



Shelby Energy
Cooperative, Inc.

Your Touchstone Energy® Partner 

October 14, 2008

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

RECEIVED
OCT 20 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 September 1, 2008 and September 30, 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



Shelby Energy Cooperative

Your Touchstone Energy* Partner 

RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Jason Ginn

Date: 9-14-08

Position: Safety & Loss Control Coord

Time: 5:00 pm

Company: Shelby Energy

County: Trimble

Address: 620 Old Finchville Rd
Shelbyville Rd 40065

Location: Milton Bedford Pike

Phone#: 502-643-2778

Name of Contractor Observed:

A+G Tony & Ronnie

Weather Conditions: Clear 90

Job Description: Cutting Tree off
3" during storm

PPE Being Used	Yes	No	N/A	If No--Corrective Action Taken
Hard hat	✓			
Safety glasses	✓			
Fall protection/harness			✓	
Harness Attached to Boom			✓	
Ear Plugs/ Ear Muffs	✓			
Chaps	✓			
Gloves	✓			
Work Area Protection	Yes	No	N/A	If No--Corrective Action Taken
Appropriate work signs			✓	
Flagman required/used			✓	
Flag person properly equipped			✓	
Traffic cones in place	✓			
Trucks Grounded			✓	
Truck Chocks Used	✓			
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals	✓			
In Place		✓		
Public Hazards Present	✓	✓		
Gaff Guards on Hooks	✓			

Notes/Comments: Crew Did Safe Job Removing
Tree off 3Ø Line

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: [Signature]

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner 

RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Jason Gimm

Date: 9-15-08 thru 9-18-08

Position: Safety & Loss Control Coord

Time: All Day

Company: Shelby Energy

County: Trimble

Address: 620 Old Finchville Rd
Shelbyville Ky 40065

Location: _____

Phone#: 502-643-2778

Name of Contractor Observed:

A+G Tree Serv (Chris Douglas)

Weather Conditions: Sunny 85°

Job Description: Cutting ROW to
Help in Storm Restoration

PPE Being Used	Yes	No	N/A	If No--Corrective Action Taken
Hard hat	✓			
Safety glasses	✓			
Fall protection/harness	✗		✓	
Harness Attached to Boom			✓	
Ear Plugs/ Ear Muffs	✓			
Chaps	✓			
Gloves	✓			
Work Area Protection	Yes	No	N/A	If No--Corrective Action Taken
Appropriate work signs			✓	
Flagman required/used			✓	
Flag person properly equipped			✓	
Traffic cones in place			✓	
Trucks Grounded			✓	
Truck Chocks Used			✓	
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place	✓			
Public Hazards Present		✓		
Gaff Guards on Hooks	✓			

Notes/Comments: Chris + Crew Worked with me during
Outage Restoration for 4 days with not
1 single rule violation.
Great Job Crew

Job Site Findings Discussed With Crew: YES NO

Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

Line Supervisor's Signature: Chris Dwyer

Inspector's Signature: [Signature]

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CO-OP CREW FIELD INSPECTION FORM

Inspector: JASON GINN

Date: 9-22-08

Position: Safety + Loss Control Coord

Time: 2:30

County: Trimble

Company: Shelby Energy
Address: 620 Old Finchville Rd
Shelbyville Ky 40065
Phone #: 502-643-2778

Location: _____

Crew Members:

Chip Wheeler

Dale Thomas

James Crum

Weather Conditions: Sunny
Clear 88°

Job Description: Building 2
Span top off Back side
of 30 Dead end Bank
pole

Energized Work Being Performed: YES NO Truck#'s 9+13

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	Yes	No	N/A	If No--Corrective Action Taken
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			✓	

Notes/Comments: When I arrived crew had completed construction of new Tap. They were in the process of removing grounds + re-energizing 3Ø Bank and New Tap.

All PPE Used + Good Work Procedures Being followed

Job Site Findings Discussed With Crew: YES NO

Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

Line Supervisor's Signature: Chris Wheeler

Inspector's Signature: [Signature]

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CO-OP CREW FIELD INSPECTION FORM

Inspector: DAVID MARTIN

Date: 9-23-08

Position: OPERATIONS MANAGER

Time: 10:30

County: TRIMBIA

Company: SHELBY ENERGY

Location: BEDFORD SUBSTATION

Address: 620 OLD FINEVILLE RD

SHARBYVILLE KY

Crew Members:

Phone #: (502) 633-4420

RICK SHAW

Weather Conditions: SUNNY

MICHAEL NETHERY

GARY WARFORD

Job Description: REMOVING

PP GROUNDS + RECONNECTING

FEDERS TO NEW REBUILT

SUBSTATION

BENTON BETHANNON

TIM WOLPERT

Energized Work Being Performed: YES

NO

Truck#s 22 + 33

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	Yes	No	N/A	If No--Corrective Action Taken
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			✓	

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: Rick Shaw

Inspector's Signature: [Signature]

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner 

RIGHT OF WAY FIELD INSPECTION FORM

Inspector: DAVID MARTIN

Date: 9-25-08

Position: OPERATION MANAGER

Time: 11:00

Company: Shelby Energy

County: Trimble

Address: 620 OLD FINCHVILLE R

Location: _____

Phone#: _____

Name of Contractor Observed:

ATG

Weather Conditions: Clear 85°

Job Description: Cutting Cross

Country

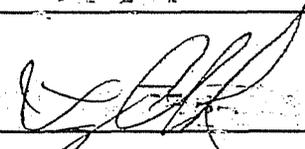
PPE Being Used	Yes	No	N/A	If No--Corrective Action Taken
Hard hat	✓			
Safety glasses	✓			
Fall protection/harness			✓	
Harness Attached to Boom			✓	
Ear Plugs/ Ear Muffs	✓			
Chaps	✓			
Gloves	✓			
Work Area Protection	Yes	No	N/A	If No--Corrective Action Taken
Appropriate work signs	✓			
Flagman required/used			✓	
Flag person properly equipped			✓	
Traffic cones in place			✓	
Trucks Grounded			✓	
Truck Chocks Used	✓			
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place	✓			
Public Hazards Present		✓		
Gaff Guards on Hooks			✓	

Notes/Comments: _____

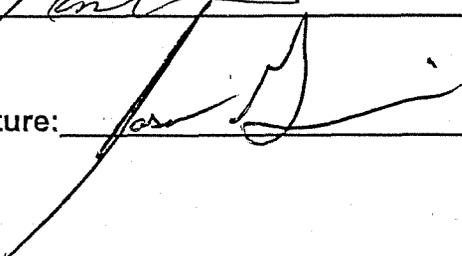
Job Site Findings Discussed With Crew: YES NO

Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

Line Supervisor's Signature:  _____

Inspector's Signature:  _____

Safety & Loss Control Coordinator Signature:  _____



Shelby Energy Cooperative

Your Touchstone Energy® Partner 

CO-OP CREW FIELD INSPECTION FORM

Inspector: Tony Dempsey

Date: 9-26-08

Position: MANAGER of Safety

Time: 10:50 AM

County: Shelby

Company: Owen Electric

Location: _____

Address: 8205 Hwy 127 N

Crew Members:

Owenton, KY 40359

Mike Nethury

Phone #: 502-563-3548

Benji Bohannon

Weather Conditions: Clear 75°

Job Description: Relocate

A-S, overhead service
to underground

Energized Work Being Performed: YES _____ NO Truck#s 11, 22

Overhead Underground _____ Voltage 7.2 KV

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	Yes	No	N/A	If No--Corrective Action Taken
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	✓			

Notes/Comments: check ~~dates~~ dates on FA Kit Items
regularly.

Job Site Findings Discussed With Crew: YES NO

Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

Line Supervisor's Signature: Pat Shaw

Inspector's Signature: Joseph Dempsey

Safety & Loss Control Coordinator Signature: Jan D...



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CO-OP CREW FIELD INSPECTION FORM

Inspector: Tony Dempsey

Date: 9-26-08

Position: MANAGER of Safety

Time: 2:10 pm

County: Trimble

Company: Owen Electric

Location: Hwy 42

Crew Members:

Address: 8205 Hwy 127N

NONE

Owenton, Ky 40359

Phone #: 502-563-3548

Weather Conditions: Ptly Cloudy
80°

Job Description: Cut Tree
off meter pole.

1 MAN Job.

Energized Work Being Performed: YES _____ NO Truck#'s 33

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	Yes	No	N/A	If No--Corrective Action Taken
Appropriate work signs				
Flagman required				
Flag person used				
Flag person properly equipped				
Traffic cones in place				
Trucks Grounded				
Truck Chocks Used		<input checked="" type="checkbox"/>		
Personal Protective Grounds				

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	✓			

Notes/Comments: wheel chocks not in use.

Job Site Findings Discussed With Crew: YES NO

Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

LINEMAN
~~Line Supervisor's~~ Signature: [Signature]

Inspector's Signature: [Signature]

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CO-OP CREW FIELD INSPECTION FORM

Inspector: Tony Dempsey

Date: 9-26-08

Position: Manager of Safety

Time: 2:35pm

County: Franklin

Company: Owen Electric

Location: Tandywood Dr.

Address: 8205 Hwy 127N

Crew Members:

Owenton, Ky 40359

Dale Thomas

Phone #: 502-563-3548

James Crane

Weather Conditions: Partly Cloudy
80°

Job Description: Remove Service
and pole

Energized Work Being Performed: YES NO Truck#s 13,

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	Yes	No	N/A	If No--Corrective Action Taken
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	✓			

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: Cheryl Kulla

Inspector's Signature: James D. [Signature]

Safety & Loss Control Coordinator Signature: [Signature]