




Shelby Energy
Cooperative, Inc.

Your Touchstone Energy® Partner 

August 12, 2009

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

RECEIVED

AUG 14 2009

PUBLIC SERVICE
COMMISSION

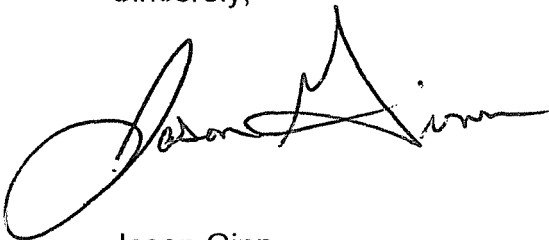
Re: Case No. 2008-0069

Dear Mr Bertelson :

Enclosed is a copy of the safety audits performed at Shelby Energy from July 1, 2009 and July 31, 2009. This is done in accordance with Item 9 of the settlement agreement dated September 29, 2008.

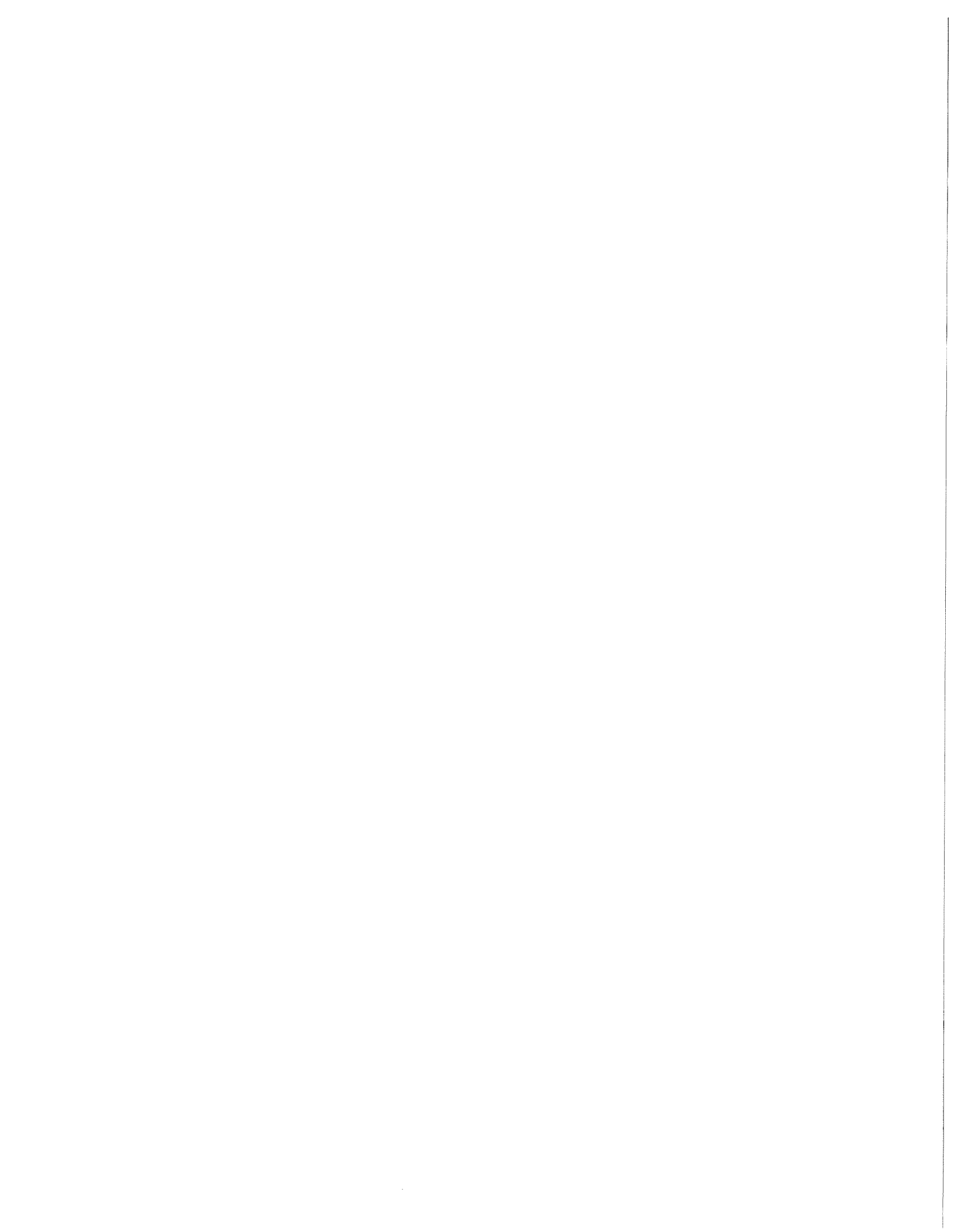
If you have any questions or need further information please feel free to contact me at (502)643-2778 or by e-mail at jason@shelbyenergy.com.

Sincerely,



Jason Ginn

Safety & Loss Control
Coordinator





Shelby Energy Cooperative

Your Touchstone Energy® Partner



RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Jason Ginn

Date: 7-7-09

Position: Safety & Loss Ctrl

Time: 11:00

Company: Shelby Energy

County: Shelby

Address: 620 Old Finchville Rd

Location: Hunters Ln

Shelbyville Ky 40065

Name of Contractor Observed:

Phone#: 502-643-2778

A+G

Weather Conditions: Clear Sunny 85°

Crew Members:

Chris Douglas

Job Description: Groundcutting

Robert Peavey

Row in 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: _____

Discussed w/ Crew Past Issues with Safety
 Crew understood How important safety is. They
 were all ~~using~~ wearing the appropriate PPE

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 Deyle

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 Ginn

Date: 7-7-09

Position: Safety & Loss Control

Time: 2:00

Company: Shelby Energy

County: Trimble

Address: 620 Old Fireville Rd
Shelbyville Ky 40065

Location: 421 N

Phone#: 502-643-2778

Name of Contractor Observed:

A+G

Weather Conditions: Sunny 88°

Crew Members:

Tony

Ronnie

Job Description: Cutting Row
from Ground & Chipping
Brush

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	<input checked="" type="checkbox"/>			
Public Hazards Present			<input checked="" type="checkbox"/>	
Gaff Guards on Hooks			<input checked="" type="checkbox"/>	

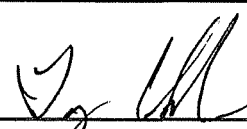
Notes/Comments: _____

Discussed Safety with Crew and Past
 Safety Issues. Everyone was wearing all
 Necessary PPE & Working Safe

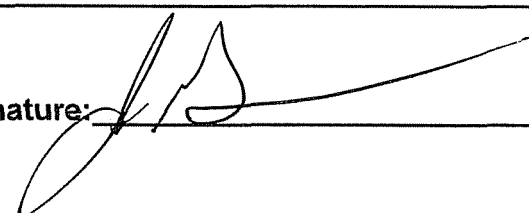
Job Site Findings Discussed With Crew: YES NO _____

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



CONTRACTOR FIELD INSPECTION FORM

Inspector: Jason Ginn

Date: 7-7-09

Position: Safety & Loss Control

Time: 3:35 to 5:00

County: Trimble

Company: Shelby Energy

Location: Ginn Creek

Crew Members:

Address: 620 Old Finch Rd

Josh Lakes

Shelbyville Ky 40065

Brian Bingham

Phone #: 502-643-2778

Chad

Weather Conditions: Sunny 85°

Scott

Job Description: Setting Pole
on hillside by hand

Energized Work Being Performed: YES NO Truck#s 2044 3535 1058

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	✓			
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place	✓			
Proper Clearances	✓			
Rolling Grounds in Place			✓	
Public Hazards Present			✓	

Notes/Comments: Crew Dug Hole By Hand & set Pole
on Hillside A-2 - change out

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



CONTRACTOR FIELD INSPECTION FORM

Inspector: DAVID MARTIN

Date: ~~7-27-09~~ 7-27-09

Position: OPERATIONS MANAGER

Time: 2:00 P.M.

County: HENRY

Company: Shelby Energy
Address: 620 OLD FINEVILLE RD
Shelbyville, Ky 40065
Phone #: _____

Location: Hwy 202

Crew Members:

Weather Conditions: SUNNY

Wally Shouse

JIM BURTON

~~Philip Biddle~~ Philip Biddle

Job Description: Pulling in
Rope

JOHN ACRES

BRAD DARNELL

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	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			✓	
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place	✓			
Proper Clearances	✓			
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: [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: DAVID MARTIN

Date: 7-9-09

Position: OPERATIONS MANAGER

Time: 2:30 P.M.

County: TRIMBLE

Location: 421 + MARTINI LN

Company: Shelby Energy

Crew Members:

Address: 620 OLD FINCHVILLE RD
SHELBYVILLE, KY 40065

MIKE CLARK

Phone #: _____

DALE THOMAS

Weather Conditions: CLOUDY

NEIL RAIZOR

BENTON BOLTANNEN

Job Description: REPLACING
JUMPERS ON AIR BREAK
SWITCH

Energized Work Being Performed: YES NO Truck#s 13

Overhead Underground Voltage 700

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"/>	

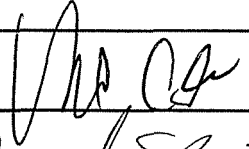
PPE Being Used	Yes	No	N/A	If No--Corrective Action Taken
Hard hat	✓			
Safety glasses	✓			
Rubber gloves	✓			
Rubber sleeves	✓			
FR Clothing	✓			
Fall protection	✓			
Rubber Goods Inspections	Yes	No	N/A	If No--Corrective Action Taken
Gloves	✓			
Sleeves	✓			
Line hoses			✓	
Blankets			✓	

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: 

Inspector's Signature: 

Safety & Loss Control Coordinator Signature: 



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CONTRACTOR FIELD INSPECTION FORM

Inspector: Jason Ginn

Date: 9-14-09

Position: Safety & Loss Control

Time: 7:00 PM

County: Henry

Company: Shelby Energy

Location: 421 N

Crew Members:

Address: 620 Old Finchville
Shelbyville Ky 40065

Jim Burton

Phone #: 502-643-2778

Phillip Biddle

Weather Conditions: Sunny 78°

John Adams

Brad Darnell

Job Description: Changing G-1
out in Cross Country

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	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	✓			
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place	✓			
Proper Clearances	✓			
Rolling Grounds in Place			✓	
Public Hazards Present			✓	

Notes/Comments: Crew Working Doing a great 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: [Signature]

Inspector's Signature: [Signature]

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CONTRACTOR FIELD INSPECTION FORM

Inspector: ROBERT THORNTON

Date: 9-15-09

Position: SAFETY COORD.

Time: 10:10

County: Henry

Company: NOLIN BECC

Location: Radcliff Rd

Address: 411 RING RD

Crew Members:

ELIZABETHTOWN KY 42701

Josh Lakes

Phone #: 270-763-7438

Brian Bingham

Weather Conditions: CLOUDY

Chad

Scott

Job Description: 1 POLE TAP (AS)

SERVICES

Energized Work Being Performed: YES _____ NO Truck#'s 2044
3535

Overhead Underground _____ Voltage _____

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			✓	
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place		✓		
Proper Clearances			✓	
Rolling Grounds in Place			✓	
Public Hazards Present		✓		

Notes/Comments: CREW FRAMED A-5. DUG HOLE & ANCHOR. ALL PPE WAS USED. GOOD COMMUNICATION. JOSH DID GOOD JOB w/ JOB BRIEFING. NO ISSUES.

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: Robert Charles 7.15.09

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CO-OP CREW FIELD INSPECTION FORM

Inspector: Bill Massey

Date: 7-23-09

Position: Safety Instructor

Time: 11:00 am

County: Trimble

Company: KAEFC

Location: _____

Address: _____

Crew Members: Mike Clark
Dale Thomas

Louisville, KY

Phone #: 502.523.5407

Weather Conditions: Cloudy

Tim Wolpert

James Crume

Benji Bohannon

Job Description: 3 span
primary tap

Moved transformer

Energized Work Being Performed: YES NO _____ Truck#'s 11422

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: Job done safely.
Lines covered.
Trucks & Tools in good condition

Job Site Findings Discussed With Crew: YES NO

Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

Line Supervisor's Signature: Meke

Inspector's Signature: Bill Manney

Safety & Loss Control Coordinator Signature: [Signature]



Shelby Energy Cooperative

Your Touchstone Energy® Partner



RIGHT OF WAY FIELD INSPECTION FORM

Inspector: Bill Massey

Date: 7.23-09

Position: Safety Instructor

Time: 1:30 pm

Company: KAEC

County: Trimble

Address: 4515 Bishop Ln.

Location: McCord Ln

Louisville, Ky

Name of Contractor Observed:

Phone#: 502-523-5409

A & G

Weather Conditions: Cloudy

Crew Members:

Job Description: Tree

Tony Clark

Trimming

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Gaff Guards on Hooks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

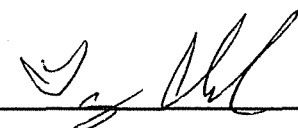
Notes/Comments: _____

Job Site Findings Discussed With Crew: YES NO


Corrective Actions Needed: Yes No

If Corrective Actions Taken Explain In Detail: _____

Crew working safely

Line Supervisor's Signature: 

Inspector's Signature: Bill Massey

Safety & Loss Control Coordinator Signature: 



Shelby Energy Cooperative

Your Touchstone Energy® Partner



CONTRACTOR FIELD INSPECTION FORM

Inspector: Bill Massey

Date: 7-23-09

Position: Safety Instructor

Time: 3:00 pm

County: Shelby

Company: ~~KAEC~~ KAEC

Location: _____

Address: _____

Crew Members:

Phone #: 502 533-5407

Elliot

Weather Conditions: Cloudy

Wally Showse

Jim Burton

Job Description: Removing Transformer + Service

Philip Biddle

John Ackes

Brad Darnell

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

Overhead Underground _____ Voltage 7.2

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			✓	
Miscellaneous Observations	Yes	No	N/A	If No--Corrective Action Taken
Shelby Energy Decals In Place	✓			
Proper Clearances	✓			
Rolling Grounds in Place			✓	
Public Hazards Present		✓		

Notes/Comments: crew working safely

Job Site Findings Discussed With Crew: YES ✓ NO _____

Corrective Actions Needed: Yes _____ No ✓

If Corrective Actions Taken Explain In Detail: _____

Line Supervisor's Signature: William Johnson

Inspector's Signature: Bill M... ..

Safety & Loss Control Coordinator Signature: [Signature]