

July 13, 2009

Mr. Richard W. Bertelson III Staff Attorney Public Service Commission 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602

RECEIVED

JUL 15 2009

PUBLIC SERVICE COMMISSION

Re: Case No. 2008-0069

Dear Mr Bertelson :

Enclosed is a copy of the safety audits performed at Shelby Energy from June 1, 2009 and June 30, 2009. 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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CO-OP CREW FIELD INSPECTION FORM

Inspector: <u>PAUID MARTIN</u>
Position: OPERATIONS MANAGEN
Company: Strelby Exercy, Address: 620 Of Finctivelle D
<u>J#k/by v//k, by 40045</u> Phone #: <u>502 633-9420</u>
Weather Conditions: <u>SUNARY</u>
Job Description: <u>Sagging</u> WIRE
Energized Work Being Preformed: YES
Overhead Underground

10-1-09 Date: Time: County: CARROL RD Location: VANOR

MIKE CLARK

MicHarl NETTHERY

GARY MARFORD

NO \checkmark Truck#'s $t/ \neq l3$

Voltage 7200

Job Briefing	Yes	No	N/A	If NoCorrective Action Taken
Conducted before job & Signe	d 🗸		1	
Job procedure covered	4			
Energy control procedure	5			
PPE used	V			
Job hazards	, W		400	
Emergency procedures	V			
Special precautions	V			
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			V.	
Flagman required				
Flag person used				
Flag person properly equipped	1		V	
Traffic cones in place				
Trucks Grounded				
Truck Chocks Used	V.			
Personal Protective Grounds	V			

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	V			
Safety glasses	V			
Rubber gloves				
Rubber sleeves			V	
FR Clothing	V .			
Fall protection	\checkmark			
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves				
Sleeves				
Line hoses				
Blankets			Y	
Job Site Findings Discussed				NO
If Corrective Actions Taken	Explain In	Detail:		
Line Supervisor's Signature Inspector's Signature:	Jeven	k /l <u>Sa</u> jnature: k	()- the	
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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: DAVID MARTIN Position: prentions Maunson Company: SHE by RAFRAY

Address: 620 OID Fuctiville FD

SHELEGNILLE, Ky 40065 Phone#: 502--633-4420

Weather Conditions: Scarry

Job Description: Dozup R.Ow

Date: 6-1-09

Time: 2:30

County: HENRY Location: M. // CRIERK RD

Name of Contractor Observed:

KODINSON TREE SERVICE

Alun Robusson David Doss Hermendeg Ildo Cruz

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	V			
Safety glasses	V			
Fall protection/harness			1	•
Harness Attached to Boom			-	
Ear Plugs/ Ear Muffs				
Chaps	i			
Gloves				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs				
Flagman required/used				
Flag person properly equippe	d		~	
Traffic cones in place			~	
Trucks Grounded]		~	
Truck Chocks Used	_		V	
		<u>.</u>		

Miscelaneous Observations	Yes	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	V			
In Place	V			
Public Hazards Present			V	
Gaff Guards on Hooks			K	
				
Notes/Comments:		<u> </u>)	
Notes/Comments			a yang barawak dan dari 2 Mart Mangapan da pangang	
·				
			·····	
Job Site Findings Discussed	With Cre	w: YE	s /	NO
			K	
Corrective Actions Needed:	Yes	No	4	
			-	
If Corrective Actions Taken E	- Typlain In	Detail:		

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Line Supervisor's Signature;	Ulin	NA	Alu	10021
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G) _	1	. 1	
Inspector's Signature:	hain	Y Y C	ata	
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Safety & Loss Control Coord	inator Sic	inature:	la	12
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Shelby Energy Cooperative

Your Touchstone Energy® Partner

CONTRACTOR FIELD INSPECTION FORM

Inspector: DAVID MARTIN Position: OPIERATIONS MANAGAR Company: <u>SHRIBY RNERGY</u> Address: <u>620 OID FINCHAULLAKO</u> SHalbyrulla, Ky 40065 Phone #: 502 633-4420 Weather Conditions: SUNNY Job Description: COURRING CONDUCTOR DN TAKE-OFF Jim Buston JAMIR K ERIS POLE - PULLING IN ROPE Energized Work Being Preformed: YES_ Overhead _____ Underground_ Yes Job Briefing Conducted before job & Signed 2 V Job procedure covered V Energy control procedure PPE used V Job hazards V Emergency procedures 7 Special precautions N/A If No--Corrective Action Taken Work Area Protection Yes No 1 Appropriate work signs Flagman required Flag person used \checkmark ~

Flag person properly equipped

Personal Protective Grounds

Traffic cones in place Trucks Grounded Truck Chocks Used

County: HENRY Location: Hwy 202

Name of Contractor Observed:

DAUIS H. RILIOT Crew Members: // plly DAND G. BRADIEN

1	_ NO	iruc	:K#`S
	Voltage	7200	
hin	- I AUA	IS No.	C

s İ	No	N/A	If NoCorrective Action Taken
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PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken		
Hard hat	~					
Safety glasses	V					
Rubber gloves	~					
Rubber sleeves	V					
FR Clothing	V.					
Fall protection	1	·				
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken		
Gloves	V					
Sleeves	~	e.				
Line hoses	V					
Blankets	V					
Miscelaneous Observations	Yes	No	N/A	If NoCorrective Action Taken		
Shelby Energy Decals	V					
In Place						
Proper Clearances	V					
Rolling Grounds in Place	-					
Public Hazards Present						
			-			
Job Site Findings Discussed Corrective Actions Needed: If Corrective Actions Taken I	Yes	No:		NO		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			۳۰٬۰۰۰		
Line Supervisor's Signature	:/AL	lur H	Marin .			
Inspector's Signature:	ava	V Ma	the the	7		
Safety & Loss Control Coordinator Signature:						
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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: DAVID MARTIN Position: DARRATIONS MANAGER Company: SHE/by ENERgy bop. Address: 620 OID Finetter (1/2 KD

SHELBYUILLE, Ky 40065

Phone#: 502 633-4420

Weather Conditions: <u>Suny</u>

Date: 6-9-09 Time: 2:00 P.M

County: TRIMB/R

Location: Preks P. Kr + 421N

Name of Contractor Observed:

A+G TREE SERVICE

Tony Clark Roume Obanion

Job Description: <u>CHapping</u> Limps

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	V			
Safety glasses	~			
Fall protection/harness				•
Harness Attached to Boom			V	
Ear Plugs/ Ear Muffs				
Chaps				
Gloves	~			
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			~	
Flagman required/used			V	
Flag person properly equipped	d		V	
Traffic cones in place			V	
Trucks Grounded			V	
Truck Chocks Used	V			
	·			

Miscelaneous Observations	Yes	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	V			
In Place				
Public Hazards Present	·····		<u> </u>	
Gaff Guards on Hooks				
	·····			
Notes/Comments:		<u> </u>		
Job Site Findings Discussed	MPD A.		. /	NA
Job Site Findings Discussed	with Cre	W: YE	<u>s_/</u>	NO
	Maa	61	/	
Corrective Actions Needed:	Yes	NO	$\underline{\nu}$	
If Corrective Actions Taken E	Succession for	Patalle	Phere	The Maria
AU PPRENU	ce A	<i></i>		
<u>MUIKLNU</u>	<u>sz. L</u>	KRW W	och ing	SHALLY
*****			. /	
Line Supervisor's Signature:	N -			
Line Supervisor's Signature:	1	VU (
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Inspector's Signature:	Laur		<u> a</u>	h
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Safety & Loss Control Coord	inator Sig	nature.	100m	1 Junior
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CO-OP CREW FIELD INSPECTION FORM

	Inspector: <u>Bill Mass</u> Position: <u>Safety Testre</u> Company: <u>FAEC</u>			Time:_// County:_	-/ <u>(</u> -09
	Address:			OTEW MC	
		and a state of the		Mike	Clark
	Phone #: 502 523 54	107		O	Bohannon
	Weather Conditions: Rain			Loui	1Sobannon
	weather Conditions: <u>ITQ.()</u>	4		F	= Mike
		***			Thomas
Sec.	Job Description: <u>Terminating</u> Ung <u>Cable</u> Energized Work Being Prefo Overhead Underg	p. Priman 	S	NO_/	 Truck#'s_ <u># //</u> #13 7200
	Job Briefing	Yes	No	N/A	If NoCorrective Action Taken
	Conducted before job & Signe	£			****
	Job procedure covered				
	Energy control procedure		1999-1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1		
	PPE used	1			
	Job hazards				
	Emergency procedures	V.		1	
	Special precautions	V			
	Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
	Appropriate work signs			K	
	Flagman required			1	
	Flag person used			V	
	Flag person properly equipped	d		V	
	Traffic cones in place			V	
	Trucks Grounded			1	
	Truck Chocks Used				
	Personal Protective Grounds			V	

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	V			
Safety glasses	V			
Rubber gloves			V	
Rubber sleeves			K	
FR Clothing	V			
Fall protection			V	
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves			~	
Sleeves			1	
Line hoses			V	
Blankets			V	
Job Site Findings Discusse Corrective Actions Needed:	d With Cre Yes	w: YEs No <u>ب</u>	<u>8_/</u>	NO
Line Supervisor's Signature Inspector's Signature:	:_///	0 fl arrey	Co	
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CO-OP CREW FIELD INSPECTION FORM

Inspector: DAVID M	PRTIN		Date:	0-17-09
			Time:	10:25
Position: OPARATIONS	MANPACK	2	County:	SHELDY
			Location	SHELDY WEDD RD
Company: <u>5HE/by ENE</u> Address: <u>620 010 Fin</u>	RAV		Crew Me	
Address: 1020 BID Fu	WHUNTE RE	2		
SHR burylle Ky 2	40065		Rick	5 CRUMR
SHR / by ville, Ky 2 Phone #: 302 - 635-444			****	
633 - 44	120		JAME	K CRUME
Weather Conditions:				272
	Manual 2011 - 201			
Job Description: Pull. N	قين ا			
Job Description: Pulling UNDERGROUND SER				
UNORKYKOUND SRIC	VICk			
Overhead Under			oltage _/'	
Job Briefing	Yes	No	N/A	If NoCorrective Action Taken
Conducted before job & Signe	ed 🗸			
Job procedure covered				
Energy control procedure				
PPE used	V			
Job hazards	V.			
Emergency procedures				,
Special precautions				· · · · · · · · · · · · · · · · · · ·
				· · · · · · · · · · · · · · · · · · ·
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs Flagman required	Yes	No	~	If NoCorrective Action Taken
Appropriate work signs Flagman required Flag person used		No	~	If NoCorrective Action Taken
Appropriate work signs Flagman required Flag person used Flag person properly equippe		No	~	If NoCorrective Action Taken
Appropriate work signs Flagman required Flag person used Flag person properly equippe Traffic cones in place		No	~	If NoCorrective Action Taken
Appropriate work signs Flagman required Flag person used Flag person properly equippe		No	~	If NoCorrective Action Taken

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	/		1	
Safety glasses	V		1	
Rubber gloves	V			
Rubber sleeves	V			
FR Clothing	~		1	
Fall protection	\checkmark			
Rubber Goods Inspections	Yes	No	N/A	If NoCorrective Action Taken
Gloves	\checkmark			
Sleeves	\checkmark			
Line hoses	V			
Blankets				
Job Site Findings Discussed Corrective Actions Needed: If Corrective Actions Taken	Yes	No		NO
Line Supervisor's Signature Inspector's Signature:	avil	1 Sta Mar inature:	w top	

Shelby Energy Cooperative

RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Jeson Ginn Position: Scheh Hoss Confrol Cool Company: A Sheby Energy Address: 620 Old Finchville Rol Shelby ville Ky 40065

Phone#: 502-643-2778

Weather Conditions: (loudy 75"

Job Description Lutting ROW with Bucket Truck +

Date: 6-30-09

Time:___/0 : 5 0

County: Trimble Location: 421 N

Name of Contractor Observed:

Tomy Clark

Ronnie Obenow

Darrin Adams Chipping Brus PPE Being Used If No--Corrective Action Taken Yes No N/A Hard hat Safety glasses Fall protection/harness V Harness Attached to Boom Ear Plugs/ Ear Muffs Chaps Gloves If No--Corrective Action Taken Work Area Protection Yes N/A No Appropriate work signs Flagman required/used 1 Flag person properly equipped V Traffic cones in place Trucks Grounded 1 Truck Chocks Used \checkmark

Miscelaneous Observations	YAC /	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	Yes			
In Place				
Public Hazards Present				
Gaff Guards on Hooks				
Notes/Comments:				
Crew doing exc	elben	4 Jo	b we	" safety Rules
Safety Equipment	4	10/10wj	ng cel	Safety Kules
			1 -===	
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Job Site Findings Discussed V	With Cre	w: YES		NO
				a a second and a second and a second a
Corrective Actions Needed:	Yes	No	L	
If Corrective Actions Taken Ex	olain In	Detail:		

	A.			
Line Supervisor's Signature:	Nad	M		
Line Supervisor's Signature:	Vagl	M		
Line Supervisor's Signature:	Val	<u>M</u>		
	Val	U S		
Line Supervisor's Signature:	Val	U S		Δ
	Val	U S	· · · · ·	
Inspector's Signature:		M A		
		nature:		
Inspector's Signature:		J. J.		<u> </u>

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Date: June 16, 2009

Company Involved: A & G Tree Service

Employees Involved: Chris Douglas (foreman)

Robert Pevley

- <u>Violation</u>: Robert Pevley was working from a bucket truck cutting ROW and was found to not be wearing any fall restraint.
- Actions Taken: Crew was sent home for the rest of the day without pay due to our concern for this type of violation. Their company was notified of the situation and the fact that the violation and our actions that were taken.
- **Notes**: It is the first time this crew has had a violation of this nature. The employee in violation has only worked with us for a short time and was explained that if found in this violation again he would be terminated of his employment with Shelby Energy Cooperative.

Operations manager

Safety & Loss Control Coordinator

6-16-09

Date

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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Bill Massey Position: Safety Instructor company: Ky Assoc. of Electric Coops Address: Louisville

Date: 6-16-09

Time: 9:00 am

County: Shelby

Location: Cooper LN

Name of Contractor Observed:

Phone#: 5702 523.5407

Weather Conditions: Cloudy

Job Description: Trimming Trees

Crew Members:

A+G

Chris Douglas Robert Peuley

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	. K		• .	
Safety glasses	L.			
Fall protection/harness		V		See Attached Letter
Harness Attached to Boom		V		For Actions Taken
Ear Plugs/ Ear Muffs			V	
Chaps .			V	
Gloves	×			
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs			V	
Flagman required/used			V	
Flag person properly equipped			V	
Traffic cones in place			V	
Trucks Grounded			.V-	
Truck Chocks Used	K			۲
			<u>.</u>	

Shelby Energy Decals	Yes	No	N/A	If NoCorrective Action Taken
		V		Issued New Signs
In Place		V		
Public Hazards Present	·····			
Gaff Guards on Hooks				
Gan Guards on Hooks			-k	
Notes/Comments:		1		

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Job Site Findings Discussed	With Cre	w: YES	V	NO
Corrective Actions Needed:	Vac /	No		
Collective Actions meeded.	res_/_	NO		
		.	1	0 1 4
If Corrective Actions Taken E	xplain In	Detail:	lan	in Bustiet
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If Corrective Actions Taken E		·	-	in Bucket
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David Martin Operations Manager Shelby Energy Cooperative Inc.



Mr. Anderson,

I am writing this letter due to the concern of some safety issues that have occurred in the past 6 months. This crew has been written up for safety glasses and wheel chocks not in use. On most inspections they have been using all PPE and working safely. The crew does a good job and we wish to continue their service, but we would like some reinforcement from you to insure they continue to work in a safe manner. Thanks for your cooperation and we appreciate the fine service you provide for us.

Thanks David Martin

boyle up Atto called the 2228 Cell# 270-230-





Shelby Energy Cooperative

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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Jason Ginn Position: Sefety + Loss Control Coor Company: Shelly Energy Address: 620 Old Finety Ille Shelly ville Ky 40065 Phone#: 502-643-2778

Weather Conditions: Cold Cloudy

250

Job Description: Cu Hing

Undergrowth

Date: 12-11-08 Time:_ 9:25

County: Carroll Location: Kinss Ridse

Name of Contractor Observed:

Ronnie Obaniou Jumegel (Juire Churlie Webster

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	. 1		×	¢
Safety glasses	1			passed out glasses
Fall protection/harness	•	•		
Hamess Attached to Boom				
Ear Plugs/ Ear Muffs				·
Chaps	V			
Gloves				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs				
Flagman required/used			V,	
Flag person properly equippe	d			-
Traffic cones in place	V			
Trucks Grounded				
Truck Chocks Used				1

Miscelaneous Observations	Yes	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	-103			
In Place	÷-			
Public Hazards Present			1	
Gaff Guards on Hooks	/			
Notes/Comments:	·······		1	
Passed Out	New	(lear	- Se	forty Classes to
Gll Workers				
	****			,
Job Site Findings Discussed	With Crev	N: YES		NO
Corrective Actions Needed:	Van	No ^L		
Corrective Actions needed:	1es	NO		
If Corrective Actions Taken E	Explain In	Detail:		
	•			
	an a			
			c	
Line Supervisor's Signature:	P	r	۲ ا_	
Line Supervisor's Signature:	1 cm	<u>ar Qú</u>	CENEDE	2
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Inchastor's Signatura	\mathcal{H}	15		
Inspector's Signature	105			<u>_</u>
			/	
Safety & Loss Control Coord	linator Sig	nature:	1_	12
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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: JONY Dempsey Position: MANAger of Safety Company: Owen Electric Address: Po Bor 400

Quenton, Ky 40359

Phone#: 502-563-35-18

Weather Conditions: Clear 50°

Job Description: Trimming out

Service

Date: 1) - 29 - 08

Time: 1:15 pm

County: Trimble

Location:_____

Name of Contractor Observed:

ALC: Tree

JUAN Aguilare Eddie Didor Tony Clark

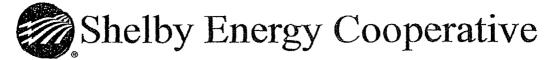
PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat	. South			
Safety glasses	1		ан. С	· · · · · · · · · · · · · · · · · · ·
Fall protection/harness		•		
Harness Attached to Boom				
Ear Plugs/ Ear Muffs				· · ·
Chaps			V	
Gloves				
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs				
Flagman required/used				
Flag person properly equipped	d			
Traffic cones in place				
Trucks Grounded				
Truck Chocks Used				INformed Crew to chack

Miscelaneous Observations	Yes	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals				
In Place			ļ	
Public Hazards Present				· ·
Gaff Guards on Hooks				
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			1	
Notes/Comments:				
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Job Site Findings Discussed	With Crev	w: YES		NO
Corrective Actions Needed:	Yes	No		
If Compative Actions Taken E	valain In	Dotaile		
If Corrective Actions Taken Ex				
explainent Need when partied	fort	ruch	to be	e chacked
	A			
when parked	(
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		111		、
Line Supervisor's Signature:		UL		
Life Supervisor's Signature				
	/ (
Inspector's Signature:	ansul	Ann	Der	
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Safety & Loss Control Coordi	inator Sig	nature:		<u> </u>
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RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Bill Massey Position: Safety Instructor

Company: <u>FIAE</u>

Address: Louisville

Date: 5-19-89

Time: 1: 30 pm

County: Trimble Location: North Ridge

Name of Contractor Observed:

Phone#:

Weather Conditions: Scenny

Crew Members:

Atc

Ronnie Obernon

Job Description: The Trimming

PPE Being Used	Yes	No	N/A	If NoCorrective Action Taken
Hard hat				
Safety glasses		V	u.	Explained need for eye pro-
Fall protection/harness		·	V	
Hamess Attached to Boom			\vee	
Ear Plugs/ Ear Muffs	Ŧ	\downarrow		Discussed Safety
Chaps		V		Issue
Gloves	V			
Work Area Protection	Yes	No	N/A	If NoCorrective Action Taken
Appropriate work signs	,		K	
Flagman required/used			1	
Flag person properly equippe	ed		V	-
Traffic cones in place		-		ŕ
Trucks Grounded				
Truck Chocks Used				Explained Importance
				Explained Importance of true & chock

Miscelaneous Observations	Yes	No	N/A	If NoCorrective Action Taken
Shelby Energy Decals	V			· · · · · · · · · · · · · · · · · · ·
In Place				
Public Hazards Present			V	
Gaff Guards on Hooks			K	
Notes/Comments:	· · · · · · · · · · · · · · · · · · ·			I

- Crew needs to wear chaps
when autting on the ground.
Need Satoly glasses.
Truck needs to be chocked
Job Site Findings Discussed With Crew: YES NO
Corrective Actions Needed: Yes No
If Corrective Actions Taken Explain In Detail:
·
Line Supervisor's Signature: forme Officia
Inspector's Signature:
Safety & Loss Control Coordinator Signature: