

November 14, 2008

Mr. Richard W. Bertelson III Staff Attorney Public Service Commission 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602 RECEIVED
NOV 1 4 2008
PUBLIC SERVICE

COMMISSION

Re: Case No. 2008-0069

Dear Mr Bertelson:

Enclosed is a copy of the safety audits performed at Shelby Energy from October 1, 2008 thru October 31, 2008. This is done in accordance with Item 9 of the settlement agreement dated September 29, 2008.

If you have any questions or need further information please feel free to contact me at (502)643-2778 or by e-mail at jason@shelbyenergy.com.

Sincerely,

Jason Ginn

Safety & Loss Control

Coordinator

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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Jaso N GINN	Date: 10-7-08
Position: Safety + loss Control Cool	Time://:00
Company: Shelby Energy	County: Henry
Address: 620 Old Firehvilla Rol	Location: Cane Run Rd
Shelbyville Ky 40045	Name of Contractor Observed:
Phone#: 502-643-2778	Robinson' Tree lo.
Weather Conditions: Sunny Clear	Job Description: Bulldozing 4
90°	Side Cutting ROW
roote to the second of the sec	The second secon

PPL Being Used	Yes	No	. N/A	If NoCorrective Action ੀ aken
Hard hat				
Safety glasses	V			
Fall protection/harness	, ~			
Harness Attached to Boom	V			
Ear Plugs/ Ear Muffs				
Chaps	V			
Gloves				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			V	
Flagman required/used				
Flag person properly equipped	1		V	
Traffic cones in place			V	
Trucks Grounded				٠
Truck Chocks Used			V	
Miscelaneous Observations	Yes/	No «	N/A	If NoCorrective Action Taken
Shelby Energy Decals	V			
In Place			,	
Public Hazards Present			V/	
Gaff Guards on Hooks				

Notes/Comments: (rew Using Dozel to Clear R	OW
and Using Bucket to Cut Sides	o É
ROW	3 .
_ Crew using + wearing all Nacessary Pi	OF to
Crew using + wearing all Nocessary Pi Perform Duties ROW Looks Go	od
Job Site Findings Discussed With Crew: YES NO	v z z
Corrective Actions Needed: Yes No	entre de la companya
If Corrective Actions Taken Explain In Detail:	
	-
	· A. · parametry consistence common control of the
Line Supervisor's Signature: Www Johnson	
Inspector's Signature:	
Safety & Loss Control Coordinator Signature:	





RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Juson Ginn	Date: 10-7-08
Position: Safety + loss Control loca	Time: 1:40
Company: Shelly Energy	County: Trimble
Address: 620 Old Finchville Rd	Location: Abbo H
Stellyville Ky 40065	Name of Contractor Observed:
Phone#: 643-2778	A+ G
Weather Conditions: (loudy 88°	Job Description: Lutting ROW
	From the Ground

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	7/			-
Safety glasses			/	
Fall protection/harness				
Harness Attached to Boom				
Ear Plugs/ Ear Muffs				
Chaps				1) and dependent field () the sequence
Gloves				
Work Area Protection	Yes	No :	NA,	If NoCorrective Action Taken
Appropriate work signs				
Flagman required/used		·		
Flag person properly equipped			1	
Traffic cones in place				
Trucks Grounded				5
Truck Chocks Used				
Miscelaneous Observations	Yes/	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	V			
In Place				
Public Hazards Present				
Gaff Guards on Hooks	7			

Notes/Comments: Crew Cu Hing Sides o	f ROW
Back to Open up POW	
Notes/Comments: Crew Cu Hins Sides o Back to Open up ROW All Ground work Cutting P	PE in USE
Job Site Findings Discussed With Crew: YES N	O
Corrective Actions Needed: Yes No	
If Corrective Actions Taken Explain In Detail:	
	· · · · · · · · · · · · · · · · · · ·
Line Supervisor's Signature: Some Office	
Inspector's Signature:	
Safety & Loss Control Coordinator Signature:	



Inspector: Zason Ginn			Date: 10 - 7 - 08			
/ C L)	/ , /	///	Time: <u>2:30</u>	Carroll		
Position: Sefety +2055	Control	(20/				
			Location:			
Company: Stelly Gner	57		Crew Mem			
Address: 620 Old Finch	nille Rel		M-11	Clark (rew Leader)		
Shelbyville Ky	40065		11:Ke	Clark ((rew Leader		
Address: 620 Old Finch Shelbyville Ky Phone #: 502-643-23	778		n	2 (
			Bensi	150 hannon		
Weather Conditions:	ly 87°		bory	Bohamon Washord		
Job Description: Bilding Tap + Installing U New house	15pan G 16					
New house						
Overhead Underg	ground	v	oltage <u>7</u>	200		
Job Briefing	Yes/	No	N/A	If NoCorrective Action Taken		
Conducted before job & Signe	ed 🗸 /					
Job procedure covered	1//					
Energy control procedure	1					
PPE used	1					
Job hazards						
Emergency procedures	7/					
Special precautions						
Work Area Protection	Yes	No	N/A/	If NoCorrective Action Taken		
Appropriate work signs						
Flagman required						
Flag person used			//			
Flag person properly equippe	ed		//			
Traffic cones in place	,		1/			
Trucks Grounded			1			
Truck Chocks Used	V/					
Devend Protective Crounds						

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	1/			
Safety glasses	V			
Rubber gloves				
Rubber sleeves	/		1	
FR Clothing				
Fall protection				
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves				Dates HII Good on
Sleeves	~			Rubber Goods
Line hoses				
Blankets	سا			

Notes/Comments: Crew Working to Build New Tap Using all Coverup + Ground's on Hot Take off Pole
Crew Preparing to hong Transformer t put UG Wire on Pole when I arrived. Benyi in Bucket / Gory on Pole / Mike doing Ground Work Job Site Findings Discussed With Crew: YES NO
Corrective Actions Needed: Yes No
Line Supervisor's Signature:
Safety & Loss Control Coordinator Signature:

Godd Job





RIGHT OF WAY FIELD INSPECTION FORM

Inspector: DAVID MARTIN	Date: 10-13-08
Position: Reption & MANAGER	Time: 9100 pm
Company: SHAlby ENTRAY	County: 5 HR/by
Address: 620 OID FINCHUILE RD	Location:
SHE / byuill 2, 1/4 , 40003	Name of Contractor Observed:
Phone#: 502 633-4420	A+6
Weather Conditions: Sunwy	Job Description: Lenoun -
	DAK TRRE
Phone#: 502 633-4420	Name of Contractor Observed: A + 6 Job Description: Lemours

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat			\	
Safety glasses	V			
Fall protection/harness	V	1		
Harness Attached to Boom	V			
Ear Plugs/ Ear Muffs				
Chaps				,
Gloves			V	
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			-	
Flagman required/used		-	~	
Flag person properly equipped	7		V	
Traffic cones in place			L-	
Trucks Grounded			V	خ
Truck Chocks Used				
Miscelaneous Observations	Yes	No No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	~			
In Place				
Public Hazards Present			1	
Gaff Guards on Hooks			1	por or other company

Notes/Comments: All PPE IN USE - Good Job
Job Site Findings Discussed With Crew: YES NO
Corrective Actions Needed: Yes No
If Corrective Actions Taken Explain In Detail:
Line Supervisor's Signature: Their Daylos
Inspector's Signature: David Mart
Safety & Loss Control Coordinator Signature:

RIGHT OF WAY FIELD INSPECTION FORM

Inspector: 1 450 N GINN)		Date: <u>//</u>	7-14-08
Position: Safety + Loss Con	tro/ (00/	,	Time:	2:30
Company: Shelby Energy			County:_	Trimble
Address: 620 Old Fine	chville Rd	'	Location:	Wises Landing
Shelbyville Ky 40	5065		Name of	Contractor Observed:
Phone#: 643-2778			A+	<u>6 </u>
Weather Conditions: Walt			Crew Mei	mbers:
			long	
Job Description: 6 Him Re	DW		Eddie	DIXION
			Jua	N Agular
PPE Being Used	Yes /	No	N/A	If NoCorrective Action Taken
Hard hat	1		1	
Safety glasses				
Fall protection/harness	.i/			
Harness Attached to Boom				
Ear Plugs/ Ear Muffs	V			
Chaps				
Gloves				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taker
Appropriate work signs			- /	
Flagman required/used			//	
Flag person properly equipped	d		/	
Traffic cones in place			/	
Trucks Grounded				

Truck Chocks Used

Miscelaneous Observations	Yes/	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	7			
In Place				
		1		
Public Hazards Present				
Gaff Guards on Hooks				
Notes/Comments:				
Weed to	Cho	./k -	Trucks	anytime Stopped
tout of tru	ck			
The second secon			***	
			,	
Job Site Findings Discussed	With Cre	w: YES	s	NO
3				
Corrective Actions Needed:	Yes	No		
				
If Corrective Actions Taken E	volain In	Detail:		
ii concouve Actions raken E	Apiani ni		······································	
		1/		
	^ ^			
Line Comemicants Ciametone	1/4	//6/		
Line Supervisor's Signature:	4			
	h	Λ		
I see I see a	//	_/)_		
Inspector's Signature:				
				
			/ _/	
Safety & Loss Control Coord	inator Sig	jnature:	A-1"	





Inspector: Jasen GINA	<u>ي</u>		Date: / (5	1-20-08
_			Time:	
Position: Sefety + Loss Co.	tro/los		County:_	
•				Issuc Shelby Dr
Company: Shelby Energy	ΥΥ		Crew Men	
	nehville			1// /
Stelbyville Ky	10065		Chipl	Vhee/e/
Phone #: 502 - 643 - 27				_
			Mike	Clark
Weather Conditions: June	y 80°		1	
			cone	5 Crune
		۰	Λ /	Thomas
/ 11	, ,		Dale	Mon 45
Job Description: Setting 1 3 Pale in pr	'N			
30 Tole in PR	isting			
line				
			•	40 th 72
Energized Work Being Prefo	rmed: YE	s_ <u>1/</u>	NO	Truck#'s #9-1/3+ +30
Overhead Underg	round	\	oltage	4.4 KV
			T	
Job Briefing	Yes	No	N/A	If NoCorrective Action Taken
Conducted before job & Signe	d/V			
Job procedure covered	V /			
Energy control procedure	//			
PPE used	1/			
Job hazards	N	<u> </u>		
Emergency procedures				
Special precautions				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs				
Flagman required		~		
Flag person used				
Flag person properly equipped	1 .		1	
Traffic cones in place	//			
Trucks Grounded				
Truck Chocks Used	/	***************************************		
Personal Protective Grounds	-			

PPE Being Used	Yes /	No	N/A	If NoCorrective Action Taken
Hard hat	1/			
Safety glasses				
Rubber gloves	V /			
Rubber sleeves	N			
FR Clothing				
Fall protection				
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves	<i>i</i>			
Sleeves				
Line hoses	7			
Blankets	<i>i</i> /			

Notes/Comments: (rew had 30 line on 1 shot By D.G. of Verified by Mike Clark.
Crew Using all Line hoses Blankets + PPG To Perform Work properly + Safely
Doing Groot Job ON 30 Work
Job Site Findings Discussed With Crew: YES NO
Corrective Actions Needed: Yes No
If Corrective Actions Taken Explain In Detail:
Line Supervisor's Signature:
Inspector's Signature:
Safety & Loss Control Coordinator Signature:



Inspector: <u>David March</u>	N			9:25
Position: OPERATIONS MAN	U DEGR			SHRILD
<u></u>			Location	: Huy 148
Company: SHALBY ENER	2911		Crew Me	
Company: <u>5#&lby Ene</u> Address: <u>620 010F.ndfr</u>	UR NO			
SHALburdla, Ky 40	065		TIN	R Clark
Stalbyvilla, ky 40 Phone #: 502 633-44	20			
			Mik	e Clark
Weather Conditions: <u> </u>	'N Y			
Joh Doscription: Value	- + 46			
Job Description: LONGE TRAPORARY SARV	251705			
IMPORTED SARD	TUR			
	ground	v	oltage	
Job Briefing	Yes	No	N/A	If NoCorrective Action Taken
Conducted before job & Signe				
Job procedure covered	V			
Energy control procedure	V			
PPE used				
Job hazards	V			
Emergency procedures	V			
Special precautions				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			V	
Flagman required			1/	
Flag person used			1	
Flag person properly equippe	d		V	
Traffic cones in place	T		V	
Trucks Grounded				
Truck Chocks Used]	
Personal Protective Grounds	1			

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat				
Safety glasses	V			
Rubber gloves	V			
Rubber sleeves	V			
FR Clothing	V,			-
Fall protection				
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves				
Sleeves				
Line hoses				
Blankets			/	

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: Inspector's Signature: Safety & Loss Control Coordinator Signature:
//-





Position: Manager of S Company: Owen Fiech Address: 805 Huy D7 Owenfor Phone #: 501-563-355 Weather Conditions: Clear	ric N		Time: County:_ Location: Crew Mer	1:15 Am Trimble : 3-16-48 mbers: Wethery Warferd
Job Description: Relocate	 			
Energized Work Being Prefe	ground	v	oltage/	7,2 kv
Job Briefing	Yes	No	N/A	If NoCorrective Action Taker
Conducted before job & Signa	ed 🗸			
Job procedure covered	V			
Energy control procedure	レ			
PPE used	/			
Job hazards	\(\sigma\)			
Emergency procedures				
Special precautions				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taker
Appropriate work signs	V			
Flagman required				
Flag person used			I V	
Flag person properly equippe	ed	1		
Traffic cones in place	1			
Trucks Grounded			V	
Truck Chocks Used	T V			-
Personal Protective Grounds				

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	V			
Safety glasses	V			
Rubber gloves				
Rubber sleeves			1	
FR Clothing	V		_	
Fall protection				
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves	V			
Sleeves	V			
Line hoses	V			
Blankets				

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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: Duk Haw
Inspector's Signature:
Safety & Loss Control Coordinator Signature:



CO-OP CREW FIELD INSPECTION FORM

Position: MANAger of: Company: Over Elect Address: 8205 Huy 12	Shaly inic		Time: 2 County: Location Crew Mer	-28-08 :copm Henry :3-29-19-9/6 mbers: Bohannon
Phone #: 502 - 563-35	48		١,	
Weather Conditions: Clea	x 480		1)1/2	hamas
Job Description: Line E Secondary 4/c				
Energized Work Being Pref Overhead Under				Truck#'s 9, 13
Job Briefing	Yes	No	N/A	If NoCorrective Action Taken
Conducted before job & Signa	ed V			
Job procedure covered	V			
Energy control procedure	V			
PPE used	V			
Job hazards	V			
Emergency procedures	V			
Special precautions				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			V	
Flagman required			1	
Flag person used			V	

Flag person properly equipped

Personal Protective Grounds

Traffic cones in place Trucks Grounded Truck Chocks Used

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	V			
Safety glasses	V			
Rubber gloves	V			
Rubber sleeves	·/			
FR Clothing	i/			
Fall protection				
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves	<u></u>			
Sleeves	V			
Line hoses	V.			
Blankets				

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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: <u>Rig Wheele</u>
Inspector's Signature:
Safety & Loss Control Coordinator Signature: