *Richard Easton*

Inspector's Signature: _____ *Bob Potter Supt*

Safety & Loss Coordinator Signature: _____ *Bob Potter*
Kyle Clauger

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bd Foltz
 Position: Supt.
 Company: Pike
 Address: Mt.

Date: 6-9-11
 Time: 9:15 AM
 County: Greene
 Location: Crain Ch

Phone #: 740-403-0792

Crew Members:

Name of Line Crew Observed:
Rob Evans

ROBERT EVANS
Michael Burton
Chuck Kelley
Shane McDaniel

Weather Conditions: 80° Sunny

Job Description: Hanging arms
and laying out wire
WFO # 160046433

Energized Work Being Performed: YES
 Overhead Underground

NO: 7200 Voltage
 Truck #'s 85162
20A4T
38H463

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety glasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses	<input checked="" type="checkbox"/>			
Blankets	<input checked="" type="checkbox"/>			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pipe or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance				
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: *Rob [Signature]*

Inspector's Signature: *Bob Fetter Supt*

Safety & Loss Coordinator Signature: *Bob Fetter*

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Fetter
 Position: Supt
 Company: Pike
 Address: M/C
 Phone #: SAME

Date: 6-14-11
 Time: 12:00 PM
 County: CARTER
 Location: RT 1
 Crew Members:

Name of Line Crew Observed:
Doug ROGERS

Doug Rogers
 Jason Porter
 Merlin McHenry
 Lake Flungher

Weather Conditions: 80°
SUNNY

Job Description: Change C-1
Pole

Energized Work Being Performed: YES NO: 3 Truck #'s SAME
 Overhead Underground _____ Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses	<input checked="" type="checkbox"/>			
Blankets	<input checked="" type="checkbox"/>			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Doug Royn

Inspector's Signature: BA Peter

Safety & Loss Coordinator Signature: BA Peter Supt.

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bill Potts
 Position: Supt
 Company: Pike
 Address: 7/8
 Phone #: 255-6015

Date: 6-16-11
 Time: 2:00 pm
 County: Elbert Co
 Location: RT 173
 Crew Members:

Name of Line Crew Observed: Sony Seagames

Tony Jones
Martin Luce
Sam Bann
Doug Hall

Weather Conditions: 81°

Job Description: 46777 changing
out A3-TO A4

Energized Work Being Performed: YES _____ NO: Truck #'s 38-H 451
 Overhead Underground _____ Voltage 7200 8N 108
20742

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required	<input checked="" type="checkbox"/>			
Flag person used	<input checked="" type="checkbox"/>			
Flag person properly equipped	<input checked="" type="checkbox"/>			
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses	<input checked="" type="checkbox"/>			
Blankets	<input checked="" type="checkbox"/>			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Public Hazards Present	<input checked="" type="checkbox"/>			

Notes/Comments: _____

Job Site Findings Discussed with Crew: YES NO: _____

Corrective Actions Needed: Yes _____ NO

If Corrective Actions Taken Explain in Detail: _____

Line Supervisor's Signature: Tony [Signature]

Inspector's Signature: Bob Potter

Safety & Loss Coordinator Signature: Bob Potter Supd.