



# NOTICE AND AGENDA OF REGULAR MEETING

Pursuant to the Oklahoma Open Meeting Act (25 O.S. Sec. 301, et seq.), notice is hereby given that the Board of County Commissioners, Pittsburg County, will hold a regular meeting as follows

FILED

DATE: April 14, 2025

TIME: 9:00 A.M.

PLACE: COUNTY COMMISSIONERS CONFERENCE ROOM  
PITTSBURG COUNTY COURTHOUSE  
115 EAST CARL ALBERT PARKWAY, ROOM 100B  
MCALISTER, OKLAHOMA

APR 11 2025

TIME

8:33

AM

HOPE TRAMMELL, COUNTY CLERK  
PITTSBURG COUNTY

BY

DEPUTY

\*\*\*CONSIDERATION, DISCUSSION AND POSSIBLE ACTION TO BE TAKEN ON THE  
FOLLOWING LISTED ITEMS ON THE AGENDA\*\*\*

## AGENDA

1. CALL MEETING TO ORDER
2. ROLL CALL:

CHARLIE ROGERS	✓	CHAIRMAN
ROSS SELMAN	✓	VICE-CHAIRMAN
MIKE HAYNES	✓	MEMBER
3. APPROVAL OF AGENDA
4. APPROVE/DISAPPROVE MEETING MINUTES

A. Regular Meeting from April 7, 2025

5. RECOGNITION OF GUESTS/PUBLIC COMMENTS

PERSONS ADDRESSING THE BOARD SHOULD STATE THEIR NAME AND ADDRESS FOR THE RECORD AND WILL BE LIMITED IN DURATION TO THREE (3) MINUTES. COMMENTS ARE LIMITED TO ITEMS ON THE AGENDA. ANY COMMENTS BY THE PUBLIC ON ITEMS NOT ON THE AGENDA CANNOT BE ACKNOWLEDGED OR DISCUSSED BUT CAN BE PLACED ON AN UPCOMING AGENDA FOR DISCUSSION AND POSSIBLE ACTION.

6. OFFICIALS – DEPARTMENT REPORT

A. COUNTY CLERK

- i. Tort Claim – District 2
- ii. Letter changing receiving officers- Ashland VFD
- iii. Letter changing receiving and requisitioning officers- Russellville VFD

7. FISCAL TRANSACTIONS

A. Claims and Purchase Orders

B. Transfers

C. Monthly Reports

D. Blanket Purchase Orders

E. Payroll

8. UNFINISHED BUSINESS

A. Award/Reject Bid No. 17 One (1), 2024 or Newer Wildland UTV

9. AGENDA ITEMS

A. Discussion, Consideration and Possible Action to Approve Agreement between Pittsburg County and the Oklahoma Department of Wildlife Conservation for purpose of road repair, improvement and maintenance on the Gary Sherrer Wildlife Management Area – District 2

B. Discussion, Consideration and Possible Action to approve Air Med Care Network Group Full Census Membership Contract for employees air ambulance insurance

C. Resolution 25-252 to Appoint Member to the Southeast Oklahoma Library System Board of Trustees and Sign Certification of Library Board Appointment

D. Resolution 25-253 to Approve and Add Safety Programs to the Pittsburg County Safety Manual

E. Resolution 25-254 to Accept Donation- Animal Shelter

F. Resolution 25-255 to Cancel Purchase Order- District 2

10. ROAD CROSSING PERMITS

A. 25-015, Tall Oak Woodford, LLC to Bore Permanent Gas Line in Section 9, Township 7N, Range 13E- District 3

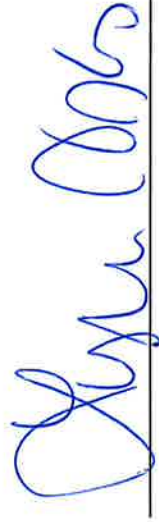
11. NEW BUSINESS

CONSIDERATION AND POSSIBLE ACTION WITH RESPECT TO ANY OTHER MATTERS NOT KNOWN ABOUT OR WHICH COULD NOT HAVE BEEN FORESEEN PRIOR TO THE POSTING OF THIS AGENDA.

12. 10:00 A.M. – PUBLIC HEARINGS  
None.

13. 10:00 A.M. – BID OPENINGS  
None.

14. RECESS/ADJOURNMENT



Commissioners' Assistant

**PITTSBURG COUNTY COMMISSIONER  
APRIL 14, 2025  
MEETING MINUTES**

The Board of County Commissioners, Pittsburg County, met in regular session on **APRIL 14, 2025 at 9:00 A.M.**, Meeting held in the County Commissioners Conference Room, after proper notice and agenda were posted indicating time and date. Agenda was posted at 8:33 A.M., April 11, 2025.

**1. CALL MEETING TO ORDER:** The meeting was called to order by Chairman Rogers.

**2. ROLL CALL:** Roll was called.

Charlie Rogers	Present
Ross Selman	Present
Mike Haynes	Present

**3. APPROVAL OF AGENDA:** Selman made a motion to approve the agenda; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**4. APPROVE/DISAPPROVE MINUTES FROM:**

**A. REGULAR MEETING APRIL 7, 2025:** The minutes from the previous meeting, April 7, 2025 regular meeting were read. Selman made a motion to approve the minutes; seconded by Rogers.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**5. RECOGNITION OF GUESTS/PUBLIC COMMENTS:** None.

**6. OFFICIALS – DEPARTMENT REPORTS:**

**A. COUNTY CLERK:**

**i. TORT CLAIM, DONNIE DYCUS – DISTRICT 2:** Rogers stated that the tort claim is for a motor vehicle accident. The board reviewed the tort claim.

**ii. LETTER CHANGING RECEIVING OFFICERS – ASHLAND VFD:** Rogers read the changes to the receiving officers.

iii. **LETTER CHANGING RECEIVING AND REQUISITIONING OFFICERS – RUSSELLVILLE VFD:** Rogers read the changes to the receiving officers.

**7. FISCAL TRANSACTIONS:**

**A. CLAIMS AND PURCHASE ORDERS:** Rogers made a motion to approve the purchase orders for payment after review and signature; seconded by Selman.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**B. TRANFERS:** Rogers made a motion to approve all transfers; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**C. MONTHLY REPORTS:** Rogers made a motion to approve the monthly reports of officers; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**D. BLANKET PURCHASE ORDERS:**

DEPT	PO	AMOUNT	VENDOR
Shady Grove Fire	9213	\$ 600.00	Holman's Fast Lube
District 3	9214	\$ 200.00	Unifirst
District 3	9215	\$ 1,200.00	Unifirst
District 2	9216	\$ 3,000.00	Parrott Trucking
District 2	9217	\$ 5,000.00	Michael A price
District 2	9218	\$ 1,500.00	Kiamichi Automotive
District 1	9219	\$15,000.00	Rush Truck Center
Sheriff	9220	\$ 4,000.00	Custom Technologies
Flood Plain	9221	\$ 80.00	Comdata
Flood Plain	9222	\$ 10.00	OTA Pikepass
District 3	9227	\$ 5,000.00	Michael A Price

Rogers made a motion to approve the blanket purchase orders; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**E. PAYROLL:** Rogers made a motion to approve the mid-month payroll; seconded by Selman.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**8. UNFINISHED BUSINESS:**

**A. AWARD/REJECT BID NO. 17 ONE (1), 2024 OR NEWER WILDLAND UTV:** Rogers read a letter from Bugtussle Fir Department request that the bid awarded to Vicars Motorsports as the other bidders did not meet bid specifications. Rogers made a motion to award the bid to Vicars Motorsports; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**9. AGENDA ITEMS:**

**A. DISCUSSION, CONSIDERATION AND POSSIBLE ACTION TO APPROVE AGREEMENT BETWEEN PITTSBURG COUNTY AND THE OKLAHOMA DEPARTMENT OF WILDLIFE CONSERVATION FOR PURPOSE OF ROAD REPAIR, IMPROVEMENT AND MAINTENANCE ON THE GARY SHERRER WILDLIFE MANAGEMENT AREA – DISTRICT 2:** Selman made a motion to approve the agreement; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**B. DISCUSSION, CONSIDERATION AND POSSIBLE ACTION TO APPROVE AIR MED CARE NETWORK GROUP FULL CENSUS MEMBERSHIP CONTRACT FOR EMPLOYEES AIR AMBULANCE INSURANCE:** Rogers stated that the contract is in the amount of \$14,280.00 for 204 employees and officials. Selman made a motion to approve the contract; seconded by Rogers.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**C. RESOLUTION 25-252 TO APPOINT MEMBER TO THE SOUTHEAST OKLAHOMA LIBRARY SYSTEM BOARD OF TRUSTEES AND SIGN CERTIFICATION OF LIBRARY APPOINTMENT:** Rogers read the resolution. Rogers made a motion to approve the resolution; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**D. RESOLUTION 25-253 TO APPROVE AND ADD SAFETY PROGRAMS TO THE PITTSBURG COUNTY SAFETY MANUAL:** Sandra Crenshaw stated that this is to correct the safety manual. Rogers made a motion to approve the resolution; seconded by Selman.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**E. RESOLUTION 25-254 TO ACCEPT DONATION – ANIMAL SHELTER:** Rogers read the resolution. Rogers made a motion to accept the donation; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**F. RESOLUTION 25-255 TO CANCEL PURCHASE ORDER – DISTRICT 2:** Rogers read the resolution stating purchase order 6940. Rogers made a motion to cancel the purchase order; seconded by Haynes.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**10. ROAD CROSSING PERMITS:**

**A. 25-015, TALL OAK WOODFORD, LLC TO BORE PERMANENT GAS LINE IN SECTION 9, TOWNSHIP 7N, RANGE 13E – DISTRICT 3:** Selman made a motion to approve the road crossing permit; seconded by Rogers.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed.

**11. NEW BUSINESS:**

**CONSIDERATION AND POSSIBLE ACTION WITH RESPECT TO ANY OTHER MATTERS NOT KNOWN ABOUT OR WHICH COULD NOT HAVE BEEN FORESEEN PRIOR TO THE POSTING OF THIS AGENDA:** None.

**12. 10:00 A.M. – PUBLIC HEARINGS:** None.

**13. 10:00 A.M. – BID OPENINGS:** None.

**14. RECESS/ADJOURNMENT:** There being no further business brought before the board; Rogers made a motion to sign all approved claims and adjourn; seconded by Selman.

AYE: Charlie Rogers  
Ross Selman  
Mike Haynes

NAY: None.

Motion Passed. Meeting Adjourned.

Purchase Orders By Account

Fiscal Year : 2024-2025  
Date Range: 04/14/2025 to 04/14/2025

PO	Warrant No.	Vendor Name	Purpose	Amount
Animal Shelter				
1316-1-8020-1233				
009135	000514	OKLA. EMPLOYMENT SECURITY COM	EMPLOYMENT TAX	\$ 615.57
			Total:	\$ 615.57
1316-1-8020-2005				
007592	000515	H20 DEPOT	WATER & COOLER RENT	\$ 28.20
007595	000516	UNIFIRST CORP.	MAT MAINTENANCE	\$ 79.44
008860	000517	UNIFIRST FIRST AID CORP	FIRST AID SUPPLIES	\$ 155.49
009051	000518	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
009064	000519	SOUTHEASTERN ALARM LLC	ALARM MONITORING	\$ 120.00
009096	000520	CITY OF MCALESTER	MONTHLY SERVICE	\$ 915.75
			Total:	\$ 1,305.99
Drug Court				
7206-1-1900-2005				
008872	000167	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
			Total:	\$ 7.11
Econ Dev Trust				
7603-4-0500-2005				
002155	000424	ADA PAPER COMPANY	JANITORIAL SUPPLIES	\$ 1,185.70
007576	000425	JOHNNYS A STREET MARKET	CONCESSION SUPPLIES	\$ 239.95
007578	000426	H20 DEPOT	WATER & COOLER RENT	\$ 18.40
007579	000427	ADA PAPER COMPANY	JANITORIAL SUPPLIES	\$ 1,143.75
007582	000428	BEN E. KEITH OKLAHOMA	CONCESSION SUPPLIES	\$ 3,995.08
007585	000429	UNIFIRST CORP.	MAT MAINTENANCE	\$ 89.72
007588	000430	JOHNNYS A STREET MARKET	INMATE LUNCHES	\$ 185.43
007589	000431	LOWES	PARTS & SHOP SUPPLIE	\$ 401.34
008742	000432	ADAMS TRUE VALUE	CHAINSAW ETC	\$ 710.00
008819	000433	LOWES	WIRE ETC.	\$ 268.25
008987	000434	TK ELEVATOR CORPORATION	ELEVATOR MAINTENANC	\$ 813.90
008989	000435	OKLAHOMA STATE DEPARTMENT OF H	PERMIT FEE	\$ 95.00
008993	000436	AT&T MOBILITY	MONTHLY SERVICE	\$ 133.66
009001	000437	SUMMIT UTILITIES OKLAHOMA INC	MONTHLY SERVICE	\$ 365.78
009003	000438	CASE, LUCAS	SECURITY DEPOSIT RET	\$ 300.00



PO	Warrant No.	Vendor Name	Purpose	Amount
<b>Econ Dev Trust</b>				
<b>7603-4-0500-2005</b>				
009004	000439	COLEMAN, TOBI	SECURITY DEPOSIT RET	\$ 400.00
009005	000440	MCLESTER REGIONAL HEALTH CEN	SECURITY DEPOSIT RET	\$ 400.00
009006	000441	FIFTH QUARTER PRINTING AND EMBR	BANNERS	\$ 740.00
009017	000442	OKLAHOMA TAX COMMISSION	SALES TAX	\$ 1,687.40
009071	000443	LOWES	CABLE TIES ETC.	\$ 232.32
009089	000444	CITY OF MCALESTER	MONTHLY SERVICE	\$ 256.43
009146	000445	HERRINGSHAW WASTE MANAGEMEN	MONTHLY SERVICE	\$ 130.00
			<b>Total:</b>	<b>\$ 13,792.11</b>
<b>Emergency Mgmt</b>				
<b>1212-2-2700-2005</b>				
008855	000232	COMMERCIAL DOOR LLC	DOOR REPAIR	\$ 469.00
009092	000233	AT&T MOBILITY	MONTHLY SERVICE	\$ 763.70
009093	000234	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 32.00
			<b>Total:</b>	<b>\$ 1,264.70</b>
<b>General</b>				
<b>0001-1-0100-2005</b>				
009075	003554	MILLER OFFICE EQUIPMENT	COPY OVERAGE	\$ 88.29
009076	003555	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 4.00
			<b>Total:</b>	<b>\$ 92.29</b>
<b>0001-1-0600-2005</b>				
009033	003556	QUADIENT LEASING	POSTAGE METER LEASE	\$ 1,292.88
009034	003557	MILLER OFFICE EQUIPMENT	COPIER MAINTENANCE	\$ 30.00
009043	003558	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
009157	003559	VIP TECHNOLOGY SOLUTIONS GROU	PHONE REPAIR	\$ 306.25
			<b>Total:</b>	<b>\$ 1,636.24</b>
<b>0001-1-0800-2005</b>				
009044	003560	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 3.11
			<b>Total:</b>	<b>\$ 3.11</b>
<b>0001-1-1000-2005</b>				
008474	003561	OSU-CTP	TRAINING	\$ 250.00
009042	003562	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
009209	003563	THE BANK N.A.	SAFE DEPOSIT BOX REN	\$ 50.00
			<b>Total:</b>	<b>\$ 307.11</b>

PO	Warrant No.	Vendor Name	Purpose	Amount
<b>General</b>				
<b>0001-1-1700-1233</b>				
009138	003564	OKLA. EMPLOYMENT SECURITY COM	EMPLOYMENT TAX	\$ 989.28
			<b>Total:</b>	<b>\$ 989.28</b>
<b>0001-1-1700-2005</b>				
008734	003565	TIMMONS, RYLEE	UNIFORMS	\$ 132.00
008990	003566	AT&T MOBILITY	MONTHLY SERVICE	\$ 379.96
009045	003567	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
			<b>Total:</b>	<b>\$ 519.07</b>
<b>0001-1-1700-2020</b>				
008991	003568	TASC	OIL & GAS MAINTENANC	\$ 9,375.00
			<b>Total:</b>	<b>\$ 9,375.00</b>
<b>0001-1-2000-1233</b>				
009137	003569	OKLA. EMPLOYMENT SECURITY COM	EMPLOYMENT TAX	\$ 18,963.97
			<b>Total:</b>	<b>\$ 18,963.97</b>
<b>0001-1-2000-2011</b>				
009013	003570	NORTHEASTERN HEALTH SYSTEM	INMATE MEDICAL	\$ 324.00
009014	003571	SOUTHEAST OKLAHOMA ORAL & MAX	INMATE MEDICAL	\$ 4,586.87
			<b>Total:</b>	<b>\$ 4,910.87</b>
<b>0001-1-2200-1310</b>				
009131	003572	HOLT, CHRISTY	TRAVEL	\$ 31.50
009132	003573	ARTEBERRY, PEGGY L.	TRAVEL	\$ 23.80
009133	003574	BENSON, PAUL D.	TRAVEL	\$ 31.36
			<b>Total:</b>	<b>\$ 86.66</b>
<b>0001-1-2200-2005</b>				
009130	003575	AT&T MOBILITY	MONTHLY SERVICE	\$ 140.43
			<b>Total:</b>	<b>\$ 140.43</b>
<b>0001-1-3300-2005</b>				
007684	003576	H2O DEPOT	BOTTLED WATER ETC.	\$ 343.50
008968	003577	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 4,519.12
008998	003578	AT&T MOBILITY	MONTHLY SERVICE	\$ 200.20
008999	003579	AT&T MOBILITY	MONTHLY SERVICE	\$ 387.91
009002	003580	VYVE BROADBAND	MONTHLY SERVICE	\$ 81.90
009036	003581	OKLA DEPT OF LABOR	BOILER INSPECTION	\$ 50.00
009067	003582	UNIFIRST CORP.	FLOOR MATS AND ETC	\$ 36.80

PO	Warrant No.	Vendor Name	Purpose	Amount
General				
<b>0001-1-3300-2005</b>				
009082	003583	CITY OF MCALESTER	MONTHLY SERVICE	\$ 159.25
009090	003584	CITY OF MCALESTER	MONTHLY SERVICE	\$ 492.52
009134	003585	LINGO COMMUNICATIONS	MONTHLY SERVICE	\$ 167.82
009161	003586	LOWES	SPRAY FOAM	\$ 59.76
			<b>Total:</b>	<b>\$ 6,498.78</b>
<b>0001-2-0400-2005</b>				
007374	003587	COMIDATA	FUEL	\$ 11,622.62
			<b>Total:</b>	<b>\$ 11,622.62</b>
<b>0001-2-1800-2005</b>				
008997	003588	EASTERN OK YOUTH SERVICES INC	JUVENILE DETENTION	\$ 1,247.04
			<b>Total:</b>	<b>\$ 1,247.04</b>
<b>0001-2-2700-2005</b>				
008856	003589	BROWNS SHOE FIT CO OF ADA LLC	WORK SHOES	\$ 1,070.00
			<b>Total:</b>	<b>\$ 1,070.00</b>
<b>0001-4-0500-2005</b>				
007646	003590	KIAMICHI AUTOMOTIVE WAREHOUSE	PARTS & SHOP SUPPLIE	\$ 52.98
007647	003591	COMDATA	FUEL	\$ 416.82
			<b>Total:</b>	<b>\$ 469.80</b>
<b>0001-5-0900-1110</b>				
009144	003592	OSU COOPERATIVE EXTENSIVE SER.	PERSONAL SERVICES	\$ 16,333.33
			<b>Total:</b>	<b>\$ 16,333.33</b>
<b>0001-5-0900-1310</b>				
009066	003593	HAMILTON, MAKAYLA	TRAVEL	\$ 53.34
009142	003594	WILSON, STEPHANIE	TRAVEL	\$ 61.67
			<b>Total:</b>	<b>\$ 115.01</b>
<b>0001-5-0900-2005</b>				
009068	003595	SUMMIT BUSINESS SYSTEMS INC.	COPIER MAINTENANCE	\$ 876.91
009069	003596	MILLER OFFICE EQUIPMENT	COPY OVERAGE	\$ 98.72
009083	003597	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
009141	003598	SOUTHEASTERN ALARM LLC	FIRE ALARM MONITORIN	\$ 120.00
009143	003599	OSU COOPERATIVE EXTENSIVE SER.	POSTAGE EQUIPMENT	\$ 600.00
			<b>Total:</b>	<b>\$ 1,702.74</b>

PO	Warrant No.	Vendor Name	Purpose	Amount
Health				
<b>1216-3-5000-1310</b>				
006657	000315	SCHULZ, JAMES	TRAVEL	\$ 541.30
006659	000316	LOCKE, MELISSA	TRAVEL	\$ 462.05
007726	000317	KELL, NICOLE	TRAVEL	\$ 636.30
			<b>Total:</b>	<b>\$ 1,639.65</b>
<b>1216-3-5000-2005</b>				
008526	000318	PRICES PRINTING	BROCHURES	\$ 1,176.00
008764	000319	WITTKOPF, SHELLY	CONTRACT SERVICES	\$ 1,326.00
008807	000320	WALMART COMMUNITY CARD	PROGRAM SUPPLIES	\$ 18.06
008852	000321	SUMMIT UTILITIES OKLAHOMA INC	MONTHLY SERVICE	\$ 49.37
008972	000322	WALMART COMMUNITY CARD	DRILL BITS ETC.	\$ 65.13
008973	000323	LOWES	DRILL BITS ETC.	\$ 32.18
008981	000324	AT&T MOBILITY	MONTHLY SERVICE	\$ 51.86
008982	000325	AT&T MOBILITY	MONTHLY SERVICE	\$ 311.16
009052	000326	WALMART COMMUNITY CARD	PROGRAM SUPPLIES	\$ 23.94
009097	000327	CITY OF MCALESTER	MONTHLY SERVICE	\$ 600.95
009155	000328	SMARTSENSE BY DIGI	VACCINE MONITORING	\$ 259.20
			<b>Total:</b>	<b>\$ 3,913.85</b>
Highway				
<b>1102-6-4200-1310</b>				
009158	002426	HAYNES, MIKE	TRAVEL	\$ 170.00
			<b>Total:</b>	<b>\$ 170.00</b>
<b>1102-6-6520-2005</b>				
007553	002427	PRO KILL INC.	PEST CONTROL	\$ 84.00
007644	002428	OTA PIKEPASS CUSTOMER SERVICE C	TOLL	\$ 30.37
008718	002429	DISCOUNT STEEL	CONCRETE SUPPLIES	\$ 220.00
008992	002430	AT&T MOBILITY	MONTHLY SERVICE	\$ 200.20
008996	002431	AT&T MOBILITY	MONTHLY SERVICE	\$ 1,374.89
			<b>Total:</b>	<b>\$ 1,909.46</b>
Hwy-ST				
<b>1313-6-8040-2005</b>				
007627	002147	KIAMICHI AUTOMOTIVE WAREHOUSE	PARTS & SHOP SUPPLIE	\$ 79.99
007629	002148	UNIFIRST CORP.	UNIFORM MAINTENANCE	\$ 137.93
007634	002149	COMDATA	FUEL	\$ 85.28
007638	002150	LOWES	PARTS & SHOP SUPPLIE	\$ 294.31
008672	002151	DOLESE	3/8" #2 COVER CHIPS	\$ 11,562.33

PO

Warrant No.

Vendor Name

Purpose

Amount

Hwy-ST

1313-6-8040-2005

008820	002152	DOLESE	3/8" #2 COVER CHIPS	\$ 11,762.77
008821	002153	ASPHALT & FUEL SUPPLY	ROAD OIL	\$ 26,784.80
008969	002154	JAMES SUPPLIES	CYLINDER RENTALS	\$ 27.90
008995	002155	AT&T MOBILITY	MONTHLY SERVICE	\$ 51.86
009015	002156	ASPHALT & FUEL SUPPLY	ROAD OIL	\$ 13,367.20
009023	002157	VYVE BROADBAND	MONTHLY SERVICE	\$ 303.75
009065	002158	UNIFIRST FIRST AID CORP	GLOVES	\$ 285.11
009119	002159	ASPHALT & FUEL SUPPLY	ROAD OIL	\$ 27,753.60
009120	002160	RAM INC	FUEL	\$ 7,607.08
009147	002161	HERRINGSHAW WASTE MANAGEMEN	MONTHLY SERVICE	\$ 90.00

Total: \$ 100,193.91

1313-6-8040-4130

009098	002162	WELCH STATE BANK	LEASE PAYMENT	\$ 17,446.89
009099	002163	COMMUNITY NATIONAL BANK OF OKA	LEASE PAYMENT	\$ 1,275.00

Total: \$ 18,721.89

1313-6-8041-2005

007613	002164	YELLOW HOUSE MACHINE	PARTS & SHOP SUPPLIE	\$ 695.39
007614	002165	O REILLY AUTO PARTS	PARTS & SHOP SUPPLIE	\$ 435.59
007615	002166	KIAMICHI AUTOMOTIVE WAREHOUSE	PARTS & SHOP SUPPLIE	\$ 434.41
007616	002167	UNIFIRST CORP.	UNIFORM MAINTENANCE	\$ 234.82
007617	002168	COMDATA	FUEL	\$ 2,312.18
007618	002169	OTA PIKEPASS CUSTOMER SERVICE C	TOLL CHARGES	\$ 21.37
007619	002170	UNIFIRST CORP.	UNIFORM MAINTENANCE	\$ 436.56
007622	002171	WARREN POWER & MACHINERY INC.	PARTS & SHOP SUPPLIE	\$ 984.43
007623	002172	EUFAULA AUTO PARTS INC	PARTS & SHOP SUPPLIE	\$ 80.34
007624	002173	WELDON PARTS INC	PARTS & SHOP SUPPLIE	\$ 406.76
008172	002174	STIGLER STONE	1 1/2" ODOT BASE TYPE	\$ 3,377.73
008524	002175	PRO KILL INC.	PEST CONTROL	\$ 84.00
008730	002176	PREMIER TRUCK GROUP	BRAKE CLEANER	\$ 90.00
008735	002177	TRUE VALUE HARTSHORNE	KEYS	\$ 5.37
008737	002178	WARREN POWER & MACHINERY INC.	VALVE ETC.	\$ 1,035.53
008740	002179	UNIFIRST FIRST AID CORP	EYE WASH STATION	\$ 423.23
008749	002180	RAM INC	FUEL	\$ 4,950.80
008754	002181	LOWES	SHOP SUPPLIES	\$ 153.86
008767	002182	KIAMICHI AUTOMOTIVE WAREHOUSE	TRANSMISSION FLUID E	\$ 86.41
008817	002183	VYVE BROADBAND	MONTHLY SERVICE	\$ 259.20
008861	002184	UNIFIRST FIRST AID CORP	GLOVES ETC	\$ 371.50
008934	002185	JAMES SUPPLIES	OXYGEN/ACETYLENE	\$ 20.77
009008	002186	DUNN COUNTRY CHEVROLET	OIL CHANGE ETC	\$ 110.80
009038	002187	AT&T MOBILITY	MONTHLY SERVICE	\$ 221.88
009039	002188	QUADIENT LEASING	PROPERTY TAX	\$ 68.07

PO	Warrant No.	Vendor Name	Purpose	Amount
Hwy-ST				
1313-6-8041-2005				
009046	002189	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.11
009085	002190	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 167.71
009201	002191	OKLA. NATURAL GAS COMPANY	MONTHLY SERVICE	\$ 43.78
009202	002192	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 99.24
009203	002193	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 159.28
009204	002194	OKLA. NATURAL GAS COMPANY	MONTHLY SERVICE	\$ 44.58
Total:				\$ 17,822.70
1313-6-8041-4130				
009100	002195	ARMSTRONG BANK	LEASE PAYMENT	\$ 2,151.85
009101	002196	MERCEDES-BENZ FINANCIAL SVCS	LEASE PAYMENT	\$ 5,482.73
009102	002197	OKLA. DEPT OF TRANSPORTATION	LEASE PAYMENT	\$ 6,328.02
009103	002198	SECURITY STATE BANK	LEASE PAYMENT	\$ 5,827.71
009104	002199	WELCH STATE BANK	LEASE PAYMENT	\$ 28,217.83
Total:				\$ 48,008.14
1313-6-8042-2005				
004209	002200	KELLPRO SOFTWARE & TECHNOLOG	COMPUTER SOFTWARE	\$ 763.98
006327	002201	KIAMICHI AUTOMOTIVE WAREHOUSE	PARTS & SHOP SUPPLIE	\$ 1,493.57
006726	002202	UNIFIRST CORP.	UNIFORM MAINTENANCE	\$ 1,167.26
007299	002203	KIAMICHI AUTOMOTIVE WAREHOUSE	PARTS & SHOP SUPPLIE	\$ 1,444.49
008666	002204	PARROTT TRUCKING	CONTRACT HAULING	\$ 1,885.00
008671	002205	PRICE, MICHAEL A	RED GRAVEL	\$ 2,000.00
008778	002206	RAM INC	FUEL	\$ 11,311.61
008853	002207	JAE DPF SOLUTIONS LLC	FILTER CLEANING	\$ 1,189.42
008980	002208	WELDON PARTS INC	LINKAGE	\$ 102.73
008984	002209	GOODWIN, BRENNEN	AUTO & SHOP SUPPLIES	\$ 1,187.30
008985	002210	GOODWIN, BRENNEN	DEF	\$ 1,700.00
009024	002211	G.C. RENTAL CENTER	COME-A-LONG	\$ 76.00
009040	002212	WELDON PARTS INC	ZIP TIES	\$ 32.81
009047	002213	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 4.00
009056	002214	ATWOODS	SHOVELS	\$ 24.99
009058	002215	SERVICE OKLAHOMA	TAG & TITLE	\$ 31.50
009063	002216	WELDON PARTS INC	SOLENOID	\$ 112.66
009079	002217	WELDON PARTS INC	AIR BAGS	\$ 392.19
Total:				\$ 24,919.51
1313-6-8042-4130				
009105	002218	ARMSTRONG BANK	LEASE PAYMENT	\$ 8,496.68
009106	002219	OKLA. DEPT OF TRANSPORTATION	LEASE PAYMENT	\$ 5,854.35
009107	002220	RCB BANK	LEASE PAYMENT	\$ 2,841.34
009108	002221	WELCH STATE BANK	LEASE PAYMENT	\$ 2,724.48

PO	Warrant No.	Vendor Name	Purpose	Amount
<b>Hwy-ST</b>				
<b>1313-6-8042-4130</b>				<b>Total: \$ 19,916.85</b>
<b>1313-6-8043-2005</b>				
007599	002222	COMDATA	FUEL	\$ 3,524.17
008062	002223	ICOM AMERICA INC.	RADIO ETC	\$ 2,126.60
008119	002224	P & K EQUIPMENT INC	FILTERS	\$ 448.01
008219	002225	KIAMICHI AUTOMOTIVE WAREHOUSE	PARTS & SHOP SUPPLIE	\$ 1,788.62
008257	002226	THE RAILROAD YARD	12" STEEL PIPE	\$ 9,485.93
008427	002227	CUSTOM PRODUCTS CORPORATION	DECALS	\$ 446.71
008589	002228	DOLESE	1 1/2" CRUSHER RUN	\$ 6,015.13
008725	002229	WELDON PARTS INC.	LIGHT BARS	\$ 4,088.55
008759	002230	JOHNNYS A STREET MARKET	INMATE LUNCHES	\$ 43.88
008776	002231	DOWLESS SERVICE CO., LLC	TIRES & SERVICES	\$ 194.00
008810	002232	SERVICE OKLAHOMA	TAG & TITLE	\$ 138.00
008811	002233	WARREN POWER & MACHINERY INC.	FILTERS ETC	\$ 320.25
008812	002234	RAM INC	FUEL	\$ 3,797.98
008818	002235	WELDON PARTS INC.	LED LIGHTS	\$ 350.96
008823	002236	DISCOUNT STEEL	FLAT STRAP	\$ 19.00
008841	002237	WELDON PARTS INC.	CIRCUIT BREAKERS	\$ 47.43
008842	002238	KIAMICHI AUTOMOTIVE WAREHOUSE	BATTERIES	\$ 419.97
008843	002239	ADAMS TRUE VALUE	CHAIN	\$ 95.00
008844	002240	LOWES	BOLTS & NUTS	\$ 14.10
008924	002241	JAMES SUPPLIES	CYLINDER LEASE	\$ 660.00
008988	002242	CANON FINANCIAL SERVICES	COPIER LEASE	\$ 175.00
009007	002243	WILSON TRUCK AND TIRE SERVICE	DIAGNOSTIC TEST	\$ 335.00
009032	002244	WELDON PARTS INC.	TUBING	\$ 25.95
009041	002245	AT&T MOBILITY	MONTHLY SERVICE	\$ 1,253.31
009048	002246	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 7.12
009049	002247	LOWES	SPRAYERS	\$ 93.93
009062	002248	RAM INC	FUEL	\$ 491.40
009072	002249	WELDON PARTS INC.	LUG NUTS	\$ 8.44
009086	002250	CITY OF MCALESTER	MONTHLY SERVICE	\$ 508.75
009087	002251	CITY OF MCALESTER	MONTHLY SERVICE	\$ 24.95
009088	002252	CITY OF MCALESTER	MONTHLY SERVICE	\$ 14.31
009205	002253	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 646.67
009206	002254	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 83.17
009207	002255	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 38.60
<b>Total:</b>				<b>\$ 37,730.89</b>
<b>1313-6-8043-4130</b>				
009109	002256	LOCAL BANK	LEASE PAYMENT	\$ 4,591.60
009110	002257	OKLA. DEPT OF TRANSPORTATION	LEASE PAYMENT	\$ 6,467.23
009111	002258	SECURITY STATE BANK	LEASE PAYMENT	\$ 9,059.66

PO	Warrant No.	Vendor Name	Purpose	Amount
<b>Hwy-ST</b>				
<b>1313-6-8043-4130</b>				
009112	002259	WARREN POWER & MACHINERY INC.	LEASE PAYMENT	\$ 2,395.00
009113	002260	WARREN POWER & MACHINERY INC.	LEASE PAYMENT	\$ 2,395.00
009114	002261	WELCH STATE BANK	LEASE PAYMENT	\$ 20,995.70
			<b>Total:</b>	<b>\$ 45,904.19</b>
<b>Jail-ST</b>				
<b>1315-2-8034-1233</b>				
009136	000687	OKLA. EMPLOYMENT SECURITY COM	EMPLOYMENT TAX	\$ 2,068.47
			<b>Total:</b>	<b>\$ 2,068.47</b>
<b>1315-2-8034-2005</b>				
009078	000688	CITY OF MCALESTER	MONTHLY SERVICE	\$ 3,056.15
			<b>Total:</b>	<b>\$ 3,056.15</b>
<b>REAP</b>				
<b>1425-1-5200-4325</b>				
008259	000002	MURRAY CARPETS INC	FLOORING ETC	\$ 11,949.19
			<b>Total:</b>	<b>\$ 11,949.19</b>
<b>Rural Fire-ST</b>				
<b>1321-2-8203-2005</b>				
000139	000955	COMDATA	FUEL	\$ 430.92
007681	000956	PRO KILL INC.	PEST CONTROL	\$ 168.00
009129	000957	KANSAS TURNPIKE AUTHORITY	TOLL CHARGES	\$ 5.24
			<b>Total:</b>	<b>\$ 604.16</b>
<b>1321-2-8205-2005</b>				
007668	000958	COMDATA	FUEL	\$ 1,000.00
008983	000959	COMDATA	FUEL	\$ 619.87
			<b>Total:</b>	<b>\$ 1,619.87</b>
<b>1321-2-8205-4130</b>				
009084	000960	LOCAL BANK	LEASE PAYMENT	\$ 864.59
			<b>Total:</b>	<b>\$ 864.59</b>



PO	Warrant No.	Vendor Name	Purpose	Amount
Rural Fire-ST				
1321-2-8215-2005				
009156	000961	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 221.15
			<b>Total:</b>	<b>\$ 221.15</b>
1321-2-8216-2005				
007558	000962	W S DARLEY	SCBA CYLINDERS	\$ 3,441.18
009159	000963	AT&T MOBILITY	MONTHLY SERVICE	\$ 108.08
			<b>Total:</b>	<b>\$ 3,549.26</b>
1321-2-8216-4130				
009160	000964	RCB BANK	LEASE PAYMENT	\$ 1,331.15
			<b>Total:</b>	<b>\$ 1,331.15</b>
1321-2-8218-2005				
009070	000965	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 70.40
009210	000966	OKLA. NATURAL GAS COMPANY	MONTHLY SERVICE	\$ 57.69
			<b>Total:</b>	<b>\$ 128.09</b>
1321-2-8225-4110				
008484	000967	TRAILQUIP PLUS LLC	TRAILER	\$ 3,600.00
			<b>Total:</b>	<b>\$ 3,600.00</b>
1321-2-8228-2005				
006775	000968	KIAMICHI AUTOMOTIVE WAREHOUSE	AUTO PARTS ETC.	\$ 253.92
			<b>Total:</b>	<b>\$ 253.92</b>
SH Commissary				
1223-2-0400-2005				
008478	000205	POSITIVE PROMOTIONS INC.	UNIFORMS ETC	\$ 555.68
008747	000206	COMMISSARY EXPRESS	INHOUSE COMMISSARY	\$ 2,760.39
008889	000207	COMMISSARY EXPRESS	KIOSK FEES	\$ 122.00
008962	000208	BEN E. KEITH OKLAHOMA	INHOUSE COMMISSARY	\$ 904.85
			<b>Total:</b>	<b>\$ 4,342.92</b>
SH Svc Fee				
1226-2-0400-2012				
008746	001560	BEN E. KEITH OKLAHOMA	INMATE GROCERIES	\$ 8,005.00
			<b>Total:</b>	<b>\$ 8,005.00</b>

SH Svc Fee

1226-2-3400-2005

005671	001561	JET TIRE SERVICE	TIRES & SERVICES	\$ 80.00
005675	001562	OK TIRE	TIRES & REPAIRS	\$ 40.00
007376	001563	PEPSI-COLA BOTTLING CO.	INMATE WORK CREW	\$ 458.74
007378	001564	COMDATA	FUEL	\$ 770.66
007977	001565	H20 DEPOT	WATER & COOLER RENT	\$ 176.90
008236	001566	POSITIVE PROMOTIONS INC.	BAGS	\$ 226.75
008762	001567	BEMAC SUPPLY	LIGHT PARTS	\$ 2,775.00
008801	001568	BOB BARKER COMPANY	INMATE HYGIENE SUPPLI	\$ 338.40
008835	001569	T & W TIRE	TIRES	\$ 915.60
008884	001570	KIAMICHI AUTOMOTIVE WAREHOUSE	BATTERY CABLES ETC.	\$ 497.65
008976	001571	ECOLAB INC.	DISHWASHER LEASE	\$ 97.80
008977	001572	STERICYCLE INC	SHRED SERVICE	\$ 236.70
008986	001573	U LINE	TABLES ETC	\$ 764.76
009011	001574	LOWES	BATTERY ETC	\$ 360.94
009054	001575	VIP VOICE SERVICES LLC	MONTHLY EQUIPMENT R	\$ 40.00
009148	001576	ADAMS TRUE VALUE	WEED EATER SUPPLIES	\$ 1,974.00
009149	001577	PUBLIC SERVICE CO. OF OKLAHOMA	MONTHLY SERVICE	\$ 23.13
009150	001578	WAV 11	COMPUTER REPAIRS	\$ 240.00
Total:			\$ 10,017.03	

1226-2-3400-2011

009009	001579	MCALESTER REGIONAL HEALTH CEN	INMATE MEDICAL	\$ 5,543.40
009010	001580	ASSOCIATED ANESTHESIOLOGISTS	INMATE MEDICAL	\$ 2,000.00
Total:			\$ 7,543.40	

1226-2-3400-2030

008890	001581	COMMISSARY EXPRESS	DEBIT PHONE TIME FEE	\$ 126.75
009151	001582	NCIC	INMATE PHONE TIME	\$ 2,801.18
Total:			\$ 2,927.93	

Grand Total: \$ 476,002.15

# **The Bartolomei Firm**

3710 Rawlins Street, Suite 1601  
Dallas, Texas 75219  
214-741-2662 (Phone)  
214-741-4717 (Facsimile)

March 12, 2025

**VIA EMAIL: [jimd@okacco.com](mailto:jimd@okacco.com)**

Association of County Commissioners

ATTN: Jim Dougherty

429 NE 50<sup>th</sup> St.

Oklahoma City, OK 73105

**FILED**

APR 01 2025

TIME

3:53

AM

HOPE TRAMMELL, COUNTY CLERK  
PITTSBURGH COUNTY

BY

DEPUTY

RE: A claim against Pittsburg County - District 2 County Commissioners

Dear Jim Dougherty:

This firm was retained to represent Avery Rejkowski to assert a claim against Pittsburg County - District 2 County Commissioners under the Oklahoma Tort Claim Act for damages sustained as a result of the motor vehicle accident that occurred on February 21, 2025. This letter is our notice to you of my client's claims and attempts to resolve this matter without litigation.

Attached find 1) the Oklahoma Official Collision Report, which contains a thorough description of what happened; 2) photographs of our vehicle to show the magnitude of the collision; 3) photographs of Avery's injuries, and 4) one of the bills (first of many).

My client's full name is Avery Rejkowski. Her address is 5837 Belmont Ave. Dallas, TX 75206. Avery is a full-time college freshman student at The University of Texas.

On February 21, 2025, my client was a passenger with her friend, Taylor Allen. They were traveling from Texas to The University of Arkansas to visit a friend. Ms. Allen was driving.

The police report identifies Orville E. Ford of Kiowa, Oklahoma as the driver of the red Western Star dump truck involved in this catastrophic wreck. The dump truck was owned, operated, maintained, and serviced by Pittsburgh County. This wreck happened at 1:21 p.m., and Mr. Ford was driving the dump truck while in the course and scope of his employment with Pittsburgh County. As the police report notes, "Unit 1 [the dump truck] was traveling southbound on US Highway 69 and attempted to make a left turn onto Bucker Lane. While turning, Unit 1 failed to yield to oncoming northbound traffic. As a result, Unit 2 [my client's Prius] which was traveling northbound on US Highway 69 was unable to avoid the collision and crashed into Unit 1." Now, the police report also notes the "unsafe speed-driver's ability (aged)" of Ms. Taylor as a contributing factor. And we will pursue those claims accordingly.

My client was taken by ambulance from the scene to McAlester Regional Hospital where she was then care-flighted in a helicopter to St. Francis Hospital in Tulsa. She was hospitalized in the Intensive Care Unit for five days. She suffered an abdominal tear requiring a segmental small bowel resection, two partial tears of her colon, her rectus muscle was torn on the right side of her abdomen requiring repair, a fractured right ankle, multiple fractured lumbar vertebrae, appendix removal, collapsed veins, blunt trauma to the face, etc. At St. Francis, she had surgery. Her abdomen wound/staples haven't healed and the wound has re-opened.

Considering the severity of the collision and my client's injuries, this case is worth in excess of the statutory caps under the OTCA. Therefore, we hereby demand the applicable OTCA maximum allowed as soon as possible. We intend to pursue an UnderInsured Motorist Claim; but that claim follows this initial claim with Pittsburgh County. We ask you to please address this claim fairly and expeditiously.

Please note that my clients and I do not authorize you to make any direct payment to any medical providers or possible lienholders. My client has seen medical providers which we acknowledge will be a potential beneficiary when/if a resolution is reached between my client and Pittsburgh County - District 2 County Commissioners. Any communication with a medical provider or lienholder regarding my client medical/billing information is an invasion of my client's rights to privacy and violates federal law, which includes the Health Information Portability and Accountability Act of 1996 ("HIPPA"). All medical bills for our client must be negotiated through my office. You are not authorized to negotiate with any medical providers or lienholder on my client's behalf. If you make payments to anyone other than my client and my firm, it will be our position that you made a gift to another recipient for payment unrelated to the underlying claim referenced above, as well as committed tortious interference between my client and my firm.

Acknowledgement of the representation letter is requested. Please direct all future inquiries regarding this matter to our office.

Sincerely,



Luis P. Bartolomei

[luis@thebartolomeifirm.com](mailto:luis@thebartolomeifirm.com)

ASHLAND FIRE DEPT.  
1329 S. HARPER VALLEY  
STUART, OK 74570

APRIL 9<sup>TH</sup>, 2025

TO THE PITTSBURG COUNTY COMMISSIONERS,

ASHLAND FIRE DEPARTMENT REQUEST TO REMOVE JOHN PATTY FROM RECEIVING OFFICER  
AND ADD TANYA SHORES.

ASHLAND FIRE DEPT. CHIEF

KENNY WEIHER

A handwritten signature in black ink, appearing to read "Kenny Weiher", written in a cursive style.



Russellville Area Volunteer Fire Department R.A.V.F.D.

4874 Russellville Road  
Quinton, Oklahoma 74561  
918.469.3460

27 March 2025

Hope Trammell  
Pittsburg County Clerk  
115 E. Carl Albert Parkway  
McAlester, OK 74501

Greetings

This is to inform you and any interested person that pursuant to a vote taken by the Russellville Area Volunteer Fire Department (RAVFD) Board of Directors on 10 October 2023, member Jordan Rogers is hereby designated to be a Receiving Officer in Hank Eakle's place.

The two Requisitioning Officers for RAVFD are Fire Chief, Clayton Potts and Board Treasurer, Ryan Crabtree.

Kenneth Gideon will remain as receiving agent.

Sincerely

Clayton Potts  
RAVFD Fire Chief

## BUGTUSSLE FIRE DEPT.

April 14, 2025

Hope Trammell  
Pittsburg County Clerk

We are awarding the best bid to Vicars Motorsports for the UTV. Antlers and Chaves Brothers were lower but did not follow bid specs.

Bugtussle Fire Chief

A handwritten signature in black ink, appearing to be "John Smith", written over the printed name "Bugtussle Fire Chief".

**AGREEMENT BETWEEN Pittsburg COUNTY  
BOARD OF COMMISSIONERS DISTRICT #2**

**AND THE  
OKLAHOMA DEPARTMENT OF WILDLIFE CONSERVATION**

In accordance with the provisions of 74 O.S. )( 1008 authorizing any public agency to enter into a contract with any other public agency to perform any government service, activity or undertaking which any of the contracting public agencies is authorized to perform, the following agreement for purpose of road repair, improvement and maintenance on the Gary Sherret Wildlife Management Area is hereby made between the Pittsburg County Board of Commissioners, District #2 and the Oklahoma Department of Wildlife Conservation.

The Pittsburg County Board of Commissioners agrees to:

Provide road maintenance on approximately 1 1/2 miles of public access to the Gary Sherret Wildlife Management Area by supply road gravel, providing motor grader and operator services, replacing tin horns as needed to provide adequate drainage, and cutting brush and limbs along right-of-ways. Services provided will begin July 1, 2025 and end June 30, 2026.

In consideration of the above materials, equipment and services, the Oklahoma Department of Wildlife Conservation agrees to:

Reimburse the Pittsburg County Board of Commissioners for materials, equipment and services when detailed invoice is submitted no later than June 30<sup>th</sup> annually not to exceed a maximum of \$2,500.00 annually.

It is further understood by all parties that such work shall be performed on a time available basis recognizing that first priority for the services of the County equipment and employees is reserved to public obligations within the County.

Dated this 14<sup>th</sup> day of April, 2025.

*Cynthia Haynes*  
County Commissioner - District #2  
Pittsburg County, Oklahoma

Area Biologist, Oklahoma Department of  
Wildlife Conservation





Plan Code: 2119

**AirMedCare Network Group Full Census Membership  
For Pittsburg County, OK**

**Organization:**  
**Physical Address:**

Pittsburg County, OK  
115 E Carl Albert Parkway  
McAlester, OK 74501

**Mailing Address:**  
**Contact:**  
**Phone:**  
**Email:**  
**County:**

Bobbi Hartsfield  
918-423-4934  
[payroll@pittsburg.okcounties.org](mailto:payroll@pittsburg.okcounties.org)  
Pittsburg

**Membership Sales Manager/Base:** Samantha Douglas/MT255

**Participants:**

1. The Organization is paying AirMedCare Network the fees shown below so the individuals (Participants) listed on the attached Participant List can be members of AirMedCare Network, an alliance of affiliated air ambulance providers \*(each a "Company") as provided in this Agreement.
  - o A Participant must be actively affiliated with the Organization (as a member, director, officer, employee or similar relationship) as indicated on the Participant List when the fee for such Participant is paid.
2. For annual payment plans, the Organization may later add a Participant by providing AirMedCare Network with an updated census list.

**Fees and Payment:**

No. of Participants in		Annual Rate	
Initial Group			
204	Census Slots	\$ 70.00	14280.00
	Total		\$14280.00

1. The initial number of Census Slots is based on the actual number of current active employees as of the commencement date of the Membership Plan.
2. On each anniversary the Membership Plan commencement date, the Parties shall conduct an employee census to determine the then current number of active employees.
  - If the census shows an increase in the number of active employees, then the Census Slots (for purposes of calculating the fees) will be equal to the then current number of active employees plus 50% of the employee total growth from the previous year. For example, if the employee count for the prior year was 100, and the number of employees increases by 10, then the Census Slots would equal  $115 (100 + 10 + 10 * .50 = 115)$ .
  - If the census shows a decrease in the number of active employees, then the Census Slots (for purposes of calculating the fees) will be the then current active employee count.

**General Provisions:**

1. Participant memberships will be effective upon AirMedCare Network' receipt of (a) this Agreement signed by the Organization, (b) payment as provided above and (c) monthly employee census list completed by the Participants/Company. Memberships will automatically expire for an employee at the time they are no longer employed with the company. No refunds.
2. AirMedCare Network agrees that Participant Lists (a) will be used by AirMedCare Network only for the purpose of delivering AirMedCare Network services, (b) will be treated like any other AirMedCare Network confidential information and (c) will not be used, sold or shared with any third party inconsistent with this provision.
3. This membership plan will be effective for 12 months, effective as of \_\_\_\_\_, and will be evaluated by both parties annually at least 30 days prior to anniversary date, if (a) no termination notice has been sent by either party and (b) payment for the renewal period is received by AirMedCare Network before expiration of the grace period. Either party may terminate this Agreement at any time and for any reason with 30 days prior written notice to the other party, but termination will not affect issued memberships.

Page 1 of 5



Initial *CK*



4. The Organization shall not decrease the historical air ambulance coverage benefit or reimbursement amount applicable to the Participants. Any such action will be a material breach of this Agreement and AirMedCare Network may immediately terminate this Agreement and pursue any other remedies available at law or in equity.
5. The Organization acknowledges and understands that each Participant will be subject to the Terms and Conditions attached hereto as **Exhibit A**. However, the Organization and AirMedCare Network hereby acknowledge and agree that the terms and conditions set forth in Exhibit A shall not govern or control the relationship or interpretation of this Agreement between the Organization and AirMedCare Network.

Agreed to by:

Signature

**Signature**

**Signature**

Printed Name Charlie Rogers

Printed Name

Charlie Rodgers

## Matt Muse

Printed Name

Title Chairman, BCC

Title

Chairman, Board

## Vice President of GMR Membership

Title

Organization Name Pittsburg County

Organization Name

Vithsurabunt

## Membership

Division

Date 4/14/2025

Date \_\_\_\_\_

4/14/2025

Date

## Exhibit A

### Terms and Conditions



# REACH

Initial ~~CR~~



AirMedCare Network ("AMCN") is an alliance of affiliated emergency air ambulance providers\* (each a **Provider**). Your AMCN membership automatically enrolls you as a member in each Provider's membership program. Membership ensures that you will have no out-of-pocket flight expenses if flown by a Provider by providing prepaid protection against a Provider's air ambulance costs that are not covered by any insurance, benefits, or third-party responsibility available to you, subject to the following terms and conditions:

1. Patient transport will be to the closest appropriate medical facility for medical conditions that are deemed by the AMCN Provider attending medical professionals to be life- or limb-threatening, or that could lead to permanent disability, and which require emergency air ambulance transport. A patient's medical condition, not membership status, will dictate whether or not air transportation is appropriate and required. Under all circumstances, an AMCN Provider retains the sole right and responsibility to determine whether or not a patient is flown. Emergent ground ambulance transport of a member by an AMCN Provider, in connection with an emergent air ambulance transport by a Provider, will be covered under these same terms and conditions.
2. AMCN Provider air ambulance services may not be available when requested due to factors beyond the Provider's control, such as use of the appropriate aircraft by another patient or other circumstances governed by operational requirements or restrictions including, but not limited to, equipment manufacturer limitations, governmental regulations, maintenance requirements, patient condition, age or size, or weather conditions. FAA restrictions prohibit most AMCN Provider aircraft from flying in inclement weather conditions. The primary determinant of whether to accept a flight is always the safety of the patient and medical flight crews.
3. Members who have any insurance or other benefits available to them, or third party responsibility (or liability) claims, that cover in any way the cost of ambulance services are financially liable for the cost of AMCN Provider services up to the limit of any such available coverage or recovery. In return for payment of the membership fee, the AMCN Provider will consider its air ambulance costs that are not covered by any insurance, benefits or other third-party responsibility available to the member to have been fully prepaid. "Insurance" or "benefits" means any and all types of insurance or benefits without any limitation. By way of example only, such "insurance" or "benefits" include medical benefits available under health insurance, automobile insurance, homeowners insurance, workers compensation, and government insurance or benefits programs. Further, the terms "insurance" or "benefits" include any insurance or benefits that are owned by a member (or that are written or held in a member's name), as well as any insurance or benefits owned by someone else (or that are written or held in someone else's name) that provide coverage, to any extent, for the services provided by the AMCN Provider to a member. "Third-party responsibility" means any amounts that any third-party is required to pay to a member because of or related to the AMCN Provider's services rendered to the member. The AMCN Provider reserves the right to seek payment directly from any available insurance, benefits provider, or third party for services rendered to a member (to the same extent it could do so for any non-member patient), and members authorize all available insurers, benefits providers, and responsible third parties to pay any covered amounts directly to the AMCN Provider.
4. Members agree to remit to the AMCN Provider any payment received from any insurance, benefit providers, or any third party for any services provided by the AMCN Provider, not to exceed the amount charged by the AMCN Provider, including (but not limited to) instances in which payment for an AMCN Provider's services is made via settlement with any insurers, benefit providers, or third parties found responsible for a member's injury or condition leading to the air medical services provided by the AMCN Provider. Remitting such payments are not member out-of-pocket expenses because such payments originated from third parties only because of the air medical services provided to the member. Failure by a member to remit such payments constitutes a material breach of these terms and conditions and authorizes the Provider to seek full payment for its services from the member.



5. Neither the Providers nor AMCN is an insurance company. Membership is not an insurance policy and cannot be considered as a secondary insurance coverage or a supplement to any insurance coverage. **Neither the Providers nor AMCN will be responsible for payment for services provided by another ambulance service.**
6. Membership starts 15 days after AMCN receives a complete application with full payment; however, the waiting period will be waived for unforeseen events occurring during such time. Members must be natural persons. Memberships are non-refundable and non-transferable.
7. Some state laws prohibit Medicaid beneficiaries from being offered membership or being accepted into membership programs. By applying, members certify to the Providers that they are not Medicaid beneficiaries.
8. **LIMITATION OF LIABILITY.** THE LIABILITY OF AMCN AND THE PROVIDERS, AND THE DAMAGES AVAILABLE TO A MEMBER, FOR BREACH OF THESE TERMS AND CONDITIONS IS LIMITED TO ACTUAL DAMAGES IN AN AMOUNT NOT TO EXCEED (A) ANY AMOUNT ACTUALLY RECEIVED BY AMCN OR ANY PROVIDER IN VIOLATION OF THESE TERMS AND CONDITIONS AND (B) THE MEMBERSHIP FEE PAID BY THE MEMBER FOR THE APPLICABLE MEMBERSHIP TERM. IN NO EVENT SHALL AMCN OR ANY PROVIDER BE LIABLE TO A MEMBER UNDER THESE TERMS AND CONDITIONS PURSUANT TO ANY CONTRACT, NEGLIGENCE, STRICT LIABILITY, TORT, OR OTHER LEGAL OR EQUITABLE THEORY FOR ANY INCIDENTAL, SPECIAL OR CONSEQUENTIAL DAMAGES OF ANY NATURE WHATSOEVER, ARISING OUT OF OR IN CONNECTION WITH THE MEMBERSHIP PROGRAM OR THESE TERMS AND CONDITIONS, EVEN IF AMCN OR A PROVIDER HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. THE MEMBER ACKNOWLEDGES AND AGREES THAT THE LIMITATIONS OF LIABILITY SET FORTH IN THESE TERMS AND CONDITIONS REFLECT AN ALLOCATION OF RISK SET FORTH IN THESE TERMS AND CONDITIONS AND THAT, IN THE ABSENCE OF SUCH LIMITATIONS, THESE TERMS AND CONDITIONS WOULD BE SUBSTANTIALLY DIFFERENT.

9. Any and all matters arising out of or relating to the AMCN membership program, these terms and conditions, and/or the subject matter hereof shall be governed by, construed, and enforced in accordance with the laws of the United States of America (including without limitation, the Federal Arbitration Act) and, to the extent not preempted by Federal law, the laws of the State of Missouri without regard to conflicts or choice of law principles, regardless of the legal theory upon which such matter is asserted. Outside of these terms and conditions, Federal law preempts state and local laws, regulations, and other provisions, including common law duties that relate to rates, routes, or services of an air carrier. To the extent a state or political subdivision thereof makes the incorporation of common law duties or state law in contracts optional, the Providers and you agree that this contract does not incorporate any such common law duties or state laws.

10. **ARBITRATION AGREEMENT.** Any controversy or claim arising out of or relating to the AMCN membership program, these terms and conditions, and/or the subject matter hereof shall be resolved by binding arbitration by a single arbitrator pursuant to the Consumer Arbitration Rules of the American Arbitration Association ("Rules"), as modified by these terms and conditions. The place of arbitration will be St. Louis, Missouri. The judgment on any award rendered by the arbitrator may be entered in any court having jurisdiction thereof. **THERE SHALL BE NO RIGHT OR AUTHORITY FOR ANY CLAIMS TO BE ARBITRATED ON A CLASS ACTION, JOINT OR CONSOLIDATED BASIS OR ON BASES INVOLVING CLAIMS BROUGHT IN A PURPORTED REPRESENTATIVE CAPACITY ON BEHALF OF OTHER MEMBERS OR OTHER PERSONS. THE ARBITRATOR MAY AWARD RELIEF ONLY IN FAVOR OF THE INDIVIDUAL PARTY SEEKING RELIEF AND ONLY TO THE EXTENT NECESSARY TO PROVIDE RELIEF WARRANTED BY THAT INDIVIDUAL PARTY'S CLAIM.** The arbitrator is not authorized to award attorney's fees and costs or equitable relief. In the event the prohibition on class arbitration or any other provision in this arbitration agreement is deemed invalid or unenforceable, then the remaining provisions of these



terms and conditions will remain in full force and effect. In the event of any dispute between the parties, you agree to first contact the Provider or AMCN and make a good faith effort to resolve the dispute before resorting to arbitration under these terms and conditions.

11. These terms and conditions supersede all previous terms and conditions between a member and the Providers or AMCN, including any other writings, or verbal representations, relating to the terms and conditions of membership. These terms and conditions may be modified or amended only in writing signed by the President or a Vice President of AMCN or a Provider, and may not be modified or amended orally, by trade usage or by course of conduct or dealing.

\*Air Evac EMS, Inc. / Guardian Flight, LLC / Med-Trans Corporation / REACH Air Medical Services, LLC -- These terms and conditions apply to all AMCN participating provider membership programs, regardless of which participating provider transports you.



RESOLUTION  
25-252

The Board of County Commissioners of Pittsburg County met in regular session on Monday, April 14, 2025.

WHEREAS, On March 31, 2025, the Board of County Commissioners received a letter from the Southeast Oklahoma Library System regarding the resignation of Robin Woodley from the board since she had been appointed to fill another seat with another board that would void her ability to sit on both boards.

WHEREAS, On March 31, 2025, the Board of County Commissioners noted Ms. Woodley's resignation and recorded in the minutes their gratefulness for her serving on the Southeast Oklahoma Library Board as one of their appointees.

WHEREAS, the Board of County Commissioners of Pittsburg County wish to appoint Ross Eaton to fill Ms. Woodley's unexpired term. Mr. Eaton has expressed his willingness to serve and this Board has every confidence of Mr. Eaton's ability to serve the citizens of Pittsburg County. We feel that his knowledge, experience and community involvement will be a benefit to the Board of Trustees.

THEREFORE, BE IT RESOLVED, the Board of County Commissioners of Pittsburg County, do hereby appoint Ross Eaton to the Southeast Oklahoma Library Board to fill the unexpired term of Robin Woodley. Effective Immediately.

BOARD OF COUNTY COMMISSIONERS  
PITTSBURG COUNTY, OKLAHOMA

CHAIRMAN



VICE-CHAIRMAN



MEMBER



ATTEST:



COUNTY CLERK



## CERTIFICATION OF LIBRARY BOARD APPOINTMENT

This is to certify to the Oklahoma Department of Libraries that the following person has been appointed by the **Pittsburg County Board of Commissioners** to the Southeast Oklahoma Library System Board of Trustees in accordance with the provisions of the Oklahoma Library Code, State of Oklahoma.

NAME: **Ross Eaton**

ADDRESS: **1509 Park Dr**

**McAlester, OK 74501**

**Ross Eaton** has been appointed to serve a replacement term as provided for in the Oklahoma Library Code. That term being: **July 1, 2023 through June 30, 2026.**

Executed the 14<sup>th</sup> day of April, 2025

PITTSBURG COUNTY BOARD OF COUNTY COMMISSIONERS

*[Signature]* Chairman  
*[Signature]* Member  
*[Signature]* Member

Attest:

*[Signature]*  
County Clerk

(Seal)



RESOLUTION  
25-253

The Board of County Commissioners of Pittsburg County met in regular session on Monday, April 14, 2025.

WHEREAS, the Board of County Commissioners approve the following safety programs that were mentioned in the safety manual at its approval but not provided:

AERIAL LIFT/BUCKET TRUCK  
CONFINED SPACE ENTRY  
FALL PROTECTION  
HEARING CONSERVATION  
HEAVY EQUIPMENT SAFETY  
LOCKOUT/TAGOUT  
RESPIRATORY PROTECTION  
SAFE DRIVING/VEHICLE  
SCAFFOLDING  
TEMPERATURE EXTREMES  
TRENCHING AND EXCAVATION

WHEREAS, these safety programs should help provide additional safety requirements and standards for all county employees to which they may apply.

THEREFORE, BE IT RESOLVED, the Board of County Commissioners of Pittsburg County do hereby approve the above-mentioned safety programs, to be added to the current county safety manual, effective immediately.

BOARD OF COUNTY COMMISSIONERS  
PITTSBURG COUNTY, OKLAHOMA

CHAIRMAN



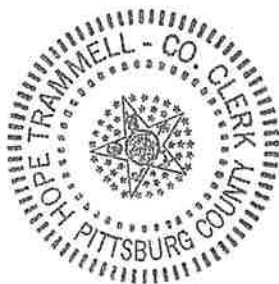
VICE-CHAIRMAN



MEMBER



ATTEST:



COUNTY CLERK





# Aerial lift/bucket truck safety program

## ***Pittsburg County***

### **Aerial and scissor lift program**

#### **Purpose**

The purpose of this program is to ensure that all activities requiring the use of aerial and scissor lifts are conducted in a safe manner to minimize the risk to personnel and facilities.

#### **Determination of needs**

The use of aerial equipment places company personnel at risk of falls from height, crushing injuries and electrical contact. Aerial lifts are considered any of the following: vehicle-mounted aerial devices to elevate personnel to work areas not accessible from the ground; extendible boom platforms, aerial ladders, articulating booms, vertical towers, and a combination of any such devices.

For purposes of this program, scissor lifts will be included in the practices and procedures contained in this program.

#### **Assignment of responsibilities**

##### **Management**

Pittsburg County has expressly authorized ***Denton Cossey*** the authority to halt any operation of aerial equipment where there is danger of serious personal injury.

***Denton*** will ensure that the requirements of this program for aerial equipment will be adhered to by all company personnel. ***Denton*** is responsible for addressing employee training and authorization, safety requirements, new purchase criteria, maintenance, and general operation of aerial equipment. In addition, he/she will develop written detailed instructions covering each of the basic elements in this program, and is the sole person authorized to amend these instructions.

As applicable, this program will be extended to include platform lift trucks, scissor lifts, and other specialized aerial equipment used by the company.

##### **Employees**

It is the responsibility of all employees to:

1. Understand and adhere to the procedures outlined in this program and recognize that failure to do so will result in disciplinary actions up to and including termination.
2. Bring to management's attention any unsafe or hazardous conditions or practices that may cause injury to either themselves or any other employees; and

3. Report any incident that causes injury to an employee, regardless of the nature or severity of the injury.

Employees must follow all safety procedures when operating an aerial or scissor lift device to include the following:

1. Appropriate fall protection will be in use. A harness will be worn, and a lanyard attached to the boom or basket when working from an aerial lift.
2. Employees will always stand firmly on the floor of the basket/platform and shall not sit or climb on the edge of the basket or railing, or use planks, ladders, or other devices for a work position.
3. The insulated portion of an aerial lift shall not be altered in any manner that might reduce its insulating value.

### **Equipment Operation**

The lift will not be moved when the boom is elevated in a working position except for those specifically designed to do so.

Lift controls and alarms will be tested daily prior to operating the boom and any equipment problems resolved or the equipment will be taken out of service.

The manufacturer's boom and basket maximum intended loads will not be exceeded. Loads of material exceeding the allowable limits will be either broken down in weight or moved by other appropriately rated equipment.

Outriggers will be properly positioned on pads or solid ground prior to equipment use. Questionable soil or foundation conditions will be resolved prior to the equipment being used.

Brakes will be properly set anytime outriggers are used. Wheel chocks will be in place before the lift is used when working on an incline or other site condition where possible lift movement is possible.

The area beneath operating aerial lifts will be marked off and access to that area will be restricted using barricades and signs.

### **Pre-operational procedures**

Before use on each work shift, the operator of an aerial work platform will conduct a visual inspection of the aerial lift to check for defects that would affect its safe operation and use. The inspection shall consist of not less than both of the following procedures:

Visual inspection for all the following:

1. Cracked welds
2. Bent or broken structural members
3. Hydraulic or fuel leaks
4. Damaged controls and cables
5. Loose wires
6. Tire condition
7. Fuel and hydraulic fluid levels
8. Slippery conditions on the platform

Operate all platform and ground controls to ensure they perform their intended functions.

Before the aerial work platform is used and during use, the operator will inspect for all the following:

1. Ditches
2. Drop-offs
3. Holes
4. Bumps and floor obstructions
5. Debris
6. Overhead obstructions
7. Power lines
8. Area around the aerial work platform to assure clearance for the platform and other parts of the unit

Any unsafe item found because of the inspection of the aerial work platform or work area will be corrected before further use of the aerial work platform.

### **Minimum Clearance for Live Wire Electricity**

Any overhead wire shall be considered energized line until the owner of the line, or their authorized representative ensures that it is de-energized.

For lines rated 50kV or below, minimum clearance between the lines and any part of the crane or load shall be 10 feet. For lines rated over 50 kV, minimum clearance between the lines and any part of the crane or load shall be 10 feet plus 0.4 inch for each 1 kV over 50 kV, or twice the length of the line insulator, but never less than 10 feet.

***Pittsburg County***  
**Aerial and scissor lift program acknowledgement**

I, \_\_\_\_\_ have received training on the proper assessment, selection, and use of aerial and scissor lifts. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

# Confined space entry

# ***Pittsburg County***

## **Confined space entry program**

### **Purpose**

The purpose of this program is to provide specific procedures/safe work practices for employees required to enter confined spaces. The Confined Space Entry Program is designed to provide our employees with appropriate protection from injury/illness due to the hazards associated with the confined spaces that may be encountered as a part of your job assignments.

The type and level of entry will be dependent on the specific hazards to be controlled at each job site. Once defined and unless otherwise specifically instructed otherwise, all company employees will follow proper Confined Space Entry procedures in accordance with their training and instruction. Failure to properly adhere to these procedures is grounds for disciplinary actions up to and including termination.

### **Responsibility**

#### **Management:**

1. Develop and endorse the written plan
2. Delegate sufficient authority to the respective department heads involved to effectively implement the plan
3. Develop company policies that will assure that all confined space entries are performed in compliance with the written program and all applicable regulations
4. Develop internal policies that will assure that all required records are maintained
5. Provide the necessary resources required to effectively implement the plan

#### **Supervisors:**

1. Designate an individual(s) to serve as authorized individual(s) to perform the required monitoring and to issue entry permits
2. Assure that the authorized individual(s) receive all the necessary training to effectively discharge their duties
3. Assure that all individuals who enter confined spaces receive the required training
4. Assure that all necessary equipment and supplies to effectively protect the health and safety of the workers are provided and maintained in a good state of repair
5. Department heads, or designated employees, shall be responsible for ensuring that the confined spaces under their control have been posted

#### **Employee:**

1. Actively participate in all training programs offered
2. Fully abide by all work rules and apply safety and health precautions specified within
3. Report any problems that are observed, which could compromise the health and safety of yourself or co-workers to your immediate supervisor

## **Determination of Needs**

### **Confined space hazards**

Types of confined spaces:

1. Those of such design that restrict the movement of air in such a manner that proper ventilation may be inadequate
2. Enclosed areas with very limited openings for employee entry and exit
3. Other hazards may also develop due to the nature of the work being involved or by a residue remaining in the space
4. Confined spaces may contain an engulfment or entrapment hazard

### **Hazardous atmospheres**

Flammable atmosphere:

1. A flammable atmosphere generally arises from an enriched oxygen atmosphere, vaporization of a flammable liquid, chemical reaction, a by-product of work, heavy concentrations of combustible dust, and even desorption (release of entrapped substances) of materials/chemicals from the inner linings of confined spaces.
2. An atmosphere becomes flammable when the ratio of oxygen to combustible material in the air is neither too rich nor too lean for combustion to occur.
3. Combustible dust concentrations are usually found during loading, unloading, or conveying coal, grain, fertilizers or other combustible materials. The explosion occurs when an ignition source such as static electricity spark, or open flame ignites the combustible mixtures present in the air.

Toxic atmospheres:

Toxic atmospheres can be created from almost any gas, vapor, or airborne dust. Examples of the source of these substances include:

1. The manufacturing process itself.
2. The product being stored.
3. The operation being performed in the confined space (e.g. welding or brazing certain metals).
4. Leakage of lines within the space.
5. Leakage of substances into the space from the outside.

Oxygen-deficient or oxygen-enriched atmosphere:

An oxygen-deficient atmosphere is caused when the oxygen (O<sub>2</sub>) level of an atmosphere goes below 19.5% by either consumption or displacement. Oxygen deficient atmospheres may result in loss of consciousness, brain damage and possible death.



An oxygen-enriched atmosphere contains greater than 23.5% oxygen. The primary hazard associated with an oxygen-enriched atmosphere is fire as combustible materials burn much faster in the presence of an oxygen-enriched environment including some materials which are generally not considered fire hazards, but will burn rapidly when the oxygen concentration is increased.

## **General safety**

### **1. Mechanical**

If the activation of any electrical or mechanical equipment could cause injury to persons in a confined space, each piece of equipment shall be manually isolated and inactivated (Lockout/Tagout) before employees can enter a confined space. All pipes shall be physically disconnected, or isolation blanks bolted in place. Some tanks or vessels must also be blanked off and inerted to prevent a build-up of flammable vapors.

### **2. Communications for permit-required confined spaces**

Communication between the entry employee(s) and personnel outside is critical to a safe operation. If an employee is rendered unconscious or suddenly feels distressed, an injury may quickly become a fatality without proper communication. Communications will include visual monitoring whenever possible, otherwise communication by means of an electronic communication system will be necessary.

### **3. Entry and exit**

The extent of required precautions standby equipment needed to maintain a safe work area will be determined by the means of access and rescue. The following should be considered for every entry situation:

1. Type of confined space to be entered
2. Access to the entrance
3. Number and size of openings
4. Barriers within the space
5. Occupancy load
6. Time required to exit confined space

### **4. Trained and authorized attendants and entrants**

Trained and authorized attendants and entrants are responsible for working in and around confined spaces according to established company guidelines and work practices. Authorized entrants are also responsible for refusing to work in confined spaces until an entry supervisor has deemed entry to be safe and has given approval for entry, or if a hazard is identified while working in the confined space. The authorized attendants shall attend only one confined space entry at any one time and shall not perform any other duties. A list of Authorized Entrants and Attendants are in Appendix B

## Physical effects

### Thermal effects

When working in confined spaces, certain considerations must be taken to prevent conditions such as frostbite, hypothermia (excessive body heat loss), and heat stress. The use of protective clothing for both hot and cold environments will add additional bulk to the employee and must be considered in allowing for movement in the confined space and for exit time in emergencies. The company's Temperature Extremes Program will be reviewed and followed as applicable to each situation.

### Noise

Noise exposures may be intensified in a confined space due to the type of construction and venting of the space. Hearing protection will be worn when the noise level exceeds 85 decibels.

### General

Some physical hazards cannot be eliminated due to the nature of a confined space or the work to be performed such as the use of scaffolding, the presence of surface residues (slip/fall risks), and other structural hazards. In recognition of these additional hazards, careful consideration will be made to the relationship between the internal structure, the exit, and the worker.

## Training

Only trained and authorized employees will be involved in any confined space entry operations. Employee training will include:

1. Potential dangers of confined space work
2. Emergency exit procedures
3. Use of respirators
4. First aid and cardio-pulmonary resuscitation
5. Lockout and tagging procedures
6. Fire protection
7. Effective communication
8. Air Quality monitoring
9. Ventilation procedures

Training employees in permitting requirements will be performed by **(Insert name/position)** who is qualified or otherwise knowledgeable in all relevant aspects of confined space entry procedures. This qualified individual will be proficient in the following areas:

1. Types of confined spaces that employees will be entering
2. Chemical and physical hazards
3. Work practices and techniques
4. Testing requirements, permissible exposure limits, etc.
5. Safety equipment such as respirators, protective clothing, and other protection

- such as helmets and shields
- 6. Rescue procedures
- 7. Knowledge of applicable federal, state, and local regulations
- 8. Evaluation and test methods

The effectiveness of the training program will be determined by the observation of safe work practices and testing of the affected employee for knowledge of the operations and hazards.

#### Training frequency

Confined Space training will occur before initial assignment to jobs that would required entry into confined spaces; when there is a change in assigned duties; when a change in permit space operations create a new hazard; whenever an employee deviates from established procedure; and when inadequacies in an employee's knowledge is identified.

#### Training Content:

The training programs established for **(Insert company name)** include:

1. Confined space identification
2. Identification and evaluation of permit space hazards
3. Proper gas meter operation
4. Safe entry techniques
5. Attendant and entrant responsibilities
6. Communication techniques
7. Rescue procedures
8. Ventilation techniques
9. Supervisory responsibilities
10. Permit completion/cancellation techniques
11. Location of permit spaces

#### **Confined space identification and warning**

All permit-required confined spaces will be identified and posted with the appropriate signage to discourage the entry of unauthorized individuals. Where possible, they will be secured to prevent unauthorized entry.

#### **Permit retention and record keeping**

The following records will be maintained:

1. Training information to include the date, location, instructor, content of course, name, and signature of each trainee will be retained for 3 years of the initial training date. See Appendix C.
2. Written permits and pre-entry check lists will be retained for 3 years as of the entry completion.

3. Equipment calibration and maintenance logs will be retained for 3 years as of the log completion date. See Appendix E.

## **Equipment**

**(Insert name/position)** will provide and maintain two multi-channel gas detectors for use by entry personnel. These units will be calibrated before and rechecked after each use.

## **Confined space locations**

An inspection was conducted and all areas that contain potential confined spaces were assessed, labeled and listed in Appendix B.

## **Entry permits**

Some confined space entry will require an Entry Permit. The entry supervisor shall prepare an entry permit and post the permit outside of the permit space entry portal and remain there for the duration of the authorized entry. Any changes of personnel (supervisors, attendants, entrants), or testing and monitoring data shall be added to the permit. At the end of the authorized entry or after entry operations have been completed, the entry supervisor shall cancel the permit and maintain all cancelled permits for at least one year. A new and updated permit shall be developed, implemented, and maintained for each permit space entry. See Appendix A.

## **Entry procedures**

Site specific entry procedures have been developed for each confined space entered by trained and authorized company employees. The site-specific entry procedures are in Appendix A.

## **Review of Entry Operations and Procedures**

All entry operations, procedures, and cancelled entry permits will be reviewed at least annually. Additionally, a review shall be conducted if there is reason to believe that the measures taken under the company's permit space program may not provide affected employees with the necessary protection. The review and revisions shall correct any deficiencies found to exist under the prior entry operations and procedures.

Circumstances that may require the review of the permit space program are listed below:

1. Unauthorized entry of a permit space
2. A detection of a permit space hazard not covered by the permit
3. The detection of a condition prohibited by the permit
4. The occurrence of an injury, or a near-miss during entry operations
5. The change in the use or configuration of a permit space; and
6. Employee complaints about the ineffectiveness of the permit space program

## **Rescue procedures**

A rescue plan will be developed for each type of permit-required confined space. Whenever feasible, the rescue plan will specify methods that do not involve entry by rescuers into the confined space. The attendant and/or the Entry Supervisor are responsible for preventing unauthorized persons in attempting a rescue inside the confined space.

All necessary rescue equipment to effectively conduct the rescue will be provided and in proper working condition prior to entry into the space.

Prior to a decision to use an off-site service to provide rescue, verification shall be made that the off-site rescue services comply with all company entry/rescue requirements.

## Appendix A: Sample Confined Space Entry Permit Checklist

### General

<b>Location of work:</b>
<b>Description of work to be performed:</b>

### Control measures

<b>Isolation</b>		
Space needs to be isolated from:		
Isolation method		
Water/gas/steam/chemicals		
Mechanical/electrical drives		
Auto fire extinguishing systems		
Hydraulic/electric/gas/power		
Sludge/deposits/wastes		
Locks and/or tags have been affixed to isolation points	Yes	No

<b>Atmosphere</b>		
The atmosphere in the confined space has been tested:		
<b>Result of test</b>		
Oxygen	% LEL	
Flammable gases	% LEL	
Other gases	% LEL	
Other atmospheric contaminants:		
The conditions for entry are as marked below:		
1 With supplied air breathing apparatus	Yes	No
2. Without respiratory protection	Yes	No
3. With escape unit	Yes	No
<b>Hot work</b>		
Area clear of all combustibles including atmosphere	Yes	No
Type of appropriate fire prevention equipment available:		
Suitable access and exit	Yes	No
Hot work is permitted	Yes	No

**Personal protective equipment**

The following safety equipment shall be worn:

**Type**

Respiratory protection	Yes	No
Harness/lifelines	Yes	No
Eye protection	Yes	No
Hand protection	Yes	No
Footwear	Yes	No
Protective clothing	Yes	No
Hearing protection	Yes	No
Safety helmet	Yes	No
Communication equipment	Yes	No

Other

**Other precautions**

Warning notices/barricades	Yes	No
Smoking forbidden	Yes	No
All persons have been trained	Yes	No

Ventilation requirements

**Emergency response procedures**

--

**Procedures/Equipment required**

--

**Stand-by personnel requirements:**

--

**Authority to enter**

The control measures and precautions appropriate for the safe entry and execution of the work in the confined space have been implemented and persons required to work in the confined space have been advised of and understand the requirements of this written authority.

Signed (person in direct control):	
Date:	Time:
This written authority is valid until:	
Date:	Time:

**Persons authorized to enter confined space**

I have been advised of and understand the control measures and precautions to be observed with the entry and work in the confined space.					
Entry			Exit		
Name	Date	Time	Name	Date	Time

**Withdrawal of written authority**

All persons and equipment accounted for	Yes	No <input type="checkbox"/>
Equipment checked and restored correctly	Yes	No
Signed (person in direct control):		
Date:	Time:	
Remarks or comments about the work		



## Appendix B: Confined space locations

[illegible]

## Appendix C: Employee training log

[illegible]

**Appendix D: Trained and authorized attendants and entrants**

Name	Title

## Appendix C: Equipment maintenance and calibration log

[illegible]

***Pittsburg County***  
**Confined Space program training acknowledgement**

I, \_\_\_\_\_ have received training on the proper use of heavy equipment. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

# Fall protection program

## ***Pittsburg County***

### **Fall protection program**

#### **Purpose**

The fall protective equipment program is designed to provide our employees with appropriate protection from injury when working at heights thereby preventing fall related injury.

Fall protection will be provided to affected employees "free of charge" with the expectation that the employee will maintain the equipment in an appropriate manner and report immediately to their supervisor as to any damage or excessive wear.

The type and level of employee protection will be dependent on the specific hazards to be controlled at each job site. The levels and type of protection may vary, but once assigned and unless otherwise specifically instructed otherwise, all affected employees will wear the assigned equipment and or adhere to related safety procedure. Failure to properly wear and/or maintain company issued fall protective equipment is grounds for disciplinary actions up to and including termination.

#### **Assignment of responsibility**

Management is responsible for providing fall protection equipment to affected employees, and to ensure that all employees understand and adhere to the procedures of this program.

***Denton Cossey*** is responsible for the implementation and continued application of this program. They are responsible for the following:

- Performing routine safety checks of work operations
- Enforcing fall protection policy and procedures
- Correcting any unsafe practices or conditions immediately
- Training employees and supervisors in recognizing fall hazards and the use of fall protection systems
- Maintaining records of employee training, equipment issued, and fall protection systems used at company jobsites
- Investigating and documenting all fall related incidents that result in employee injury

#### **Employees**

It is the responsibility of all employees to:

- Understand and adhere to the procedures outlined in this fall protection program
- Bring to management's attention any unsafe or hazardous conditions or practices that may cause injury to either themselves or any other employees
- Report any incident that causes injury to an employee, regardless of the nature of the injury

## **Determination of needs**

Unless otherwise specified, **(Insert name)** will evaluate the worksite(s) and determine the specific type(s) of fall protection to be used in the following situations.

### **Hoisting operations**

Guardrail systems or personal fall arrest systems will be used in hoist areas when an employee may fall six (6) feet or more. If guardrail systems must be removed for hoisting, employees are required to use personal fall arrest systems.

### **Holes and other openings**

Covers or guardrail systems will be erected around holes (including skylights) that are six (6) feet or more above lower levels. If covers or guardrail systems must be removed, employees are required to use personal fall arrest systems.

### **Leading edges**

Guardrail systems, safety net systems, or personal fall arrest systems will be used when employees are constructing a leading edge that is six (6) feet or more above lower levels. An "Alternative Fall Protection Plan" will be used if **(Insert name)** determines that the implementation of conventional fall protection systems is infeasible or creates a greater hazard to employees. All alternative Fall Protection Plans for work on leading edges will:

- Be written specific to the jobsite needs
- Include explanation of how conventional fall protection is infeasible or creates a greater hazard to employees
- Explain what alternative fall protection will be used for each task
- Be maintained in writing at the jobsite by **(Insert name)**

### **Openings**

Guardrail systems, safety net systems, or a personal fall arrest system will be provided to employees working on, at, above, or near wall openings when the outside bottom edge of the wall opening is six (6) feet or more above lower levels and the inside bottom edge of the wall opening is less than 39 inches above the walking/working surface.

### **Ramps, runways and other walkways**

Employees using ramps, runways and other walkways six (6) feet or more above the lower level will be protected by guardrail systems.

### **Controlled Access Zones**

Workers are prohibited from entering controlled access zones. Controlled access zones will be defined by control lines consisting of ropes, wires, tapes or equivalent material, with supporting stanchions, and will be:

- Flagged with a high-visibility material at six (6) foot intervals
- Rigged and supported so that the line is between 30 and 50 inches (including sag) from the walking/working surface
- Strong enough to sustain stress of at least 200 pounds



- Extended along the entire length of an unprotected or leading edge
- Parallel to the unprotected or leading edge
- Connected on each side to a guardrail system or wall
- Erected between six (6) feet and 25 feet from an unprotected edge, except in the following cases:
  1. When working with precast concrete members: between six (6) feet and 60 feet from the leading edge, or half the length of the member being erected, whichever is less
  2. When performing overhand bricking or related work: between ten (10) feet and 15 feet from the working edge.

## **Excavations**

Fall protection will be provided to employees working at the edge of an excavation that is six (6) feet or deeper. Employees in these areas are required to use the fall protection systems as designated in this program.

- Excavations that are six (6) feet or deeper will be protected by guardrail systems, fences, barricades or covers.
- Walkways that allow employees to cross over an excavation that is six (6) feet or deeper will be equipped with guardrails.

## **Training**

All employees who may be exposed to fall hazards will receive fall protection training within 24 hours or prior to their working in any situation placing them at risk of a fall related injury.

***Your department safety coordinator*** will maintain a record of those employees who have received training and their training dates.

Training of employees will include:

- Nature of the fall hazards employees may be exposed to
- Correct procedures for erecting, maintaining, disassembling, and inspecting fall protection systems
- Use and operation of controlled access zones, guardrails, personal fall arrest systems, safety nets, warning lines, and safety monitoring systems
- Role of each employee in the safety monitoring system (if one is used)
- Limitations of the use of mechanical equipment during roofing work on low-slope roofs (if applicable)
- Correct procedures for equipment and materials handling, and storage and erection of overhead protection
- Company specific requirements for reporting incidents that causes injury to an employee

## Fall protection systems

### Covers

- All covers will be secured to prevent accidental displacement.
- Covers will be color-coded or bear the markings "HOLE" or "COVER".
- Covers will be able to support twice the weight of employees, equipment, and materials that might cross them.

### Guardrail Systems

Guardrail systems will be erected at unprotected edges, ramps, runways, or holes where it is determined by **Pittsburg County** that erecting such systems will not cause an increased hazard to employees. The following specifications will be followed in the erection of guardrail systems. Top rails will be:

- At least ¼ inch in diameter (steel or plastic banding is unacceptable)
- Flagged every six (6) feet or less with a high visibility material if wire rope is used
- Inspected by a competent person as frequently as necessary to ensure strength and stability
- Forty-two (42) inches (plus or minus three (3) inches) above the walking/working level
- Adjusted to accommodate the height of stilts if they are in use

Midrails, screens, mesh, intermediate vertical members, and solid panels will be erected in accordance with this program.

Gates or removable guardrail sections will be placed across openings of hoisting areas or holes when they are not in use to prevent access.

### Personal Fall Arrest Systems

Personal fall arrest systems will be issued to and used by employees and may consist of anchorage, connectors, body harness, deceleration device, lifeline, or suitable combinations.

Personal fall arrest systems will:

- Limit the maximum arresting force to 1800 pounds
- Be rigged so an employee cannot free fall more than six (6) feet or contact any lower level
- Bring an employee to a complete stop and limit the maximum deceleration distance traveled to three and a half (3 ½) feet
- Be strong enough to withstand twice the potential impact energy of an employee free falling six (6) feet (or the free fall distance permitted by the system, whichever is less)
- Be inspected prior to each use for damage and deterioration
- Be removed from service if any damaged components are detected

All components of a fall arrest system will meet the specifications of this program and will be used in accordance with the manufacturer's instructions.

The use of non-locking snap hooks is prohibited.

Dee-rings and locking snap hooks will:

- Have a minimum tensile strength of 5000 pounds
- Be proof tested to a minimum tensile load of 3600 pounds without cracking, breaking, or suffering permanent deformation.

Lifelines will be:

- Designed, installed, and used under the supervision of *(Insert name)*
- Protected against cuts and abrasions
- Equipped with horizontal lifeline connection devices capable of locking in both directions on the lifeline when used on suspended scaffolds or similar work platforms that have horizontal lifelines that may become vertical lifelines.

Self-retracting lifelines and lanyards must have ropes and straps (webbing) made of synthetic fibers, and will:

- Sustain a minimum tensile load of 3600 pounds if they automatically limit free fall distance to two (2) feet or
- Sustain a minimum tensile load of 5000 pounds (includes rip stitch, tearing, and deforming lanyards)

Anchorage must support at least 5000 pounds per person attached and will be:

- Designed, installed, and used under the supervision of *your department's supervisor*
- Capable of supporting twice the weight expected to be imposed on it
- Independent of any anchorage used to support or suspend platforms

#### **Positioning device systems**

Body belt or body harness systems will be set up so that an employee can free fall no farther than two (2) feet, and will be secured to an anchorage capable of supporting twice the potential impact load or 3000 pounds, whichever is greater. Requirements for snaphooks, dee-rings, and other connectors are the same as detailed in this program.

#### **Safety monitoring systems**

In situations when no other fall protection has been implemented, *your department's supervisor* will monitor the safety of employees in these work areas. They will be:

- Competent in the recognition of fall hazards
- Capable of warning workers of fall hazard dangers
- Operating on the same walking/working surfaces as the employees and able to see them
- Close enough to work operations to communicate orally with employees
- Free of other job duties that might distract them from the monitoring function

No employees other than those engaged in the work being performed under the safety monitoring system will be allowed in the area. All employees under a safety monitoring system are required to promptly comply with the fall hazard warnings of the competent person.

### **Safety Net Systems**

- Safety net systems must be installed no more than 30 feet below the walking/working surface with sufficient clearance to prevent contact with the surface below and will be installed with sufficient vertical and horizontal distances.
- All nets will be inspected at least once a week for wear, damage, or deterioration and any defective nets will be removed from use and replaced with acceptable nets.
- When nets are used on bridges, the potential fall area from the walking/working surface will remain unobstructed.
- Objects that have fallen into safety nets will be removed as soon as possible and at least before the next working shift.

### **Warning Line Systems**

Warning line systems consisting of supporting stanchions and ropes, wires, or chains will be erected around all sides of roof work areas.

- Lines will be flagged at no more than six (6) foot intervals with high-visibility materials.
- The lowest point of the line (including sag) will be between 34 and 39 inches from the walking/working surface.
- Stanchions of warning line systems will be capable of resisting at least 16 pounds of force.
- Ropes, wires, or chains must have a minimum tensile strength of 500 pounds.
- Warning line systems will be erected at least six (6) feet from the edge, except in areas where mechanical equipment is in use. When mechanical equipment is in use, warning line systems will be erected at least six (6) feet from the parallel edge, and at least ten (10) feet from the perpendicular edge.

### **Protection from falling objects**

When guardrail systems are in use, the openings will be small enough to prevent potential passage of falling objects. The following procedures must be followed by all employees to prevent hazards associated with falling objects.

- No materials (except masonry and mortar) will be stored within four (4) feet of working edges.
- Excess debris will be removed regularly to keep work areas clear.
- During roofing work, materials and equipment will be stored no less than six (6) feet from the roof edge unless guardrails are erected at the edge.
- Stacked materials must be stable and self-supporting.
- Canopies will be strong enough to prevent penetration by falling objects.
- Toe boards erected along the edges of overhead walking/working surfaces will be:
  - Capable of withstanding a force of at least 50 pounds
  - Solid with a minimum of three and a half (3 ½) inches tall and no more than one quarter (1/4) inch clearance above the walking/working surface
  - Equipment will not be piled higher than the toeboard unless sufficient paneling or screening has been erected above the toe board

## Changes to the plan

Any changes to the fall protection program will be approved by *the Board of County Commissioners* and will be reviewed by a qualified person as the job progresses to determine additional practices, procedures or training needs necessary to prevent fall injuries. Affected employees will be notified of all procedure changes and trained if necessary. A copy of this plan will be maintained at the jobsite.

## Glossary

**Anchorage:** a secure point of attachment for lifelines, lanyards, or deceleration devices.

**Body belt:** a strap with means both for securing it about the waist and for attaching it to a lanyard, lifeline, or deceleration device.

**Body harness:** straps that may be secured about the person in a manner that distributes the fall-arrest forces over at least the thighs, pelvis, waist, chest, and shoulders with a means for attaching the harness to other components of a personal fall arrest system.

**Connector:** A device that is used to couple (connect) parts of a personal fall arrest system or positioning device system together.

**Controlled access zone:** a work area designated and clearly marked in which certain types of work (such as overhand bricklaying) may take place without the use of conventional fall protection systems (guardrail, personal arrest, or safety net) to protect the employees working in the zone.

**Deceleration device:** any mechanism, such as a rope, grab, ripstitch lanyard, specially-woven lanyard, tearing lanyard, deforming lanyard, or automatic self-retracting lifeline/lanyard, which serves to dissipate a substantial amount of energy during a fall arrest, or otherwise limits the energy imposed on an employee during fall arrest.

**Deceleration distance:** the additional vertical distance a falling person travels, excluding lifeline elongation and free fall distance, before stopping, from the point at which a deceleration device begins to operate.

**Guardrail system:** a barrier erected to prevent employees from falling to lower levels.

**Hole:** a void or gap two (2) inches (5.1 centimeters) or more in the least dimension in a floor, roof, or other walking/working surface.

**Lanyard:** a flexible line of rope, wire rope, or strap that generally has a connector at each end for connecting the body belt or body harness to a deceleration device, lifeline, or anchorage.

**Leading edge:** the edge of a floor, roof, or formwork for a floor or other walking/working surface (such as a deck) which changes location as additional floor, roof, decking, or formwork sections are placed, formed, or constructed.

**Lifeline:** a component consisting of a flexible line for connection to an anchorage at one end to hang vertically (vertical lifeline), or for connection to anchorages at both ends to stretch horizontally (horizontal lifeline), that serves as a means for connecting other components of a personal fall arrest system to an anchorage.

**Opening:** a gap or void 30 inches (76 centimeters) or higher and 18 inches (46 centimeters) or wider, in a wall or partition through which employees can fall to a lower level.

**Personal fall arrest system:** a system including but not limited to an anchorage, connectors, and a body harness used to arrest an employee in a fall from a working level.

**Positioning device system:** a body belt or body harness system rigged to allow an employee to be supported on an elevated vertical surface, such as a wall, and work with both hands free while leaning backwards.

**Rope grab:** a deceleration device that travels on a lifeline and automatically, by friction, engages the lifeline and locks to arrest a fall.

**Safety monitoring system:** a safety system in which a competent person is responsible for recognizing and warning employees of fall hazards.

**Self-retracting lifeline/lanyard:** a deceleration device containing a drum-wound line which can be slowly extracted from, or retracted onto, the drum under minimal tension during normal employee movement and which, after onset of a fall, automatically locks the drum and arrests the fall.

**Snaphook:** a connector consisting of a hook-shaped member with a normally closed keeper, or a similar arrangement, which may be opened to permit the hook to receive an object and, when released automatically, closes to retain the object.

**Steep roof:** a roof having a slope greater than 4 in 12 (vertical to horizontal).

**Toeboard:** a low protective barrier that prevents material and equipment from falling to lower levels and which protects personnel from falling.

**Unprotected sides and edges:** any side or edge (except at entrances to points of access) of a walking/working surface (e.g., floor, roof, ramp, or runway) where there is no wall or guardrail system at least 39 inches (1 meter) high.

**Walking/working surface:** any surface, whether horizontal or vertical, on which an employee walks or works, including but not limited to floors, roofs, ramps, bridges, runways, formwork, and concrete reinforcing steel. Does not include ladders, vehicles, or trailers on which employees must be located to perform their work duties.

**Warning line system:** a barrier erected on a roof to warn employees that they are approaching an unprotected roof side or edge and which designates an area in which roofing work may take

place without the use of guardrail, body belt, or safety net systems to protect employees in the area.

***Pittsburg County***  
**Fall protection program training acknowledgement**

I, \_\_\_\_\_ have received training on the proper assessment, selection, and use of fall protection devices and procedures. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's signature

\_\_\_\_\_  
Date



# Hearing conservation

## ***Pittsburg County***

### **Hearing conservation program**

#### **Purpose**

Exposure to high noise levels can result in hearing loss and other physical injury to the affected employee. Hearing protection in the form of ear plugs and/or ear muffs will be used only where engineering control of high noise exposure is not feasible, while engineering controls are being installed or in those situations where the use of hearing protection is accepted as an additional safeguard benefiting the employee.

#### **Assignment of responsibility**

At ***Pittsburg County***, our Hearing Conservation Program Administrator (HCPA) is ***Denton Cossey***. This person is solely responsible for all facets of the program and has full authority to make necessary decisions to ensure the success of this program. The authority of the HCPA includes hiring personnel and purchasing equipment necessary to implement and operate the program. The HCPA will develop written detailed instructions covering each of the basic elements in this program, and is the sole person authorized to amend these instructions.

The HCPA is qualified by appropriate training and experience that is commensurate with the complexity of the program to administer and oversee our Hearing Conservation Program as well as conduct the required evaluations of program effectiveness.

Employees may review a copy of our Hearing Conservation Program. It is included in your copy of the Safety Manual and can also be viewed in your department's office. The HCPA will review this program periodically to ensure its effectiveness. Only the HCPA may amend the written program.

#### **Determination of needs**

Noise exposure surveys are used to determine if the Hearing Conservation Programs is necessary. At least annually, and as new equipment or processes are added or removed, sound levels and noise dosimetry tests will be completed and documented.

In accordance with federal safety standards, employees may be exposed above noise levels of 90 decibels (dBA), but not greater than 116 decibels (dBA), without the use of hearing protection; however, the time weighted average (TWA) may not exceed 90 decibel

The following table indicates the maximum allowable exposure over time.

<b>Exposure time (Hr.)</b>	<b>Max sound level dB(A)</b>
<b>8</b>	<b>90</b>
<b>6</b>	<b>92</b>
<b>4</b>	<b>95</b>
<b>3</b>	<b>97</b>
<b>2</b>	<b>100</b>
<b>1</b>	<b>105</b>
<b>1/2</b>	<b>110</b>
<b>1/4</b>	<b>115 or less</b>

Noise surveys would include all the time spent in the course of employment; including time spent in restrooms, breakrooms, etc.

### **Selection of hearing protection**

An assortment of hearing protectors will be available for employees to choose, use and will be provided at no cost to the employee.

Employees will be provided with the option of using ear plugs and/or earmuffs for their protection. In certain operations, however, both forms of protection may be required to provide the required level of protection.

### **Use of hearing protection**

All company personnel will properly wear the hearing protection while working in or traveling through the company facilities (excluding offices, breakrooms, and rest facilities).

Personal music devices such as ipods and mp3 players are not permitted to be worn in designated high noise areas. These devices's noise levels will not exceed the exposure levels as listed above at any time in the workplace.

- **Earplugs-** foam type ear plugs will be discarded at the end of the day or shift. Rubber ear plugs will be placed in their original container when not in use and cleaned or replaced daily.
- **Earmuffs-** When not in use, hearing protection will be stored in a clean, dry location. The earmuff will be examined prior to each day's use and cleaned and properly stored at the end of the workday.

The employee is to contact their supervisor when hearing protection requires replacement.

### **Employee training**

At time of hire and annually thereafter, all affected employees will attend Hearing Conservation Training which will consist of:

1. A review of site hearing protection rules and procedures
2. Identified and labeled areas where hearing protection is required
3. The proper use and care for hearing protectors
4. How noise affects hearing and hearing loss

### **Engineering controls**

After it is determined that noise exposure above 85 decibels (dB(A)) is present, engineering controls will be evaluated and implemented to reduce the noise exposure before administrative controls are initiated.

### **Administrative controls**

After engineering controls are evaluated for effectiveness or feasibility, administrative controls will be considered to reduce noise exposure. Administrative controls include restricting exposure time (see Table 1) or using personal protective equipment (PPE).

Areas with noise exposure above 90 dB(A) will be marked that hearing protection is required.

### **Audiometric testing**

Employees that work in areas with a noise exposure of 85 dB(A) or greater (or if required to use hearing protectors) will have both a baseline and annual audiometric examination. These exams will be conducted or under the direction of a certified audiometric technician and evaluated by a qualified medical source (Medical Doctor, Audiologist or Otolaryngologist).

The employee will be provided written notification of test results within 21 days of the test completion.

Following a baseline audiogram, Employees with a marked hearing loss, as evaluated by a qualified medical source, will be referred to a qualified medical source for follow-up at their expense. Following any subsequent annual audiogram, employees with a marked hearing loss, as evaluated by a qualified medical source, will be retested within thirty days and at company expense. After the retest, should the marked hearing loss be confirmed, the employee will be referred to a qualified medical source for follow-up at company expense.

### **Annual audiometric examinations**

***(Insert company name)*** has employed ***(Insert company name)*** to provide the annual audiometric examinations. These services will include:

1. Baseline and annual audiometric examinations
2. Evaluation of examinations by a qualified Physician, Audiologist, or Otolaryngologist
3. Employee notification letters of examination results to be distributed within 21 days of testing.
4. Written examination results to be placed in individual employee medical files.

Employees with marked hearing loss (Standard Threshold Shift), at time of baseline audiometric examination, will be referred to a qualified medical source for follow-up care at their expense. Employees with a marked hearing loss following an annual audiometric examination will be retested within 30 days at the Company's expense. If the marked hearing loss is confirmed following an annual retest, the Employee will be referred to a qualified medical source at the Company's expense.

### **Occupational hearing loss reporting and recordkeeping**

Should an employee's hearing loss be attributed to an occupational noise exposure by a qualified Medical Source and the hearing loss is an average of 25 dB or more, in either ear, in the 2000 hz, 3000 hz or 4000 hz ranges, these findings will be made in the OSHA Log.

**Pittsburg County**  
**Hearing conservation acknowledgement**

I, \_\_\_\_\_ have received a copy of the company's Hearing Conservation Program and I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

The Training I received covered the following areas (Check all areas covered):

- \_\_\_\_\_ Proper size and fit of hearing protectors
- \_\_\_\_\_ Care and use of hearing protectors
- \_\_\_\_\_ Replacement policy
- \_\_\_\_\_ How noise effects hearing and causes hearing loss

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

# Heavy equipment safety

***Pittsburg County***

## Heavy equipment safety program

### Introduction

Improper procedures used by our employees can cause injury, disability, or death. By outlining and following safe operating procedures for use of heavy equipment, we learn to prevent injury and safeguard ourselves and our coworkers.

### Goals

To ensure all employees know and understand the safe operating procedures for the operation and maintenance of heavy equipment.

### Purpose

Accidents resulting from heavy equipment operation can result in severe personal injury or death, major property damage and major damage to company products. This poses a serious problem for workers and their employer. This program establishes uniform requirements to make sure that hazards associated with the use of heavy equipment are evaluated, and that this information is transmitted to all affected workers.

### Safe operating procedures for the following heavy equipment:

- Asphalt pavers
- Backhoes
- Tracked excavators
- Compactor
- Dozers
- Cranes
- Boom trucks
- Loaders
- Road graders
- Scrapers
- Skid loaders
- Trucks

### Certification

**Pittsburg County** will certify each operator has been trained and evaluated as required by this program. The certification will include the name of the operator, the date of the training, the date of the evaluation, and the identity of the person(s) performing the training and evaluation.

All employees allowed to operate any piece of heavy equipment, even if only occasionally, will be required to be certified beforehand.

*Only trained and authorized operators shall be permitted to operate the designated equipment.*

### General safety for heavy equipment

Personal protective equipment is mandatory and may include the following:

- Boots/safety toe shoes
- Long pants
- Hearing protection
- Eye/face protection
- Hard hat
- Gloves

Before work starts a pre-start/walk around inspection will be conducted:

- Check for loose or worn parts and repair or replace immediately.
- Check all fluid/coolant levels.



- *Caution: Open the radiator cap only when the engine is cooled.*
- Inspect hydraulic line connectors and hoses for leaks before applying pressure to the system. Use paper or cardboard, not your hands, to search for leaks.
  - *Caution: Hydraulic fluid escaping under pressure can penetrate skin and cause serious bodily harm.*
- Check tires for cuts, bulges, irregularities, abnormal wear and proper inflation.
- A fire extinguisher and first aid kit shall be mounted in the cab.

#### **Machine maintenance:**

- When servicing equipment, fasten a **Do Not Operate** tag on the steering wheel or ignition.
- Review **Lock out/Tag out Procedures** prior to servicing any equipment.
- Ensure the cab area is clean and free of debris and tools.
- Clean windshield, mirrors and lights.
- Remove all oil, grease or mud and snow from grab irons, handrails, steps, pedals, and floor to prevent slips and falls.
- Remove or secure any loose items such as tools, chains, or lunch boxes from the cab.

#### **Work site:**

- Check and mark the area for underground cables, gas lines, and water mains.
- Know work area clearances - watch for overhead or underground objects, holes, drop-offs, and partially hidden obstacles and wires.

#### **Mount properly:**

- Do not get on or off a machine that is in motion.
- Maintain a 3-point contact with the steps and handrails while getting on/into the machine.
- Do not use the controls or steering wheel as a handhold.
- Do not operate the machine with wet, greasy, or muddy hands or shoes.

#### **Starting and testing:**

- Exhaust fumes are dangerous- always have a running machine in a well-ventilated area.
- Fasten your seat belt and adjust the seat prior to starting.
- Controls should be in neutral and the parking brake set before starting engine.
- Start the engine only from the operator's seat.
- Warn personnel in the area that you are starting the engine.
- Check all gauges, light, instruments and warning devices to assure that they are functioning properly, and the readings are within normal range.
- Test steering right and left.
- Test brakes against ground speed to be certain there is no malfunction.
- Ensure all implement controls are operating properly.

#### **Machine operation:**

- Acquaint yourself with the controls before operating the machine.

- Only the operator is permitted to ride on the machine.
- While backing up use extra care and sound the horn to clear the area.
- If a malfunction is observed, "**DO NOT OPERATE**" until the proper repairs have been made.
- Drive at speeds compatible with working conditions.
- Do not coast downhill. Select a gear that will prevent excessive speed when going downhill. Do not park on a steep incline.
- Know the stopping distance at any given working speed.
- Do not permit anyone to stand or pass under the bucket or lift arms.
- Follow the manufacturer's load capacity limits. Identification plates are attached to all machines.
- If the machine is stuck, back it out or stop engine and get help.
- Do not make mechanical adjustments while the unit is in motion.
- Always follow the manufacturer's recommendations for pulling or towing.
- Lower all the hydraulic equipment before shutting down or getting off the machine.
- During snow removal, be alert for any obstructions covered by snow.

#### **Refueling:**

- Shut off and cool the engine and any electrical equipment before fueling.
- Ensure the fueling area is well ventilated.
- Do not smoke while refueling. Keep open flames and sparks away from area.
- Ground the funnel or fuel nozzle against the filler neck to avoid sparks when refueling.
- Do not use gasoline or diesel fuel for cleaning parts.
- Check the battery and electrolyte levels according to manufacturer's instructions.
- Know where the fire extinguishers are located.

#### **Batteries:**

- Battery charging will be performed in the designated area provided with adequate ventilation of gassing batteries as well as the capability for flushing and neutralizing spilled electrolyte.
- Trucks are to be properly positioned and brakes applied before attempting to change or charge batteries.
- Where applicable the conveyor, overhead hoist, or equivalent material handling equipment will be utilized for handling batteries.
- All reinstalled batteries will be properly positioned and secured in the truck.
- When charging batteries, acid must be poured into water instead of water poured into acid. Only approved containers will be used for dispensing electrolyte.
- Assure that battery vent caps are functioning, and the battery covers are open to dissipate heat.
- Smoking is not permitted within twenty feet of refueling operations.
- Tools and other metal objects are to be kept away from the top of uncovered batteries.
- Employees handling batteries will wear face shields, goggles, rubber gloves, aprons, and rubber boots, to protect against acid burns.
- If acid is spilled on workers clothing it will be removed immediately and any affected body parts flushed with water.

#### **Ether – cold start precautions:**

- Diesel cold start systems contain ether which is explosive. Keep away from heat, sparks, and open flames. Work in a well-ventilated area.

- If swallowed, breathed or contacted on skin or eyes seek medical attention immediately. Follow recommendations on the SDS sheets.
- Point the openings of the valve, tube or atomizer away from yourself and others while testing the diesel cold start system.
- Store replacement ether cylinders in a cool dry place away from direct sunlight. Do not keep them in the operator's compartment.

#### **Operating a power take-off (PTO):**

- Shut off the engine and wait until the PTO stops completely before getting off, disconnecting or servicing the PTO unit.
- Wear snug fitting clothing when operating the power take-off or when near rotating equipment.
- When operating stationary PTO equipment, always apply the parking brake and block the rear wheels front and back to prevent any unnecessary movement.
- PTO shields are mandatory on all PTO-driven equipment.

#### **Road rules:**

- When turning, use hand or turn signals.
- Obey all traffic regulations. Know local traffic laws regarding lights, warning signs, load limits, and slow-moving equipment on highways/roadways.
- When backing up traffic, pull over and allow the vehicles to pass.

#### **Shut down/parking:**

- Park on level ground.
- When parking on a grade, block the wheels and set the parking brakes.
- When parking, lower all loader, buckets, hydraulics to the ground.

The following rules and guidelines are written for specific types of heavy equipment. If the type of equipment you will be operating is not listed below, consult with your supervisor. Always refer to the operator manual for specific operating instructions and safety tips.

**ALWAYS WEAR YOUR SEAT BELT WHILE OPERATING EQUIPMENT.**

#### **Asphalt pavers:**

- Mount and dismount only where steps and handrails are provided using a three-point contact.
- Never get on or off a moving machine or when the engine is running.
- Make sure no one is working on, underneath, or close to the machine before starting the engine or beginning to move the machine.
- Be sure hands and feet are clear of the screed before using the depth control switch.
- Stay a safe distance from the edge of cliffs, overhangs and slide areas.
- If the machine begins to side or slip on a grade, immediately lower the hopper, and turn the machine downhill.
- Work up and down slopes rather than sideways whenever possible.

- The machines tend to be back heavy when the hopper is empty. When moving the machine up a steep grade, always operate with the hopper down grade.
- Shut off the screed torches and allow the screed to cool before spraying the fuel oil or kerosene.
- Never straddle a wire rope cable or similar device, nor allow others to do so.
- For parking, park on a level surface, move propel lever to center, block the tracks in both directions, and lower the screed completely.

### **Backhoes:**

- **KNOW THE WORKING RANGE OF THE MACHINE.**
- Be sure attachment or load does not catch on obstructions when lifting or swinging.
- When lifting a load, do not lift, swing or stop unnecessarily fast.
- Be sure everyone is in the clear before swinging or moving in any direction. **NEVER** swing or position attachment or load over personnel or vehicle cabs.
- Never allow personnel to walk or work under any part of the machine or load while the machine is operating.
- Never allow anyone to ride the attachment or the load. This is an extremely dangerous practice.
- Do not load a truck unless the driver is in a safe place. Then, load the truck from the rear or side.
- Use a signal person. The signal person must be in direct communication with the operator, and the operator must pay close attention to the signals.
- Never exceed the lifting capacity of the machine. Stay within the lifting limits shown on the Load Rating Chart. Remember - you may be able to lift the load in close, at ground level, but as the load radius and elevation change, the lifting capacity of the excavator may decrease.
- Keep the machine well back from the edge of an excavation. Avoid undercutting the machine. If necessary, provide adequate shoring to prevent the machine from falling into the excavation.
- Level off the work area if possible.
- Avoid swinging or extending the bucket farther than necessary in a downhill direction. This will reduce the stability of the machine.
- When working with the bucket on the uphill side, the excavator may tip over if the slope is too steep.
- Avoid working with the tires across the slope, as this reduces stability and increases the tendency for the machine to slide.
- Always be sure that slings or chains used to lift the load are of adequate strength and that they are in good condition.
- Always watch your boom clearance.
- Turn off the engine and allow the machine to cool before working on the machine. Most fluids on the excavator are hot enough to cause severe burns at normal operating temperatures.

### **Trackhoes:**

- Do not permit more than one person on the trackhoe while it is in operation.
- Carry the loader bucket low at all times, especially when working on a hillside or when backing up an incline.
- When operating on a slope, use caution when swinging the loader bucket to the downhill direction.
- Always dump the loader bucket on the uphill side of a slope.
- Never allow anyone to work in, or under, a raised loader bucket.
- Watch for overhead wires. Operating a boom in close proximity to power lines is unlawful.

- Check the area for trees and other obstacles which may limit swing movements.
- Test to ensure that there is sufficient clearance around the equipment to swing the boom.
- Ensure that the area is clear of workers before lowering stabilizers or moving the boom.
- Test the swing action for effective starting and stopping.
- Ensure that the machine remains stable throughout boom swings and movements.

### **Compactors:**

- Operate the machine only while seated and with the seat belt fastened.
- Do not allow riders on the machine unless additional seat, seat belt and rollover protection systems are provided.
- Operation on slopes: Best compaction results are obtained with the machine operating directly up and down the slope. Operating sideways on a slope can result in skidding, tipping and difficulty to maintain good directional control.
- Connect trailing equipment to a drawbar or hitch only.
- No personnel should be between the machine and trailing equipment when maneuvering to connect them. Block the tongue or hitch of trailing equipment to align it with the drawbar or hitch.
- Know the maximum height of the equipment.
- Park on a level surface, block the machine, engage the parking/secondary brake and move the propulsion lever to stop.

### **Dozers:**

- Operate the controls only with the engine running.
- Do not allow riders on the machine unless additional seat, seat belt, and rollover protection are provided.
- The operator must make sure that no one will be endangered before moving the machine.
- Report any needed repairs noted during operation.
- Carry implements close to the ground, approximately 40cm (15 in) above ground level.
- Stay a safe distance from the edge of cliffs, overhangs, and slide areas.
- If the machine begins to sideslip on a grade, immediately dispose of the load and turn the machine downhill.
- Be careful to avoid the condition which could lead to tipping when working on hills, banks, or slopes, and when crossing ditches, ridges, or other obstructions.
- Work up and down slopes, rather than sideways, whenever possible.
- Keep the machine under control and do not work it over its capacity.
- Be sure hitch points and the towing devices are adequate.
- Connect trailing equipment to a drawbar or hitch only.
- Never straddle a cable, wire rope, or similar device nor allow others to do so.
- Personnel are prohibited to be between the machine and trailing equipment when maneuvering to connect them. Block the tongue or hitch of trailing equipment to align it with the drawbar or hitch.

### **Loaders:**

- This is a one-person machine, **NO RIDERS ALLOWED.**
- Know the pinch points and wrap points on the loader.
- Operate at a speed consistent with working conditions, visibility, and terrain.

- Ensure loader has an adequate rear counterweight
- When crossing exposed railroad tracks, ditches, ridges, or curbs reduce speed and cross at an angle.
- Carry loaded buckets as close to the ground as possible. The further a loaded bucket is from the ground the more unstable the loader becomes.
- Use extreme caution when operating a loader on a side slope. Slow down and carry the bucket, loaded or empty, as close to the ground as possible.
- Stay in gear when traveling downhill - this will help control speed.
- Never move a load above the heads of other workers.
- When back filling, use extreme caution. The weight of the material plus the weight of the machine could cause the new construction to collapse.
- Keep work area level; avoid developing ruts by occasionally back dragging the bucket to smooth the surface.

### **Road grader:**

- Do not permit riders in or on the grader. Grader is a one-person piece of equipment.
- Do not dismount from the grader with the engine running - lower all attachments and stop engine first.
- Before backing up, use extra care to ensure persons and vehicles are clear of the grader.
- Know and use hand signals required for jobs and know who has the responsibility for signaling.
- Select a gear that will prevent excessive speed when going downhill. Do not coast downhill.
- Note and avoid all hazards and obstructions such as overhangs, ledges, slide areas, electrical lines, underground cables, water mains, or gas lines.
- Watch for bystanders and never allow anyone to be under or to reach into the grader and its attachments while operating.
- Check the local traffic laws for correct traveling requirements. If necessary, pull over and allow traffic to pass.
- When working near traffic areas or at night, use extra care. Use precautions, such as flares or reflectors, cones, red flags or red lights, barricades, flashing lights, and flagmen.
- Do not operate the grader in areas where volatile gases, dust, and combustibles may be present.
- Ensure the grader is properly equipped for grading in dry or forested areas.
- Avoid lubrication or mechanical adjustments with the grader in motion or the engine operating.
- Keep your head, body, limbs, feet, and hands away from all moving parts.
- Use extreme care when working with hydraulic systems. Relieve the hydraulic system pressure before performing any service.
- Match speed of the vehicle to job conditions.
- Be careful when operating with the wheels at right angle to a slope.
- When hooking up trailing equipment, keep all personnel away.
- Know your stopping distance at any given speed.
- Use caution when crossing side hills, ridges, ditches, and other obstructions.
- Keep close to inside bank when working on a side hill road or cut. Extend the blade to material near outer edge.
- Use extreme care to avoid tipping when working on hills, banks, or slopes.
- Cross obstacles at an angle and at slow speed. Be alert for sudden movement of machine when going over center of obstacle.
- Operate the vehicle only on level surface when cutting high banks.

### Scrapers:

- Do not try to climb on or off the machine when carrying tools or supplies. Use a hand line to pull equipment up onto the platform.
- Check for proper operation of all controls and protective devices while moving slowly in an open area.
- Operate the machine only while seated.
- Operate the controls only with the engine running.
- Do not allow riders on the machine unless additional seat, seat belt, and rollover protection are provided.
- Carry bowl close to the ground, approximately 40cm (15 in) above ground level.
- Stay a safe distance from the edge of cliffs, overhangs, and slide areas.
- If the machine begins to sideslip on a grade, lower the bowl and bring the machine to a safe stop.
- Be careful to avoid the condition which could lead to tipping when working on hills, banks, or slopes, and when crossing ditches, ridges, or other obstructions.
- Work up and down slopes, rather than sideways, whenever possible.
- Keep the machine under control and do not work it over its capacity.
- Personnel are prohibited from being between the machine and trailing equipment when maneuvering to connect them. Block the tongue or hitch of trailing equipment to align it with the drawbar or hitch.
- Park on a level surface. If necessary, to park on a grade, block the machine. Lower bowl to the ground and apply slight down pressure. Stop the engine.

### Skid loaders:

- Check to see that counterweights as recommended by the manufacturer are in place.
  - NOTE: This is very important as improperly balanced skid-steer loaders are easily upset.
- Clean steps, pedals, and floor of any slippery substances.
- Clear the driving compartment for loose items that might interfere with the controls.
- Check the work area for hazards such as holes, soft spots, and obstructions. Check overhead for utility lines, doorway clearances, or other obstructions.
- Mount the machine wearing clean, dry shoes using the grab bars or handrails provided.
- Adjust the seat, fasten the seat belt, set the brake, and place transmission in park or neutral before cranking the engine.
- Visually check for the presence of others in the area and warn them away.
- If the machine is garaged, leave the door or some windows open for ventilating the exhaust.
- Start the engine and check all controls to see that they are functioning properly.
- Check horn and backup alarm to see that they are working.
- Operate with caution on uneven surfaces. Avoid steep slopes completely.
- Carry the load as low as possible. Avoid sharp turns and slopes with a raised load.
- Travel straight up or down, with the heavy end of the machine pointed uphill.
- Operate with extreme caution near areas with sharp drop-offs.
- Do not undercut banks or materials that are piled high, to avoid cave-ins or falling of material.
- **NEVER** leave the machine without first lowering the bucket, stopping the engine, setting the parking brake, and placing the shift in park or neutral. Dismount the machine carefully. Do not jump out of the loader.

- If stopping for any length of time, lock the ignition and remove the key.

### **Trucks:**

- Truck drivers will be properly and thoroughly trained before attempting to do any work with or on any type of truck.
- Our motor vehicle policy, as well as State and Federal regulations, prohibit the operation of commercial motor vehicles by individuals who do not have the proper training and license. Do not attempt to operate any dump truck unless you have the proper license and training.
- Thoroughly inspect the truck for any defects that may inhibit safe operation of the vehicle. DOT regulations require that the operator fill an inspection form each day before placing the truck into operation. This form is an excellent tool to help the operator remember to check all necessary items.
- Always use the steps and grab irons and face the vehicle when getting in or out of the truck.
- Place the gearshift into neutral and set the parking brake before starting the engine.
- Allow the engine to reach operating temperature and the air pressure to build to operating pressure before placing the truck into motion.
- Carefully check the area around the truck before placing it into motion. Objects or people that are very close to the truck may not be visible from the driver's seat.
- Always make sure that your seatbelt is properly fastened before driving the truck.
- Allow adequate stopping distance between the truck and the vehicles in front of it.

### **Dump trucks:**

- Check the area around the truck for obstructions (tree limbs, overhead wires, etc.) before raising the dump box. Make sure that the spreader chains are not set if you intend to dump in a pile.
- Always try to be on a level surface when you raise the dump box. As the box rises, the truck's center of gravity goes up and the truck becomes less stable and more apt to tip over. If you must dump on a slope, place the truck so that it faces straight up, or down the slope. Do not try to raise the box with the truck parked parallel with the slope. Remember that a dump truck is much more apt to tip over (or run into overhead obstructions) when spreading material than it is when dumping in a pile.
- **NEVER** work under a raised box (not even "for just a little bit") unless the box is adequately supported by a prop rod or cribbing. Do not rely on the truck's hydraulic system to hold the box up while you work under it.

### **Boom lifts (Bucket trucks):**

About 26 construction workers die each year using aerial lifts. More than half of the deaths involve boom-supported lifts, such as bucket trucks and cherry pickers with majority of the remaining involving scissor lifts. These deaths are commonly caused by electrocutions, falls, and tip overs. Other causes include being caught between the lift bucket or guardrail and an object (such as steel beams or joists) and being struck by falling objects. (A worker can also be catapulted out of a bucket, if the boom or bucket is struck by something.)

### **Before operating an aerial lift:**



- Check operating and emergency controls, safety devices (such as, outriggers and guardrails), personal fall protection gear, wheels and tires, and other items specified by the manufacturer. Look for possible leaks (air, hydraulic fluid, and fuel-system) and loose or missing parts.
- Check where the lift will be used. Look for a level surface that will not shift. Check the slope of the ground or floor; do not work on steep slopes that exceed slope limits listed by the manufacturer. Look for hazards, such as, holes, drop-offs, bumps, and debris, and overhead power lines and other obstructions.
- Set outriggers, brakes, and wheel chocks – even if you are working on a level slope.

#### **Using and aerial lift:**

- Always close lift platform chains or doors.
- Stand on the floor of the bucket or lift platform. **Do not** climb on or lean over guardrails.
- Do not exceed manufacturer's load-capacity limits (including the weight of such things as bucket liners and tools).
- If working near traffic, set up work-zone warnings, like cones and signs.

#### **To prevent electrocutions:**

- Non-electrical workers must stay at least 10 feet away from overhead power lines.
- Electrical workers must de-energize/insulate power lines or use proper personal protective equipment and tools.
- Insulated buckets protect from electrocution due to electric current passing through you and the boom to ground. An insulated bucket **does not** protect if there is another path to ground – for instance, if you touch another wire.

#### **To prevent falls:**

To help keep workers inside guardrails or in buckets, OSHA requires either a full-body harness or a positioning device on bucket trucks or boom-supported lifts. OSHA accepts a positioning device (belt) with a short lanyard if there is an anchorage inside the bucket.

#### **To prevent tip over:**

- Check the manufacturer's instructions.
- Do not drive with the lift platform elevated (unless the manufacturer says that is okay).
- Do not exceed vertical or horizontal reach limits or the specified load-capacity of the lift.
- On an elevated scissor lift, avoid too much pushing or pulling.

#### **Maintenance and Inspections:**

- De-energize and lockout/tagout aerial lifts before any maintenance or repairs.
- Each aerial lift must be inspected as the manufacturer requires – every 3 months or after 150 hours of use, whichever comes first. And the owner of a lift must do a detailed yearly inspection, as required by the manufacturer.

*NOTE: Many construction contractors rent aerial lifts instead of buying them. You may not know which model you will be using, even though operator controls and other key features differ on each model. Also, you may not know the maintenance history of the lift.*

**The dealer or company renting out the lift should:**

- Be sure the lift is properly inspected and serviced before rental.
- Provide operator and maintenance manuals and maintenance history.
- Make sure the operator controls are easy to reach and properly marked.

**Before operation, you should:**

- Be sure an aerial lift is not modified without written permission of the manufacturer.
- Be sure an aerial lift is used only under conditions approved by the manufacturer.
- Be sure proper personal fall-protection is provided and used.

**Cranes:**

The crane operator shall be familiar with and follow manufacturer operating procedures to operate the crane safely. In addition, the crane shall be operated following all local, state, and federal guidelines. Cranes shall also be operated within the Federal Aviation Administration (FAA) guidelines. Proper permitting and notifications, if applicable, are the responsibility of the crane contractor.

**Swing Radius/Work Area:**

- No employees are allowed within the fall zone (whether the crane is moving or not) except for employees who meet the falling conditions:
- They are hooking, unhooking, guiding, or receiving a load.
- They are engaged in the initial attachment of the load to a component or structure.
- They are operating a concrete hopper or bucket.

If employees are within the fall zone and are engaged in hooking, unhooking, guiding a load, or the initial attachment of the load, the following conditions must be met:

- The material being hoisted must be rigged to prevent unintentional displacement.
- Hooks with self-closing latches or the equivalent must be used.
- A qualified rigger must rig the materials.
  - A qualified rigger shall perform the rigging of all equipment. The qualified rigger shall inspect all rigging equipment before each lift, and any equipment found to be worn, damaged, or defective shall be removed from service immediately. Synthetic slings must not be used where the potential for the webbing to be cut exists. Softeners shall be provided where necessary to protect slings, regardless of type, against sharp edges.

**Signals:**

- The signal person and the operator must meet before the beginning of the operation and discuss and agree upon a method of communication. If hand signals are utilized, both the operator and the signal person must provide documented proof of training in the "Standard Method" of hand signals, as can be found in Appendix A of OSHA's crane standard.
- The point of operation is not in full view of the operator.
- When the equipment is traveling, the view in the direction of travel is obstructed.
- Whenever the operator or person handling the load determines the site-specific safety concerns warrant a signal person.

- If radios or cell phones are used to communicate, they must be tested on-site before beginning operations. They must be transmitted through a dedicated channel unless there are multiple cranes and shared communications are required for coordination.

**Crane Maintenance:**

- Maintenance, inspection, and repair personnel are permitted to operate the equipment only when the following requirements are met:
- The operation is limited to the functions necessary to perform maintenance, inspect the equipment, or verify its performance.
- The operation is completed under the direct supervision of a properly licensed operator, or the maintenance personnel is familiar with the operation limitations, characteristics, and hazards associated with the type of equipment being worked on.
- Maintenance and repair personnel must be qualified for the equipment and repair tasks performed.

## **Heavy equipment daily shift checklist**

Heavy equipment will be examined daily before being placed in service and at the end of the day. If the equipment is used daily on more than one shift, it shall be inspected before each shift.

Equipment manufacturer/Name of equipment: \_\_\_\_\_

Identifying number: \_\_\_\_\_ Inspected by: \_\_\_\_\_ Date: \_\_\_\_\_

**Items to be checked:**

OK NOT  
OK

_____	_____	Tires
_____	_____	Horn
_____	_____	Back up alarm
_____	_____	Lights
_____	_____	Battery
_____	_____	Controller
_____	_____	Lift system, to include load limit switches, load engagement means, chains, cables, forks, etc.
_____	_____	Brakes (normal and emergency)
_____	_____	Steering mechanism intact, no excess play in steering
_____	_____	Hydraulic system intact, no leaks or fluid puddle present
_____	_____	Hydraulic fluid level
_____	_____	Truck clean, free of dirt, excess oil and grease
_____	_____	Overhead guards intact, not broken or damaged
_____	_____	All gauges working properly
_____	_____	Seat belts work properly
_____	_____	Fuel Level
_____	_____	Fuel system intact, no smell of fuel, cap in place
_____	_____	Propane tank secured in saddle
_____	_____	Engine oil fluid level
_____	_____	Transmission fluid level
_____	_____	Exhaust system intact, no visible emissions
_____	_____	All name plates and markings are in place and maintained in legible condition

List any other problems found with the equipment.

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***Note: Any items found to be defective will require immediate notification of your supervisor and the equipment will be taken out of service until repaired.***

***Pittsburg County***  
**Heavy equipment program training acknowledgement**

I, \_\_\_\_\_ have received training on the proper use of heavy equipment.  
I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

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Employee Signature

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Date

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Supervisor's Signature

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Date

# Lockout/Tagout (LOTO)

## ***Pittsburg County***

### **Lockout/Tagout program**

#### **Purpose**

The Lockout/Tagout Program (LOTO Program) is designed to provide our employees with appropriate protection from injury due to the uncontrolled release of energy.

The type and level of lockout/tagout procedure will be dependent on the specific hazards to be controlled at each job site. Once defined and unless otherwise specifically instructed otherwise, all company employees will follow proper LOTO procedures in accordance with their training and instruction. Failure to properly adhere to these procedures is grounds for disciplinary actions up to and including termination.

This program establishes the requirements necessary to safeguard employees while performing servicing or maintenance tasks, by the removal of energy sources (electrical, hydraulic, pneumatic, chemical, thermal and kinetic) that may cause serious injury to employees or property damage by accidental start-up of machinery, equipment or processes.

#### **Responsibility**

**Management and employees:** share the responsibility to follow the LOTO Program. Management is responsible for updating this program, as necessary. While all employees will be instructed as to the significance of the LOTO procedures only those designated "Authorized" as defined below are authorized to implement LOTO procedures.

**Responsible persons:** are those responsible for enforcing the program and insuring compliance with the procedures in their departments.

**Responsible person:** is the individual responsible for monitoring the compliance of this procedure and will conduct the annual inspection and certification of the authorized employees.

**Authorized employees:** are those employees who have been trained and are responsible for following established lockout/tagout procedures. An authorized employee is defined as a person who locks out or tags out machines or equipment to perform servicing or maintenance on that machine or equipment.

**Affected employees:** all other employees in the facility, are responsible for insuring they do not attempt to restart or re-energize machines or equipment that are locked out or tagged out. An affected employee is defined as a person whose job requires him/her to operate or use a machine or equipment on which servicing or maintenance is being performed under lockout or tagout, or whose job requires him/her to work in an area in which such servicing or maintenance is being performed.

#### **Determination of needs**

At the beginning of each project/work assignment, an evaluation of the associated risks will be made by affected employees and supervisors using a job safety analysis.

A list of each piece of equipment, machinery and/or processes to be addressed will be developed that outlines the energy sources, location of disconnects, type of disconnect, any special hazards and any special safety procedures. This list will be consulted to properly lock and tag out appropriate equipment, machinery and/or processes.

The four types of energy sources are:

1. Electrical (most common form)
2. Hydraulic or pneumatic
3. Fluids and gases
4. Mechanical (including gravity)

More than one energy source may be utilized on some equipment and the proper procedure must be followed to identify energy sources and lockout/tagout accordingly.

#### **Points to remember:**

##### **Electrical**

- If a machine or piece of equipment contains capacitors, they must be drained of stored energy.
- Possible disconnecting means include the power cord, power panels (look for primary and secondary voltage), breakers, the operator's station, motor circuit, relays, limit switches, and electrical interlocks.
- Some equipment may have a motor isolating shut-off and a control isolating shut-off.
- If the electrical energy is disconnected by simply unplugging the power cord, the cord must be kept under the control of the authorized employee or the plug end of the cord must be locked out or tagged out.

##### **Hydraulic/Pneumatic**

- If the pumps and compressors supply energy to more than one piece of equipment, lockout or tagout the valve supplying energy to the piece of equipment being serviced.
- Stored pressure from hydraulic/pneumatic lines shall be drained/bled when release of stored energy could cause injury to employees.
- Make sure controls are returned to their safest position (off, stop, standby, inch, jog, etc.).

##### **Fluids and gases**



- Identify the type of fluid or gas and the necessary personal protective equipment.
- Some systems may have electrically controlled valves. If so, they must be shut off and locked/tagged out.

### **Mechanical Energy**

- Mechanical energy includes gravity where an object has been raised and could fall back to earth.
- In complex equipment/machinery, springs or other stored energy sources may not be readily apparent and additional assistance may be required to properly identify control points to lockout/tagout.

### **Routine maintenance and machine adjustments**

Under certain circumstances, LOTO procedures may not be utilized if the machinery or equipment must be operating to perform routine maintenance safely and accurately or do adjustments. This rare exception may be used only by trained and authorized employees when specific procedures have been developed to safely avoid hazards with proper training.

### **General lock and tag out procedures**

Before working on, repairing, adjusting or replacing machinery and equipment, the following procedures will be utilized to place the machinery and equipment in a neutral or zero mechanical state.

- Notify all affected employees that the machinery, equipment or process will be out of service.
- If the machinery, equipment or process is in operation, follow normal stopping procedures (i.e. depress stop button, open toggle switch, etc.).
- Move switch or panel arms to "Off" or "Open" positions and close all valves or other energy isolating devices so that the energy source(s) is disconnected or isolated from the machinery or equipment. Stored energy (capacitors, springs, elevated members, rotating fly wheels, and hydraulic/air/gas/steam systems) must be relieved or restrained by grounding, repositioning, blocking and/or bleeding.
- Lock out and tag out all energy devices by use of hasps, chains and valve covers with an assigned individual lock.
- After assuring that no employee will be placed in danger, test all lockout, and tag out processes by following the normal start up procedures. **Caution: After test, place controls back in 'neutral' position.**
- Machinery or equipment is now locked out and tagged out.
- Should the shift change before the machinery or equipment can be restored to service, the lock and tag out must remain. If the task is re-assigned to the next shift, those employees must perform a review of the LOTO procedure with the previous technician before they may transfer their lock, key and tag.

### **Lock and tag out procedures for electrical plug-type equipment**

When working on, repairing, or adjusting electrical plug-type equipment, the following procedures must be utilized to prevent accidental or sudden start-up:

1. Un-plug electrical equipment from wall socket or in-line socket.
2. Attach "Do Not Operate" tag on end of power cord.
3. Test equipment to assure power source has been removed by depressing the "Start" or "On" Switch.
4. Perform required operations.
5. Replace all guards that were removed.
6. Inspect power cord and socket before removing "Do Not Operate" tag. Any defects must be repaired before placing the equipment back in service.
7. Remove "Do Not Operate" tag and place equipment back in service.

*NOTE: Electrical equipment not routinely in use should be unplugged from power source when not in use.*

### **Restoring machinery and equipment to service**

When the repair/maintenance task is complete and the machinery, equipment or process is ready for testing or returned to normal service:

1. Check the area to assure that no employee is exposed to a hazard.
2. Account for all tools, repair or replace any defects and replace all safety guards.
3. Remove lock and tag. Restore energy sources. Test to assure task has been completed satisfactorily.

### **Procedures involving more than one technician**

In the preceding steps, if more than one employee is assigned to a task requiring a lock out and tag out, each must also place his or her own lock and tag on the energy isolating device(s).

### **Management's removal of LOTO**

Only the employee that locks out and tags out machinery, equipment or processes may remove his/her lock and tag. However, should the employee leave the building/site before removing his/her lock and tag, the designated safety coordinator, or direct supervisor may remove the lock and tag. However, the designated safety coordinator, or direct supervisor must assure themselves that all tools have been removed, all guards have been replaced and all employees are free from any hazard before the lock and tag are removed and the machinery, equipment or process are returned to service.

### **Training**

Employee personal protective equipment (PPE) training will be conducted within 24 hours of the date of hire, or prior to the beginning of any assigned work requiring the use of PPE by the affected employee. This training will specifically address the following:

- Who is authorized to apply and/or remove LOTO controls
- When LOTO is necessary
- What LOTO is necessary
- How to properly place LOTO equipment
- The limitations of the LOTO procedure based on the risks associated with the planned work

Employees will be required to demonstrate the ability to follow LOTO procedures properly, before being allowed to perform work requiring the proper use of LOTO devices. If the employee fails to demonstrate a complete understanding of this requirement, the employee will be retrained until they successfully demonstrate personal competence in the selection and use of LOTO equipment.

Additional training will be provided to all affected employees when:

- Changes in the workplace or work procedures render previous training obsolete
- Changes in the types of LOTO to be used render previous training obsolete
- Inadequacies in an affected employee's knowledge or use of LOTO procedures indicate that the employee has not retained the requisite understanding or skill

### **Contractors**

Contractors must also be required to honor LOTOs in place. They must also use standard LOTO procedures while servicing or maintaining equipment, machinery or processes.

## ***Pittsburg County***

### **LOTO program training acknowledgement**

I, \_\_\_\_\_ have received training on the proper assessment, selection, and use of LOTO devices and procedures. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

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Employee Signature

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Date

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Supervisor's Signature

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Date

# Respiratory protection

**Pittsburg County**  
**Respiratory protection program**  
*(Not intended for structural fire fighting operations)*

**Purpose**

Respirators are to be used only where engineering control of respiratory hazards is not feasible, while engineering controls are being installed, or in those situations where the use of respirators is accepted as an additional safeguard benefiting the employee.

**Administrative duties**

At Pittsburg County, our respiratory protection program administrator (RPA) is Denton Cossey. This person is solely responsible for all facets of the program and has full authority to make necessary decisions to ensure the success of this program. The authority of the RPA includes hiring personnel and purchasing equipment necessary to implement and operate the program. The RPA will develop written detailed instructions covering each of the basic elements in this program, and is the sole person authorized to amend these instructions.

The RPA is qualified by appropriate training and experience that is commensurate with the complexity of the program to administer and oversee our respiratory protection program as well as conduct the required evaluations of program effectiveness.

Employees may review a copy of our respiratory protection program. It is located in your copy of the Policies and Procedures and can also be viewed in your department's office. The RPA will review this program periodically to ensure its effectiveness. Only the RPA may amend the written program.

**Determination of needs**

A review of all potentially hazardous atmospheres, operations and/or products will be conducted by **Denton** who is responsible for determining if the hazards can be removed or effectively controlled by engineering controls or process change.

Where an identified airborne hazard cannot be effectively controlled, appropriate respiratory protective equipment will be provided to affected employees at no cost to them and replaced as warranted by wear and tear and in accordance with the manufacturer's recommendations.

**Pittsburg County** has determined respiratory protection will be required in the following areas:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

The areas listed above pose the following respiratory hazards:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### **Respiratory protection program**

1. Only authorized and trained employees will utilize respirators. Those employees may use only the respirator that they have been trained and properly fitted to use.
2. Only physically qualified employees will be trained and authorized to use respirators. A pre-authorization and annual certification by a qualified physician will be required and maintained. Any changes in an employee's health or physical characteristics will be evaluated by a qualified physician.
3. Air purifying respirators will be worn in work environments where oxygen levels are between 19.5 percent to 23.5 percent and with the appropriate air filter/canister, as determined by the manufacturer and approved by NIOSH for the known hazardous exposure. Where the oxygen concentrations are outside of the range listed above, the company will provide air supplied respirators to the affected personnel.
4. Respirators loaned to an employee on "permanent check out" will be the responsibility of the employee for the sanitation, proper storage and security. Respirators lost, stolen or damaged by neglect or unreasonable wear, as determined by management will be replaced and the employee subject to company disciplinary practices associated with company property.
5. Any malfunction of an air purifying respirator (APR), such as breakthrough, facepiece leakage, or improperly working valve will be immediately reported to the department supervisor. The supervisor will ensure that the employee receives the needed parts to repair the respirator or is provided with a new respirator.

## **Respirator selection**

Respiratory protection will be selected based on identified exposures, facial characteristics, personal comfort and listed protection factors. A variety of sizes and types will be made available to employees to allow for the most effective and comfortable fit.

Respirators will be provided to the employee in a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits. Where possible, the respirators will be assigned to individual workers for their exclusive use.

The RPA will approve all selections. Outside consultation, manufacturer's assistance, and other recognized authorities will be consulted if there is any doubt regarding proper selection. Only NIOSH-certified respirators will be used.

## **Training**

**Denton** will provide training to respirator users as to the contents of the respiratory protection program and their responsibilities under it. All affected employees will be trained prior to using a respirator in the workplace.

The training course will cover the following topics:

- The company respiratory protection program
- Respiratory exposures associated with worker operations and their potential health effects
- Proper selection and use of respirators
- Limitations of respirators
- Respirator donning and seal checking
- Fit testing
- Emergency use procedures where applicable
- Maintenance and storage
- Medical signs and symptoms limiting the effective use of respirators
- ***The OSHA Respiratory Protection standard, 1910.134.***

Employees will be receiving training prior to the use of any respirator and retrained annually or as needed (e.g., if they change departments and need to use a different respirator).

Employees will demonstrate their understanding of the topics covered in the training through hands-on exercises and a written test. Respirator training will be documented as to the type, model, and size of respirator for which each employee has been trained and fit tested.



## **Medical evaluations**

A medical evaluation to determine whether an employee can use a given respirator will be required before a respirator is provided to the employee.

At Pittsburg County, persons will not be assigned to tasks requiring use of respirators nor fit tested unless it has been determined that they are physically able to perform the work and use the respirator.

A physician will perform an initial medical evaluation either physically or obtain the information using a medical questionnaire.

All medical questionnaires and examinations are confidential and handled during the employee's normal working hours or at a time and place convenient to the employee. The employee will be provided an opportunity to discuss the questionnaire and examination results with their physician or licensed health care professional (PLHCP).

Before any initial examination or questionnaire is given, the PLHCP will be provided with the following information:

- Type and weight of the respirator to be used by the employee
- Duration and frequency of respirator use (including use for rescue and escape if applicable)
- Expected physical work effort
- Additional protective clothing and equipment to be worn
- Temperature and humidity extremes that may be encountered

Once the PLHCP determines whether the employee can use or not use a respirator, he will send a written recommendation to RPA containing only the following information:

- Any limitations on respirator use related to the medical condition of the employee, or relating to the workplace conditions in which the respirator will be used, including whether the employee is medically able to use the respirator
- The need, if any, for follow-up medical evaluations
- A statement that the PLHCP has provided the employee with a copy of the PLHCP's written recommendation

## **Follow-up examinations**

A follow-up medical examination will be provided if a positive response is given to any question among questions 1 through 8 of the respirator medical questionnaire, or if an employee's initial medical examination demonstrates the need for a follow-up medical examination. Our follow-up medical examination includes tests, consultations, or diagnostic procedures that the PLHCP deems necessary to make a final determination.

If the respirator to be used by the employee is a negative pressure respirator, and the PLHCP finds a medical condition that may place the employee's health at increased risk if the respirator is used, (*Insert company name*), will provide a powered air-purifying respirator (PAPR) if the PLHCP's medical evaluation finds that the employee can use such a respirator. If a subsequent medical evaluation finds that the employee is medically able to use a negative pressure respirator, then the employee will no longer utilize the PAPR.

### **Additional medical examinations**

Additional medical evaluations will be performed if:

- An employee reports medical signs or symptoms that are related to the ability to use a respirator
- A PLHCP, supervisor, or the respirator program administrator informs the employer that an employee needs to be reevaluated
- Information from the respiratory protection program, including observations made during fit testing and program evaluation, indicates a need for employee reevaluation
- A change occurs in workplace conditions (e.g., physical work effort, protective clothing, temperature) that may result in a substantial increase in the physiological burden placed on an employee

A copy of your confidential medical evaluation or questionnaire can be obtained by contacting **Denton Cossey**.

### **Respirator fit testing**

The following procedure will be used to conduct respiratory fit testing:

1. Assure that the employee has been trained on the proper use and operation of the assigned respirator including face seal checks. Negative pressure respirators will be equipped with a high efficiency cartridge for dusts and vapors. The test area is to be well ventilated and the employees conducting the test will be trained in first aid and CPR.
2. Review the safety data sheet (SDS) of the test medium (e.g. irritant smoke) with the employee. Lightly pre-expose the employee to the test medium to check sensitivity. If the employee cannot smell or react to the medium at this point, the test would be voided, and an alternative test completed.
3. Review the testing procedures with the employee and ask if there are any questions. The test procedures should begin only after the employee's questions have been addressed.
4. Have the employee properly don the respirator in accordance with the manufacturers' recommendations. Have the employee perform either the positive pressure or negative pressure conventional fit checks.
5. Require the employee to wear the respirator for a minimum of 10 minutes. Establish and maintain eye contact and verbal communication during this time.

6. Advise the employee that the medium can be irritating and to close their eyes during the test and if the employee should experience any discomfort or detect the test medium, they are to raise his/her hands to stop the test.
7. Using a hood enclosure, administer the medium inside the hood start with the testing medium emitter within 12 inches of the employee's face and gradually move to within 1 inch of the face-piece and move completely around the perimeter of the mask.
8. Require the employee complete the following exercises for one minute each:
  - a. Normal, regular breathing
  - b. Heavy breathing - deep and regular  
*Note: Should the employee appear to hyperventilate, immediately stop the test*
  - c. Turning head from side to side and inhale deeply/Advise the employee not to bump the respirator on their shoulders
  - d. Nod head up and down and inhale deeply when head returns to the full up-right position/Advise the employee not to bump the respirator on their chest
  - e. Have employee slowly and distinctly count out loud backward from 100
  - f. Normal, regular breathing
9. If the medium is detected, stop the test immediately and move employee to fresh air. The employee has failed the fit test and should be re-tested after re-establishing a face seal or with another type of respirator. The employee is considered to have passed the fit test if they cannot detect the test medium.
10. Record the respirator(s) properly fitted for use on employee's training and information card.

### **Proper use procedures**

Once the respirator has been properly selected and fitted, its protection efficiency must be maintained by its proper care and use in accordance with this program's guidelines.

Proper respirator use procedure include:

- Respirators will be cleaned before and after each use.
- Positive and negative pressure checks will be performed before each use.
- Filters and cartridges will be changed out regularly based on the type of filter/cartridge and employee exposure.
- Employees will notify the immediate supervisor when repair or replacement of the respirator needs to be made.

### **Facepiece seal protection**

To assure an effective face-to-mask seal, any of the following conditions are prohibited:

- Facial hair that comes between the sealing surface of the facepiece and the face or that interferes with valve function

- Any other condition that interferes with the face-to-facepiece seal or valve function
- Corrective glasses or goggles or other personal protective equipment worn in a manner that interferes with the seal of the facepiece to the face of the user

### **Continuing respirator effectiveness**

Appropriate surveillance will be maintained of the work area conditions and degree of employee exposure or stress. When there is a change in work area conditions or degree of employee exposure or stress that may affect respirator effectiveness, a reevaluation will be performed in regard to the effectiveness of the respirator and appropriate actions will be taken to ensure the safety and health of the affected employee(s).

### **Procedures for immediately dangerous to life and health (IDLH) atmospheres**

Should it become necessary to train employees for emergency response, the following procedures will be put into place:

- Affected employees will be properly trained in the use of necessary personal protective equipment, including respiratory equipment
- At least one employee will always be located outside the IDLH atmosphere while an employee is in the IDLH atmosphere
- Visual, voice, or signal line communication will be maintained between the employee(s) in the IDLH atmosphere and the employee(s) located outside the IDLH atmosphere
- The employee(s) located outside the IDLH atmosphere will be trained and equipped to provide effective emergency rescue
- The employer or designee will be notified before the employee(s) located outside the IDLH atmosphere enter the IDLH atmosphere to provide emergency rescue
- The employer or designee authorized to do so by **(Insert company name)**, once notified, provides necessary assistance appropriate to the situation
- Employee(s) located outside the IDLH atmospheres will be equipped with pressure demand or other positive pressure SCBAs, or a pressure demand or other positive pressure supplied-air respirator with auxiliary SCBA; and either appropriate retrieval equipment for removing the employee(s) who enter(s) these hazardous atmospheres where retrieval equipment would contribute to the rescue of the employee(s) and would not increase the overall risk resulting from entry; or an equivalent means for rescue where retrieval equipment is not required under the bullet item above this one.

### **Maintenance and care procedures**

To ensure continuing protection from the assigned respiratory protective devices, the following procedures will be followed.

**Respirators are cleaned and disinfected at the following interval:**

- Respirator issued for the exclusive use of an employee must be cleaned and disinfected as often as necessary to be maintained in a sanitary condition or as directed by the program administrator.
- Respirators issued to more than one employee must be cleaned and disinfected before being worn by different individuals.
- Respirators maintained for emergency use must be cleaned and disinfected after each use.
- Respirators used in fit testing and training must be cleaned and disinfected after each use.

**Storage:**

Storage of respirators must be done properly to ensure that the equipment is protected and not subject to environmental conditions that may cause deterioration. Respirators are stored to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals, and they are packed or stored by each employee in accordance with company procedures.

If emergency respirators are on site, they will be kept accessible to the work area; stored in containers that are clearly marked as containing emergency respirators; and stored in accordance with any applicable manufacturer instructions.

When crews are at remote job locations and conditions warrant, the program administrator will authorize assignment of respirators to all affected employees.

**Inspection:**

To assure the continued reliability of respirator equipment, it must be inspected on a regular basis. Respirators will be inspected before each use and during cleaning

Emergency respirators will be inspected at least monthly and in accordance with the manufacturer's recommendations, and checked for proper function before and after each use

The inspection process will include:

- Respirator function
- Tightness of connections
- Condition of the various parts including, but not limited to:
  - Facepiece
  - Head straps
  - Valves
  - Cartridges, canisters, or filters
  - Elastomeric parts for pliability and signs of deterioration
  - Cylinder pressure and volume for self-contained breathing apparatus

**Repairs:**

- Repairs or adjustments to respirators are to be made only by persons appropriately trained to perform such operations and only with the respirator manufacturer's NIOSH-approved parts designed for the respirator.
- Respirators that fail an inspection or are otherwise found to be defective are to be immediately removed from service.
- Repairs must be made according to the manufacturer's recommendations and specifications for the type and extent of repairs to be performed; and
- Reducing and admission valves, regulators, and alarms on air supplied respirator systems will be adjusted or repaired only by the manufacturer or a technician trained by the manufacturer.

**Discarding of respirators:**

Respirators that fail an inspection or are otherwise not fit for use and cannot be repaired must be discarded. These respirators will be rendered unusable and placed in the appropriate trash container.

**Air quality procedures**

When air-supplied respirators are being used, the quality of the supplied air is critical to the safe use of the equipment. Compressed and liquid oxygen must meet the United States Pharmacopoeia requirements for medical or breathing oxygen.

Compressed breathing air must meet at least the requirements for Type 1-Grade D breathing air described in ANSI/Compressed Gas Association Commodity Specification for Air, G-7.1-1989, to include:

- Oxygen content (v/v) of 19.5-23.5%
- Hydrocarbon (condensed) content of 5 milligrams per cubic meter of air or less
- Carbon monoxide (CO) content of 10 ppm or less
- Carbon dioxide content of 1,000 ppm or less
- Lack of noticeable odor

**Compressors**

Compressors used to supply breathing air to respirators are required to:

- Prevent entry of contaminated air into the air-supply system.
- Minimize moisture content so that the dew point at 1 atmosphere pressure is 10 degrees F (5.56 deg. C) below the ambient temperature.
- Have suitable in-line air-purifying sorbent beds and filters to further ensure breathing air quality. Sorbent beds and filters must be maintained and replaced or refurbished periodically following the manufacturer's instructions; and
- Have a tag containing the most recent change date and the signature of the person authorized by *(Insert company name)*, to perform the change. The tag must be maintained at the compressor.

- Ensure that carbon monoxide levels in the breathing air do not exceed 10 ppm for compressors that are not oil-lubricated,
- If only high-temperature alarms are used, the air supply must be monitored at intervals sufficient to prevent carbon monoxide in the breathing air from exceeding 10 ppm. For oil-lubricated compressors, use a high-temperature or carbon monoxide alarm, or both, to monitor carbon monoxide levels.

### **Filters, cartridges and canisters**

Ensure that all filters, cartridges and canisters used in the workplace are labeled and color coded with the NIOSH approval label and that the label is not removed and remains legible.

Make sure cartridges and filters are clean before use. Filters should be taken straight out of the original packaging and inserted into the respirator's threaded connections. Never try to clean a filter or cartridge by washing it or using compressed air. Inspect cartridges for dents, scratches or other damage, particularly the metal sealing bead around the bottom.

### **Replacing cartridges and filters**

The following conditions are indications that the cartridges or filters have served their useful life and should be replaced:

- Cartridges: Odor or taste of gases or vapors; eye, nose, or throat irritation.
- Filters: Excessive breathing resistance upon inhalation.

The employee(s) utilizing respiratory protection will be advised of the filter/cartridge replacement scheduled determined by the RPA based on the known materials and anticipated employee respirator use.

### **Limitations**

Personal protective equipment, such as a respirator, does not make the employee invulnerable. Proper care and use of the respiratory protective equipment will protect the employee from the atmosphere being protected against.

**Pittsburg County**  
**Worksite specific respiratory protection plan**

**Processes/hazardous products/substances:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Atmospheric hazards:**

Oxygen levels: \_\_\_\_\_

Monitoring (List the monitoring frequency, method for each atmospheric hazard (i.e., colorimetric tubes, badges, direct reading instrument, low flow pump, etc.), time weighted average, ceiling, short term exposure level, type of sampling (i.e. area or personal breathing zone) and duration of sampling ):

\_\_\_\_\_  
\_\_\_\_\_

Respirators to be used to reduce employees' exposure to atmospheric hazards (list type, cartridge/canister/filter, etc):

\_\_\_\_\_  
\_\_\_\_\_

**Authorized employees:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Pittsburg County**  
**Respirator program assignment record**

Employee name: \_\_\_\_\_ Employee no. \_\_\_\_\_

Job title: \_\_\_\_\_ Work location: \_\_\_\_\_

**Respirator issue**

Type and weight of respirator to be used: \_\_\_\_\_

\_\_\_\_\_

To be used under the conditions specified here:

\_\_\_\_\_

Duration and frequency of respirator use: \_\_\_\_\_

Expected physical work effort: \_\_\_\_\_

Additional protective clothing and equipment to be worn: \_\_\_\_\_

Temperature and humidity extremes which may be encountered: \_\_\_\_\_

Estimated frequency of cartridge/filter replacement or respirator replacement (disposable and air purifying respirators only:

Circle one: Non-applicable   Hourly   Twice/shift   Daily   Weekly   Monthly

Other (specify): \_\_\_\_\_

**Pittsburg County**  
**Respirator program training certificate**

Date: \_\_\_\_\_

**(Insert employee name)**, was trained on the use and limitation of the following respirator(s):


This training covered the company respiratory protection program; respiratory hazards encountered in this workplace and their health effects; proper selection and use of respirators; limitations of the respirators; respirator donning and user seal (fit) checks; fit testing; emergency use procedures; maintenance and storage; and medical signs and symptoms limiting the effective use of respirators.

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Name of instructor

**Pittsburg County**  
**Respirator fit test results**

Employee name: \_\_\_\_\_

Fit test method: \_\_\_\_\_

(e.g., quantitative, irritant smoke, banana oil)

Type (2 facepiece or full face)	Make/Model/Size	Fit factor/Results

Name of person performing the fit test: \_\_\_\_\_

Date: \_\_\_\_\_

**Pittsburg County**  
**Monthly respirator inspection**

Type of respirator: \_\_\_\_\_ Model #: \_\_\_\_\_

Year: \_\_\_\_\_ Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

- Facepiece Assembly
  
- Tube
  
- Harness
  
- Exhalation Valve
  
- Cartridge/Canister
  
- Cleaned
  
- Discrepancies Noted
  
- Initial

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Pittsburg County**  
**Respiratory protection program training certificate**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Department: \_\_\_\_\_ Date: \_\_\_\_\_

I have received training on the *(Insert company name)* respiratory protection program. The Training included the following *(Place an X in all areas that apply)*:

- \_\_\_\_\_ Overview of the company respiratory protection program
- \_\_\_\_\_ Respiratory protection safety procedures
- \_\_\_\_\_ Respiratory protection schedule by job and working conditions
- \_\_\_\_\_ Physical and medical qualifications and examinations
- \_\_\_\_\_ Respirator operation and use
- \_\_\_\_\_ Respirator sanitation and storage requirements
- \_\_\_\_\_ Respirator monthly inspection
- \_\_\_\_\_ Reviewed workbook test questions and answers

Test Score: \_\_\_\_\_

\_\_\_\_\_

Employee's signature

\_\_\_\_\_

Trainer's signature

**Pittsburg County**  
**Respiratory protection program fit testing certificate**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Department: \_\_\_\_\_ Date: \_\_\_\_\_

List all respirators properly fitted:

<u>Manufacturer:</u>	<u>Type/Model #:</u>	<u>Date Fit Tested:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Employee's signature

\_\_\_\_\_  
Fit tester's signature

**Respirator seal check:**

To conduct a user seal check, the worker performs a negative or positive pressure fit check.

For the negative pressure check:

- \_\_\_\_\_ Cover the respirator inlets (cartridges, canisters, or seals)
- \_\_\_\_\_ Gently inhale, and
- \_\_\_\_\_ Hold breath for 10 seconds

The facepiece should collapse on the worker's face and remain collapsed.

For the positive pressure check:

- \_\_\_\_\_ Covers the respirator exhalation valve(s); and
- \_\_\_\_\_ Exhale

The facepiece should hold the positive pressure for a few seconds. During this time, the worker should not hear or feel the air leaking out of the face-to-facepiece seal.

Qualitative Fit Testing will be used as the primary testing procedure to assure a proper face to face-piece seal.

Quantitative Fit Testing may be used as appropriate and will be conducted by a third-party testing firm.

## **Use of non-required respiratory protection**

Read and heed all instructions provided by the manufacturer on the use, maintenance, cleaning and care, as well as warnings regarding the respirator's limitations.

Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging; it will tell you what the respirator is designed for as well as how much it will protect you.

Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

## **Facepiece positive and/or negative pressure checks**

### **Positive pressure check:**

Close off the exhalation valve and exhale gently into the facepiece. The face fit is considered satisfactory if a slight positive pressure can be built up inside the facepiece without any evidence of outward leakage of air at the seal. For most respirators, this method of leak testing requires the wearer to first remove the exhalation valve cover before closing off the exhalation valve and then carefully replacing it after the test.

### **Negative pressure check:**

Close off the inlet opening of the canister or cartridge(s) by covering with the palm of the hand(s) or by replacing the filter seal(s), inhale gently so that the facepiece collapses slightly, and hold the breath for ten seconds. The design of the inlet opening of some cartridges cannot be effectively covered with the palm of the hand. The test can be performed by covering the inlet opening of the cartridge with a thin latex or nitrile glove. If the facepiece remains in its slightly collapsed condition and no inward leakage of air is detected, the tightness of the respirator is considered satisfactory.

### **Manufacturer's recommended user seal check procedures:**

The respirator manufacturer's recommended procedures for performing a user seal check may be used instead of the positive and/or negative pressure check procedures listed above provided that the employer demonstrates that the manufacturer's procedures are equally effective.



**Pittsburg County**  
**Medical questionnaire for respirator users**  
**Option A**

Name: \_\_\_\_\_ Social security #: \_\_\_\_\_

Date: \_\_\_\_\_ Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Have you ever worn a respirator before? \_\_\_\_ Yes \_\_\_\_ No

If yes, describe any apparent difficulties noted with respirator use.

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Have you had or do you now have any of the following:

	<b>*Yes</b>	<b>No</b>
Lung disease	_____	_____
Persistent cough	_____	_____
Heart trouble	_____	_____
Allergies	_____	_____
History of fainting or seizures	_____	_____
High blood pressure	_____	_____
Diabetes	_____	_____
Fear of tight or enclosed places	_____	_____
Shortness of breath	_____	_____
Heat exhaustion or heat stroke	_____	_____
Ruptured ear drum	_____	_____
Defective vision	_____	_____

	<b>*Yes</b>	<b>No</b>
Defective hearing	_____	_____
Contact lenses or glasses	_____	_____
Stroke	_____	_____
Bleeding problems	_____	_____
Thyroid problems	_____	_____
Do you wear dentures?	_____	_____
Kidney disease	_____	_____
Any mental illness	_____	_____
Are you taking any medications?	_____	_____
Other conditions that might interfere with respirator use or result in limited work ability	_____	_____

\*Please explain yes answers: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**List prior surgeries and dates:**

<b>Surgery:</b>	<b>Date:</b>
_____	_____
_____	_____
_____	_____

Allergies: \_\_\_\_\_

Do you smoke? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, how many packs per day? \_\_\_\_\_ For how many years? \_\_\_\_\_

Do you drink alcohol? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, indicate amount: \_\_\_\_\_ Rare \_\_\_\_\_ Occasional \_\_\_\_\_ Moderate \_\_\_\_\_ Heavy

**Work history:**

Previous employer/Job duties

Dates worked:

<hr/>	<hr/>
<hr/>	<hr/>

***Pittsburg County***

**Medical evaluation**

***Option B***

Is employee medically able to use the respirator? \_\_\_\_\_ Yes \_\_\_\_\_ No

Any limitations on respirator use: \_\_\_\_\_  
\_\_\_\_\_

Follow-up medical evaluation on: \_\_\_\_\_  
(date)

Employee has been provided with copy of this recommendation. \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
Physician or other licensed health care provider signature

\_\_\_\_\_  
Date

**Pittsburg County**  
**Respiratory Protection program training acknowledgement**

I, \_\_\_\_\_ have received training on the proper assessment, selection, and use of fall protection devices and procedures. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

---

Employee signature

---

Date

---

Supervisor's signature

---

Date

# Safe driving, Vehicle Program

## **Pittsburg County**

### **Safe driving policy**

#### **Purpose**

**Pittsburg County** places a high priority on employee safety and acts to ensure that employees whose work involves operating either a company issued, or personal vehicle for company business does so in an appropriate and safe manner. To that end the company has established specific operating performance expectations and requirements which our employees must maintain as part of their continued employment with our company.

#### **Vehicle operation**

Affected employees must have a current, valid employee's license for the state in which the employee performs his or her operating duties and must have at a minimum, state mandated levels of auto insurance or otherwise remain insurable under our company's liability insurance policy.

Any employee operating a company vehicle or otherwise operating on company business must observe all safety, traffic, and criminal laws of this state. As such, no employee may consume alcohol or use non-prescribed or other illegal drugs while operating a company vehicle, while operating a personal vehicle on company business, or prior to the employee's shift if such consumption would result in a detectable amount of illegal drug/alcohol being present in the employee's system while on duty. ***(Please Note: this restriction should coincide with the company's drug and alcohol policy and any applicable state/federal law. We recommend that this policy be reviewed by an attorney knowledgeable in employment issues prior to implementation.)***

Affected employees are also responsible for monitoring their level of fatigue and/or physical condition as it relates to their ability to safely operate a motor vehicle. Drowsiness due to fatigue and/or prescription medication may reduce the employee's ability to safely operate the motor vehicle. Circumstances involving either situation should be discussed with the employee's immediate supervisor prior to operating a motor vehicle.

Aggressive driving to include, but not limited to such acts as excessive speed, tailgating, failure to signal a lane change, running a red light and passing on the right will not be tolerated. Proper work planning should reduce the problems of meeting established schedules. In those situations where unavoidable delays occur, the employee is to contact their immediate supervisor for direction as to resolving scheduling conflicts.

Employees are prohibited from transporting any non-employees while in a company vehicle or on company business unless there is a specific work-related need to do so and such action has been approved by their immediate supervisor.

In addition to state mandated seatbelt use, all company employees and any authorized passengers will wear seat belts while the vehicle is in motion.

All materials or equipment transported in the vehicle will be secured to prevent unsafe movement during transport, in the event of a collision or when making sudden maneuvers. At no time will items or materials be placed on the dashboard or the rear window tray.

Cell phones, both hand-held and hands-free will not be used by the driver while the vehicle is in motion. All calls will be made or received while the vehicle is stopped, out of the line of traffic.

Any employee who receives a traffic citation from, or is arrested by a law enforcement officer, or who is involved in any kind of motor vehicle collision while operating a vehicle, must inform their immediate supervisor immediately or as soon as possible after the incident. The employee is responsible for all fines, court fees or other costs associated with any traffic convictions arising from their failure to follow applicable traffic laws. Any penalty, fine, imprisonment, fee, or other adverse action imposed by a court in connection with such an incident must be reported immediately to their immediate supervisor.

### **Vehicle Maintenance**

Company provided vehicles will be maintained by the company at company expense. It is the responsibility of the employee operating the vehicle to perform a vehicle inspection prior to, and after use of the vehicle. Any problems and/or deficiencies will be reported immediately to their immediate supervisor.

Employees are responsible for the care and maintenance of their own personal vehicles used for company business.

Any employee who violates any part of this policy, or in the case of company provided vehicle coverage who becomes uninsurable as an employee, will be subject to reassignment and/or disciplinary action, up to and possibly including discharge from employment.



***Pittsburg County***  
**Safe driving policy acknowledgement**

I, \_\_\_\_\_ have received a copy of the company's safe driving policy and I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's signature

\_\_\_\_\_  
Date

# Scaffolding

## ***Pittsburg County***

### **Scaffolding safety program**

#### **Purpose**

The scaffolding safety program is designed to provide our employees with appropriate protection from injury when working at heights thereby preventing fall related injury.

Fall protection in the form of fixed railings and/or lanyards and harnesses will be provided for affected employees with the expectation that the employee(s) will maintain the equipment in an appropriate manner and report immediately to their supervisor as to any damage or excessive wear.

The type and level of employee protection will be dependent on the specific hazards to be controlled at each job site. The levels and type of protection may vary, but once assigned and unless otherwise specifically instructed otherwise, all affected employees will wear the assigned equipment and or adhere to related safety procedure. Failure to properly wear and/or maintain company issued fall protective equipment is grounds for disciplinary actions up to and including termination.

#### **Assignment of responsibility**

Management is responsible for ensuring that the scaffolding is in proper condition, erected as designed and maintained in good condition.

***Denton Cossey*** is responsible for the implementation and continued application of this program. He/she is responsible for the following:

- Performing routine safety checks of work operations
- Enforcing proper erection procedures
- Correcting any unsafe practices or conditions immediately
- Training employees and supervisors in recognizing hazards associated with working on scaffolds
- Maintaining records of employee training, equipment issue, and fall protection systems used at company jobsites
- Investigating and documenting all fall related incidents that result in employee injury

#### **Employees**

It is the responsibility of all employees to:

- Understand and adhere to the procedures outlined in this scaffold safety program
- Bring to management's attention any unsafe or hazardous conditions or practices that may cause injury to either themselves or any other employees

- Report any incident that causes injury to an employee, regardless of the nature of the injury

### **Determination of needs**

Unless otherwise specified, **Denton Cossey** will evaluate the worksite(s) and determine the specific type(s) of fall protection to be used which includes the following.

- Determine the scaffolding needed to provide a safe workplace based on the formal, written procedures for scaffold work.
- A competent person, will be designated by the company who can identify existing and predictable hazards in the surroundings or working conditions which are unsanitary, hazardous, or dangerous to employees, and who has authorization to take prompt corrective measures to eliminate them.
- A qualified person will also be designated by the company who by possession of a recognized degree, certificate, or professional standing, or who by extensive knowledge, training, and experience, has successfully demonstrated his/her ability to solve or resolve problems related to the subject matter, the work, or the project.
- Ensure this written program will be reviewed and evaluated on an annual basis or when changes occur to the governing regulatory standards that prompt revision of this document, or when operational changes occur that require a revision of this document.
- Will ensure safety and serviceability, by confirming all manufactures recommendations for the proper setup, use and care of scaffolding components are observed. In addition, the following general precautions concerning the care and use of scaffolding will be observed:
  - The footing and or anchorage for scaffolds will be sound, rigid, and capable of carrying the maximum intended load without settling or displacement. Unstable objects such as barrels, boxes, loose brick, or concrete blocks will not be used to support scaffolds or planks.
  - Scaffolds and their components will be capable of supporting without failure at least four times the maximum intended load.
  - Scaffolds will always be maintained in a safe condition in accordance with the manufacturer's recommendations. Fixed scaffolds will not be altered or moved horizontally while they are in use or occupied.
  - Any scaffold damaged or weakened from any cause will be immediately repaired and will not be used until repairs have been completed.
  - Scaffolds will not be loaded more than the working load for which they are intended.

- All load-carrying timber members of scaffold framing will be a minimum of 1,500 f. (Stress grade) construction grade lumber.
- All planking will be scaffold grade as recognized by grading rules for the type of wood used. The scaffold manufacturers recommendations will be followed.
- Nails or bolts used in the construction of scaffolds will be of adequate size and in sufficient numbers at each connection to develop the designed strength of the scaffold. Nails will not be subjected to a straight pull and will be driven full length.
- All planking or platforms will be overlapped (minimum 12 inches) or secured from movement.
- An access scaffold or equivalent safe access will be provided.
- Scaffold planks will extend over their end supports not less than 6 inches nor more than 18 inches.
- The poles, legs, or uprights of scaffolds will be plumb, and securely and rigidly braced to prevent swaying and displacement.
- Materials being hoisted onto a scaffold will have a tag line.
- Overhead protection will be provided for men on a scaffold exposed to overhead hazards.
- Scaffolds will be provided with a screen between the toe board and the guardrail, extending along the entire opening. It will consist of no. 18 gauge U.S. standard wire one-half-inch mesh or the equivalent, where persons are required to work or pass under the scaffolds.
- Employees will not work on scaffolds which are covered with ice or snow, unless all ice or snow is removed, and planking sanded to prevent slipping.
- Tools, materials, and debris will not be allowed to accumulate in quantities to cause a hazard.
- Only treated or protected fiber rope will be used for or near any work involving the use of corrosive substances or chemicals.
- Wire or fiber rope used for scaffold suspension will be capable of supporting at least six times the intended load.
- The use of shore scaffolds or lean-to scaffolds will not be used by this company.

- Lumber sizes, when used in this section, refer to nominal sizes except where otherwise stated.
- Scaffolds will be secured to permanent structures, through use of anchor bolts, reveal bolts, or other equivalent means. For window cleaners', anchor bolts will not be used.
- Special precautions will be taken to protect scaffold members, including any wire or fiber ropes, when using a heat-producing process.

### **Mobile (rolling) scaffolding**

To ensure safety and serviceability, work platforms and scaffolds will be capable of carrying the design load under varying circumstances depending upon the conditions of use.

The design load of all scaffolds will be calculated based on:

**Light** - Designed and constructed to carry a working load of 25 pounds per square foot.

**Medium** - Designed and constructed to carry a working load of 50 pounds per square foot.

**Heavy** - Designed and constructed to carry a working load of 75 pounds per square foot.

- Nails, bolts, or other fasteners used in the construction of ladders, scaffolds, and towers will be of adequate size and in sufficient numbers at each connection to develop the designed strength of the unit. Nails will be driven full length (All nails should be immediately withdrawn from dismantled lumber).
- All exposed surfaces will be free from sharp edges, burrs or other safety hazards.
- The maximum work level height will not exceed four (4) times the minimum or least base dimensions of any mobile scaffold. Where the basic mobile unit does not meet this requirement, suitable outrigger frames will be employed to achieve this least base dimension, or provisions will be made to guy or brace the unit against tipping.
- The minimum platform width for any work level will not be less than 20 inches for mobile scaffolds (towers). Ladder stands will have a minimum step width of 16 inches.
- The supporting structure for the work level will be rigidly braced, using adequate cross bracing or diagonal bracing with rigid platforms at each work level.
- The work level platform of scaffolds (towers) will be of wood, aluminum, or plywood planking, steel or expanded metal, for the full width of the scaffold, except for necessary openings. Work platforms will be secured in place. All planking will be 2-inch (nominal) scaffold grade minimum 1,500 f. (stress grade) construction grade lumber or equivalent.
- All scaffold work levels 10 feet or higher above the ground or floor will have a standard (4-inch nominal) toe board.

- All work levels 10 feet or higher above the ground or floor will have a guardrail of 2- by 4-inch nominal or the equivalent installed no less than 36 inches or more than 42 inches high, with a mid-rail, when required, of 1- by 4- inch nominal lumber or equivalent.
- Wheels or casters will be inspected to ensure that they are provided with strength and dimensions to support four (4) times the designed working load.
- All scaffold casters will be inspected to ensure that they are provided with a positive wheel and/or swivel lock to prevent movement.
- Where leveling of the elevated work platform is required, screw jacks or other suitable means for adjusting the height will be used.
- Employees are not permitted to ride rolling scaffolds during relocation.
- Adjusting screws may not be extended more than 12 inches.
- Before moving the platform, secure all equipment and material.
- Casters or wheels must have a serviceable locking device.
- Be aware of overhead obstructions when moving scaffolds.
- Never run over electrical cords.
- Never pull scaffolds from the top, always push at base level.
- Work only from the platform area never extend work beyond guard railing.

### **Erecting of scaffolding**

Only designated competent employees of this company will supervise the erection of scaffolding.

- Manufacturers erection instructions will be followed.
- Planning considerations will be followed during the erection process.
- Only competent employees will supervise the erection of scaffolding.
- Each component will be visually inspected before use.
- Defective or unserviceable materials will not be used.
- Only approved lumber will be used.

### **Pre-inspection of erected scaffolding.**

The three main areas of inspection are for rust, straightness of members, and welds. Only competent and qualified employees of this company will conduct the pre-inspection. The following as a minimum apply:

- Heavily rusted scaffolding equipment is a possible sign of abuse or neglect. Severely rusted components should be thoroughly inspected and cleaned before approved for use.
- Mishandling, trucking and improper storage may cause damage to scaffolding equipment. All members or parts of all steel scaffolding components should be straight and free from bends, kinks or dents.
- Scaffolding equipment should be checked before use for damaged welds and any piece of equipment showing damaged welds or unauthorized repair beyond the original factory weld should not be used.
- Check serviceability of locking devices.
- Check alignment of coupling pins and braces.
- Check serviceability of caster brakes (rolling scaffolds).

#### **Final inspection of erected scaffolding.**

Only competent employees of this company will conduct the final inspection of erected scaffolding. The following as a minimum apply:

- Check for proper support under every leg of every frame.
- Check for soil wash out due to rain.
- Check to ensure all base plates or adjustment screws are in firm contact with supports.
- Check frames for plumbness and squareness in both directions.
- Check integrity and installation of all cross braces.
- Check to ensure that all planking and accessories are properly installed.
- Check to ensure that all guardrails are in place.
- Recheck periodically to ensure conditions remain safe.

#### **Dismantling of scaffolding.**

Only competent employees of this Company will supervise the dismantling of scaffolding. Pertinent information and guidance provided by the manufacturer of the scaffolding will be used. The following apply:

- Manufacturers dismantling instructions will be followed.
- Relocation planning considerations will be considered during the dismantling process.
- Dismantling will be supervised by a competent employee.
- Each component will be visually inspected after use.
- Defective or unserviceable materials will not be stored with serviceable materials.
- Avoid dropping or throwing the components as this could result in damage to the equipment.
- Consult with the project manager where any instructions are unclear.



## Training

All employees who will be using scaffolding in the course of their duties will be trained prior to job assignment on the general aspects listed above as well as the following:

- Description of fall hazards in the work area or job site.
- Procedures for using fall prevention and protection system.
- Scaffolding access and egress procedures.
- Scaffolding equipment limitations.
- Inspection and storage procedures for the equipment.
- Types of scaffolding used by this company, including aerial lifts.
- Recognition of applicable fall hazards associated with the work to be completed and the locations of such.
- Load determination and balancing requirements.
- Safety precautions in the use of scaffolds. All other employees whose work operations are or may be in an area where scaffolding may be utilized, will be instructed to an awareness level concerning the associated hazards.
- Equipment maintenance and inspection requirements.
- Equipment strengths and limitations.

Refresher training will be conducted on an as needed basis or when the following conditions are met, whichever event occurs sooner.

- Whenever (and prior to) a change in their job assignments, a change in the type of scaffolding equipment used, or when a known hazard is added to the work environment which affects this program.
- Additional retraining will also be conducted whenever a periodic inspection reveals, or whenever there is reason to believe, that there are deviations from or inadequacies in the employee's knowledge or use of scaffolding equipment or procedures.
- Whenever a scaffolding safety procedure fails.

Management will certify that employee training has been accomplished and that this certification is maintained as appropriate.

***Pittsburg County***  
**Scaffolding program acknowledgement**

I, \_\_\_\_\_ have received training on the proper assessment, selection, and use of scaffolding. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination.

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's signature

\_\_\_\_\_  
Date

# Temperature Extremes

# ***Pittsburg County***

## **Temperature Extremes Program**

### **Purpose**

Temperature extremes pose a serious threat of injury, including death, in the workplace. Effective control of these extremes will be managed through proper work preparation, work planning, and physical conditioning. Both extreme cold and extreme heat situations will be evaluated to control employee work-related risk of injury and illness.

Although cold stress is generally less of a hazard than heat stress, it also has the potential to cause serious injury or even death. Cold stress can result in frozen skin, other physical discomfort, irritability, reduced judgment, slower physical and mental reaction times as well as a potentially fatal lowering of the normal body temperature. Cold and icy weather also increases the frequency of injuries from slips and falls.

### **Assignment of Responsibilities**

#### **Management**

Management is responsible for ensuring that temperature extremes are addressed and controlled through proper scheduling, planning of the work, and work performance oversight. In addition, management must ensure the following:

1. Provide annual training to all employees who are exposed to potentially harmful heat or cold stress.
2. Monitor heat and cold levels and take appropriate actions to control these environments

#### **Supervisors**

1. Identify employees with potential exposure to heat or cold stress.
2. Ensure that effective training is provided.
3. Ensure that plenty of potable water is available to employees exposed to heat stress and that employees are properly hydrated.
4. Plan into the work schedule, a period of acclimatization to the heat or cold.
5. Assess the day-to-day heat or cold stresses on employees.
6. Assess the workload and assign work and rest schedules as appropriate to the working conditions.

#### **Employees**

1. Perform assigned work according to the training received
2. Report heat or cold-related stress to their supervisor.

## **Body Reaction to Heat**

Four environmental factors affect the amount of stress a person faces in a hot environment - temperature, humidity, radiant heat (such as from the sun or a furnace), and air velocity. The level of heat stress a person experiences is also related to personal characteristics such as age, weight, medical condition, and acclimatization to the heat.

In general, the body reacts to hot environments as follows: When the blood temperature rises above 98.6 F, blood flow to the skin increases to transfer heat to the outside air through convection, radiation, evaporation, and conduction; and sweating occurs so its evaporation will cool skin, but reaches maximum efficiency at 86°F. Sweating is effective only if the humidity level is low enough to permit evaporation and if the fluids lost are adequately replaced.

If the body cannot dispose of excess heat, it will store it. When this happens, the body's core temperature begins to rise, and the heart rate increases. Because so much blood goes to the external skin surface, less blood is supplied to the active muscles. Strength declines and the onset of fatigue comes quicker and results in reduced accuracy, comprehension, and retention. As the body continues to store heat, the individual begins to lose concentration and has difficulty focusing on a task, may become irritable, and may lose the desire to drink. The next stage is most often fainting and then possibly death if the person is not removed from the heat.

## **Heat Disorders**

There are five major categories of heat-related illness: heat stroke, heat exhaustion, heat cramps, heat syncope (fainting), and heat rash (prickly heat). After experiencing a heat-related illness, the victim will be more susceptible to heat stress than before being affected. The symptoms and treatment of each are discussed below.

### **Heat Stroke**

Heat stroke is the most serious heat-related illness. It is always life-threatening because the person's temperature is so high it might cause brain damage or organ failure. It is caused by the failure of the body's temperature-regulating mechanisms and dehydration.

#### **Symptoms:**

- a. hot, dry skin (maybe mottled, red, or bluish),
- b. core temperature over 105°F,
- c. mental confusion, loss of consciousness, or
- d. convulsions or coma.

#### **Treatment:**

- a. Call for help immediately. Prompt first aid can prevent permanent injury to the brain and other vital organs.
- b. Remove the victim from heat and sun.
- c. Immediately cool the victim with ice packs, cool water, and cool compresses, (but never put ice directly on the skin).
- d. Do not give the victim anything to drink, especially not tea, coffee, or alcoholic beverages. Never give anything by mouth to someone unconscious.

## **Heat Exhaustion**

Heat exhaustion is caused by the loss of body fluid and salt from sweating, decreased blood circulation to the brain and organs, or both. It is caused when a person does not take in enough water, salt, or both. It is less serious than heat stroke but can become serious and lead to heat stroke if not treated.

### **Symptoms:**

- a. Clammy, pale, or flushed moist skin
- b. Extreme fatigue, headache, nausea
- c. Rapid pulse and low blood pressure
- d. Oral temperature that is normal or slightly elevated

### **Treatment:**

- a. Remove the victim to a cooler area and give them water as they desire (but never any liquids with caffeine or alcohol).
- b. Have the victim rest with their feet slightly elevated.
- c. Cool the body with ice packs or cool water if needed.
- d. Call 911 if the victim becomes unconscious.
- e. Some cases of heat exhaustion may take several days or longer for full recovery and the person is at higher risk of heat stroke after experiencing heat exhaustion.

## **Heat Cramps**

Heat cramps are painful spasms of the working muscles of workers who are drinking large quantities of water but have some salt depletion. The cramps may occur during or after working hours and are usually relieved by drinking lightly salted water.

### **Symptoms:**

Symptoms may include painful spasms of muscles used during work (usually arms, legs, or abdomen).

### **Treatment:**

- a. Drink lightly salted water or "sports" drinks (unless on medical restriction).
- b. Use an adequate amount of salt during meals.

## **Fainting or Heat Syncope**

Syncope may occur in workers who are not acclimated and stand still in the heat. Blood normally circulated to the heart and brain is sent to the skin for cooling, and pools in the enlarged blood vessels in the skin and in the lower part of the body. It may be prevented by moving around, assuming no other complications occur.

### **Symptoms:**

Symptoms may include fainting or becoming dizzy while standing in the heat.

### **Treatment:**

- a. Remove the victim to a cooler area and let them drink water.
- b. Recovery should be prompt.
- c. Consult a physician if the condition persists.

## **Heat Rash**

Heat rash can be avoided by resting in a cool place and allowing the skin to dry. Also, wearing layers of thin cotton clothing that do not tightly bind the skin, especially near the waist or the arms, will allow sweat to evaporate.

### **Symptoms:**

"Prickly heat" may occur in humid environments where sweat is not easily removed from the skin by evaporation. The sweat ducts become plugged, become inflamed, and a rash develops. Infection is a possibility. When extensive or complicated by infection, heat rash can be so uncomfortable that it impedes a person's performance or even results in a total temporary disability.

### **Treatment:**

Cool and dry the skin and avoid conditions that cause sweating. If an infection develops, have it treated by a physician.

## **Preventing Heat Stress**

### **Acclimatization**

Acclimation is a process by which the employee's body adjusts to the environment over a period, usually 5 to 7 days. However, the process may take up to three weeks depending on the individual and their work environment.

Mere exposure to heat does not confer acclimatization, nor does acclimatization at one heat stress level confer resistance to heat stress at a higher temperature or more vigorous workload. People who are not sufficiently acclimatized to the heat may experience transient heat fatigue resulting in a decline in performance, coordination, or alertness. They may also become irritable or depressed. This can be prevented through gradual adjustment to the hot environment. People in good physical condition tend to acclimatize better because their cardiovascular systems respond better.

Allow the body to adjust to the hot environment. Sweat will increase, but salt loss will decrease. On the first day in a hot environment, a person should perform about 50% of the normal workload. The workload in the hot environment should be increased by 10% each day on each succeeding day. Full acclimatization takes about two weeks. It is the supervisor's responsibility to extend rest periods according to individual requirements, and to allow a re-acclimatization period after an absence from work of a week or more or if the person is returning to work from an illness.

### **Dehydration**

Dehydration is a major factor in most heat disorders. The average body loses approximately 2½ quarts of sweat a day. When performing strenuous work, the body can lose up to 1½ quarts of sweat per hour. It is essential to drink more than is needed to satisfy thirst. It is necessary to drink 10-12 ounces of water every 20-30 minutes when actively sweating.

## **Salt Replacement**

Sweat not only contains water but salt and other electrolytes. The body needs a certain amount of salt to function properly, but salt tablets are not recommended because of stomach irritation, nausea, and vomiting. Employees should drink normal water throughout the day but may drink an electrolyte solution such as Gatorade after working in a hot environment if desired. Individuals on a salt-restricted diet or those being treated for high blood pressure or heart problems must NOT try to replace salt without the advice of their physician.

## **Safe Work Practices**

Watch out for the safety of coworkers. Take scheduled breaks in cool areas. Take water breaks as needed. Drink plenty of cool water. Report any problems to a supervisor. Supervisors should consider scheduling the hottest work for the coolest part of the day, assigning extra workers to high-demand tasks, and using a wide variety of work-saving devices such as power tools, hoists, cranes, or other lifting aids to reduce the body's workload.

## **Recommended Protective Clothing**

Loose-fitting clothes made of light-colored cotton allow sweat to evaporate and transfer heat better than tight-fitting synthetic fibers. Hats should be worn to provide shade to the head and face.

## **Things to Avoid**

The following should be avoided while working in hot environments:

1. All alcoholic beverages
2. Diuretics, or water pills
3. Hot, heavy meals
4. Sugary drinks, and
5. A severely restricted diet

## **Body Reaction to Cold**

Cold injuries are classified as either localized (frostnip, frostbite) or generalized as in hypothermia (a lowering of the body's core temperature)

## **Hypothermia**

Hypothermia occurs when the body cannot maintain a normal core temperature of 98.6°F to 99.6°F. Hypothermia can take a victim by surprise since it can occur above freezing. Wind, physical exhaustion, and wet clothing all make a person more prone to hypothermia. Air temperature alone is not enough to judge the cold hazard of an environment. Most cases of hypothermia develop in an air temperature of 36-50°F. However, wind chill is a significant factor: a 50°F day with a 20-mph wind feels like 0°F

### **Symptoms:**

- a. Numbness, stiffness, or pain (especially in the neck, arms, and legs)
- b. Poor coordination, slurred speech, and drowsiness
- c. Slow, irregular breathing and heartbeat or pulse
- d. Puffiness in the face
- e. Low blood pressure



- f. Listlessness, confusion, and disorientation, (it is not unusual to see someone who makes little or no effort to get out of the cold or to keep warm)
- g. Collapse or exhaustion after rest
- h. Severe shivering; and
- i. Death is a possibility

*NOTE: During exposure to cold, severe shivering develops when the body temperature has fallen to 95°F. This must be taken as a sign of extreme danger to workers and exposure to cold should be immediately terminated for any workers when any severe shivering becomes evident. Useful physical or mental work is extremely limited when severe shivering occurs. The severe shaking of muscles is caused by bursts of energy from the body and changes in blood chemistry.*

#### **Treatment:**

Anyone who becomes unconscious with severe hypothermia should be treated aggressively by experienced medical personnel and transported to a hospital. If no pulse is detected, CPR should be administered immediately until help arrives.

- a. Get the person out of frozen, wet, or tight clothes.
- b. Mild hypothermia in young and otherwise healthy people can be treated by rewarming the person in a warm bed or bath with warm packs, warm dry clothes, or blankets.
- c. Elderly or debilitated victims may be treated by using an electric blanket.
- d. Have the victim drink something warm (if conscious), but do not give caffeine or alcohol. (NEVER give anything by mouth to someone unconscious.)

#### **Frostnip**

Frostnip occurs when the face or extremities are exposed to cold wind which causes the skin to turn white.

##### **Symptoms:**

- a. Firm, cold, white areas on the face, ears, or extremities
- b. Peeling or blistering that may appear like sunburn
- c. A mild hypersensitivity to cold persists

##### **Treatment:**

The frost-nipped area should be treated by rewarming the area with an unaffected hand or a warm object. Do not use hot water.

#### **Frostbite**

Frostbite occurs when there is freezing of the skin. It can occur without hypothermia when the extremities do not receive sufficient heat from central body stores because of inadequate clothing or circulation. The most vulnerable parts of the body are the nose, cheeks, ears, fingers, and toes. Damage from frostbite can be serious; scarring, tissue death, and amputation are all possible, as is permanent loss of movement in the affected parts. Skin cannot freeze at an air temperature of 30°F or greater, but there is a danger of hypothermia. As wind velocity increases, heat loss is greater, and frostbite will occur more rapidly. If skin should meet objects colder than freezing, frostbite may develop at the point of contact, even in a warm environment.

**Symptoms:**

- a. The area is cold, hard, white, and anesthetic
- b. On warming, it becomes blotchy red, swollen, and painful
- c. Depending on the extent of the injury, the area may recover normally, or deteriorate to gangrene

**Treatment:**

- a. Remove restrictive clothing or jewelry near the affected area or body part
- b. Warm the frozen part and exercise it, but do not walk on frostbitten feet
- c. Warm the frozen part quickly with sheets and blankets and warm water
- d. Remove wet clothing from the affected area and gently dry the affected part
- e. Place the affected part next to a warm part of the body if warm water is not available
- f. Seek medical attention immediately
- g. Do not rub the affected areas
- h. Do not apply a heat lamp or very hot water bottle
- i. Do not break any blisters
- j. Do not drink caffeine or alcohol to treat hypothermia or frostbite
- k. Do not rewarm the frozen tissue if tissue refreezing is a possibility
- l. Do not use hot water (use warm water only)

**Chilblains**

Chilblains are caused by prolonged, continuous exposure to cold without freezing, combined with persistent dampness or actual immersion in water. When this affects the feet, it is called "trench foot".

**Symptoms:**

- a. Swelling, tingling, itching, and severe pains
- b. Possibly blistering, tissue death, and ulceration
- c. Pale, clammy cold skin that is swollen and numb
- d. Infection is likely
- e. Sensitivity to temperature may persist for years

**Treatment:**

Treatment for chilblains is the same as for frostbite

**Preventing Cold Stress****Acclimatization**

Workers exposed to the cold should be physically fit, without any personal medical condition that may place them at increased risk for hypothermia. New workers should be introduced to the work schedule slowly and be trained accordingly.

**Dehydration**

Working in the cold can cause significant water loss through the skin and lungs because of the dryness of the air. Increased fluid intake is essential to prevent dehydration which can increase the risk of damage to the extremities since blood flow is decreased.

## **Diet**

As with heat stress, consuming extra salt is not necessary. It is very important for anyone who works in cold environments to eat a well-balanced diet. Workers should avoid smoking or drug or alcohol use since these can restrict circulation or cause heat loss.

## **Safe Work Practices**

1. Walk carefully on snowy and icy sidewalks.
2. If you shovel snow, be very careful to avoid overexertion and keep relatively active, although not so active that you become damp with sweat.
3. Change out of wet clothing or socks as soon as possible.
4. Do not use unprotected metal chair seats or touch any cold objects with bare hands
5. People who are taking certain medications, older, overweight, have allergies, smoke, or have poor circulation (diabetics, for example) are more prone to cold injuries and should take extra precautions.
6. DO NOT drink alcohol.
7. Avoid clothing or gloves contact with any liquids (especially gasoline, alcohol, or cleaning fluids) due to the added danger of evaporative cooling.
8. For work below -15°F, follow a work-rest schedule. Work-rest schedules take into account for the expected wind velocity and air temperatures.
9. Always work under the buddy system if you must travel or work outdoors in dangerous conditions.
10. As much as possible, avoid using vibrating tools in very cold temperatures.
11. Wear UV protective eyewear if you must work outdoors in the snow or ice-covered Terrain.
12. If you have a pre-existing injury or if you are injured on the job during cold stress periods see your supervisor immediately. Injured tissues can be more susceptible to the cold.

## **Recommended Protective Clothing**

1. Below 40°F, wear adequate insulating, dry clothing to maintain body core temperatures above 98.6 °F
2. Clothing should resist rain and wind but also allow water vapor generated by perspiration to escape.
3. Do not wear constrictive garments. Instead, wear several layers of loose-fitting clothes that can be added or removed as needed to aid in the evaporation of sweat.
  - Suspenders may be used instead of belts which can constrict and reduce circulation.
4. Thin cotton fabric is good since it helps evaporate sweat. Wear a cotton t-shirt and shorts under cotton or wool thermal underwear and wool or thermal trousers.
5. Wear socks with high wool content and insulated boots. When two pairs of socks are worn, the inside pair should be smaller and made of cotton.
6. Wear a hat. We lose up to 40 percent of our body heat through our head if it is not Covered.
7. Gloves should be worn below 40°F. Mittens are recommended when the air temperature is 0°F or less
8. Wear a face mask and scarf if it is windy or extremely cold and cover your mouth to protect your lungs.

## **Ultraviolet Light Hazards**

Sunlight, which contains ultraviolet radiation (UV), can be a hazard to the eyes or skin. Unprotected employees working in sunlight risk exposure to UV radiation and skin cancer. The number of Melanoma skin cancer cases, the most serious type of skin cancer, is rapidly rising in the United States. Melanoma accounts for more than three-fourths of skin cancer-related deaths each year, though most skin cancers can be cured if detected early enough.

### **Risk Factors for Skin Cancer Include:**

1. Work or spending extended time outdoors
2. Fair skin
3. Blonde, red, or light brown hair
4. Freckles or burn before tanning
5. Numerous, large, or irregular moles
6. Serious sunburns

## **Preventative Measures**

### **Cover Up**

Wear protective clothing that does not transmit visible light to protect as much of your skin as possible. To determine if a certain piece of clothing will protect you, place your hand between the fabric and a light source. If you can see your hand through the fabric, it offers little protection against sun exposure.

### **Frequently Apply Sunscreen**

- a. Use a sunscreen with a Sun Protection Factor (SPF) of 15 or higher. An SPF of 15 blocks out 93% of the burning UV rays; an SPF of 30 blocks out 97%.
- b. Apply sunscreen liberally for at least 15 minutes before going outside. Reapply every 2 hours or more frequently if you sweat a lot or are in water.
- c. Do not rely on sunscreen alone. Combine with other clothing and eye protection.

### **Wear a Hat**

- a. A broad-brimmed hat is ideal because it protects the neck, ears, eyes, forehead, nose, and scalp.
- b. A baseball cap does not protect the ears or neck where skin cancers frequently develop.

### **Wear Sunglasses that Block UV Rays**

- a. UV-reflective sunglasses can help protect your eyes from sun damage.
- b. Ideal sunglasses do not have to be expensive to block 99 to 100 % of UVA and UVB radiation. Check the label to be sure they do.
- c. Darker glasses are not necessarily the best. UV protection comes from an invisible chemical applied to the lenses, not from the darkness or color of the lenses.

### **Limit Sun Exposure.**

- a. UV is most intense when the sun is highest in the sky between 10 AM and 4 PM. If you are unsure about the sun's intensity, take this test: If your shadow is shorter than

- you, the sun's rays are the strongest.
- b. Seek shade whenever possible.
  - c. Check the UV index in your area. The UV index is usually broadcast on TV or radio stations. The UV index rates the amount of UV radiation reaching the surface on a scale of 1 to 10+ and is forecast daily for 58 cities. The higher the number the greater the exposure to UV radiation.

### **Signs and Symptoms**

- a. Know the signs and symptoms of skin cancers and see a healthcare clinician if an unusual skin change occurs.
- b. The most important warning sign for skin cancer is a spot that is changing in size, shape, or color over 1 month to 1-2 years.

**Pittsburg County**  
**Temperature Extremes Program Acknowledgement**

I, \_\_\_\_\_ have received a copy of the company's Temperature Extremes Policy and I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

# Trenching and excavation

## ***Pittsburg County***

### **Trenching and shoring program**

#### **Purpose**

The trenching and shoring program is designed to provide our employees with appropriate protection from injury due to the risk associated with hazards that may be found in or around excavations or trenches.

The type and level of safety procedure will be dependent on the specific hazards to be controlled at each job site. Once defined and unless otherwise specifically instructed otherwise, all company employees will follow proper trenching and shoring procedures in accordance with their training and instruction. Failure to properly adhere to these procedures is grounds for disciplinary actions up to and including termination.

#### **Responsibility**

Management and employees share the responsibility to follow proper trenching and shoring procedures. Management is further responsible for updating this program as necessary to address site conditions or site-specific issues needing further actions. While all employees will be instructed as to the significance of the trenching and shoring procedures only those designated "competent" as defined below are authorized to approve proper sloping of trench walls or recommend the use of "trench boxes" or shoring systems.

#### **Determination of needs**

At the beginning of each project/work assignment, an evaluation of the associated risks will be made by affected employees and supervisors using a Job safety analysis. This analysis will include the following consideration and subsequent actions:

- **Utilities and pre-work site inspection-** Prior to excavation the site shall be thoroughly inspected by the competent person to determine if special safety measures must be taken.
- **Surface encumbrances-** All equipment, materials, supplies, permanent installations (for example, buildings or roadways), trees, brush, boulders and other objects at the surface that could present a hazard to employees working in the excavation shall be removed or supported as necessary to protect employees from injury from falling objects.
- **Underground installations-** The location of sewers, telephone, fuel, electric, water lines, or any other underground installations that may be encountered during excavation work shall be determined and marked prior to opening an excavation. Arrangements shall be made as necessary by the competent person with the appropriate utility agency for the protection, removal, shutdown, or relocation of underground installations.

If it is not possible to establish the exact location of these installations, the work may proceed with caution if detection equipment or other safe and acceptable means are used to locate the utility during the slow excavation of the trench.



Excavation shall be done in a manner that does not endanger the underground installations or the employees engaged in the work. Utilities left in place shall be protected by barricades, shoring, suspension or other means as necessary to protect employees.

### **Protection of workers in excavations**

- **Access and means of egress-** Stairs, ladders or ramps shall be provided where employees are required to enter trench excavations over 4 feet deep. The maximum distance of lateral travel (e.g., along the length of the trench) required to reach the means of egress will not exceed twenty-five (25) feet.
- **Structural ramps-** Structural ramps used solely by employees as a means of access or egress from excavations shall be designed by a competent person. Structural ramps used for access or egress of equipment shall be designed by a person qualified in structural design and will be constructed in accordance with the design. Ramps and runways constructed of two or more structural members shall have the structural members connected to prevent movement or displacement.
- **Ladders-** When portable ladders are used, the ladder side rails shall extend a minimum of three (3) feet above the upper surface of the excavation. Ladders shall have nonconductive side rails if work will be performed near exposed energized equipment or systems.
- **Exposure to vehicular traffic-** Employees exposed to vehicular traffic shall be provided with, and shall wear, warning vests or other suitable garments marked with or made of reflective or high-visibility material. Warning vests worn by flagmen shall be red or orange and shall be of reflective material if worn during night work.
- **Employee exposure to falling loads-** No employee shall be permitted underneath loads handled by lifting or digging equipment. Employees shall be required to stand away from any vehicle being loaded or unloaded to avoid being struck by any spillage or falling materials. Operators may remain in the cabs of vehicles being loaded or unloaded when the vehicles provide adequate protection for the operator during loading and unloading operations.
- **Warning system for mobile equipment.** A warning system shall be used when mobile equipment is operated adjacent to the edge of an excavation if the operator does not have a clear and direct view of the edge of the excavation. The warning system shall consist of barricades, hand or mechanical signals, or stop logs.
- **Hazardous atmospheres.** The competent person will test the atmosphere in excavations over 4 feet deep if a hazardous atmosphere exists or could reasonably be expected to exist. A hazardous atmosphere could be expected, for example, in excavations in landfill areas, excavations in areas where hazardous substances are stored nearby, or in excavations near or containing gas pipelines.

Adequate precautions shall be taken to prevent employee exposure to atmospheres containing less than 19.5 percent oxygen and other hazardous atmospheres. These precautions include providing proper respiratory protection or forced ventilation of the workspace.

Forced ventilation or other effective means shall be used to prevent employee exposure to an atmosphere containing a flammable gas more than 10 percent of the lower flammability limit.

When controls are used that are intended to reduce the level of atmospheric contaminants to acceptable levels, continuous air monitoring will be performed by the competent person. The device used for atmospheric monitoring shall be equipped with an audio and visual alarm.

Atmospheric testing will be performed using a properly calibrated direct reading gas monitor. Direct reading gas detector tubes or other acceptable means may also be used to test potentially toxic atmospheres.

Each atmospheric testing instrument shall be calibrated on a schedule and in the manner recommended by the manufacturer except:

- Any atmospheric testing instrument that has not been used within thirty (30) days shall be recalibrated prior to use.
- Each atmospheric testing instrument shall be calibrated at least every six (6) months by a qualified person.
- Copies of calibration records will be forwarded to company management.
- Each atmospheric testing instrument will be field checked immediately prior to use to ensure that it is operating properly.

### **Personal protective equipment**

All employees working in trenches or excavations shall wear appropriate personal protective equipment per company PPE policy.

### **Emergency rescue**

Employees entering bell-bottom pier holes or other similar deep and confined footing excavations shall wear a harness with a lifeline securely attached to it. The lifeline shall be separate from any line used to handle materials and shall be individually attended at all times while the employee wearing the lifeline is in the excavation.

Emergency rescue equipment, such as breathing apparatus, a safety harness and line, and a basket stretcher shall be readily available where hazardous atmospheric conditions exist or may develop during work in an excavation. This equipment shall be attended when in use. Only personnel that have received approved training and have appropriate equipment shall attempt retrieval that would require entry into a hazardous atmosphere. If entry into a known hazardous atmosphere must be performed, then management shall be given advance notice so that the hazards can be evaluated, and rescue personnel placed on standby if necessary.

## **Fall protection**

Each employee at the edge of an excavation 6 feet or more deep shall be protected from falling. Fall protection shall be provided by guardrail systems, fences, barricades, covers, or a tie-back system meeting the requirements of the fall protection program.

Walkways shall be provided where employees or equipment are permitted to cross over excavations. Guardrails shall be provided where walkways, accessible only to on-site project personnel, are six (6) feet or more above lower levels.

## **Protection from hazards associated with water accumulation**

Employees shall not work in excavations that contain or are accumulating water unless precautions have been taken to protect employees against the hazards posed by water accumulation. The precautions taken could include, for example, special support or shield systems to protect from cave-ins, water removal to control the level of accumulating water, or use of safety harnesses and lifelines.

If water is controlled or prevented from accumulating using water removal equipment, the water removal equipment and operation shall be monitored by a person trained in the use of this equipment.

If excavation work interrupts the natural drainage of surface water (such as streams), diversion ditches, dikes, or other suitable means shall be used to prevent surface water from entering the excavation. Precautions shall also be taken to provide adequate drainage of the area adjacent to the excavation. Excavations subject to runoff from heavy rains shall be re-inspected by the competent person to determine if precautions should be taken.

The competent person shall inform workers of the precautions or procedures that are to be followed if water accumulates or is accumulating in an excavation.

## **Stability of adjacent structures**

The competent person will determine if the excavation work could affect the stability of adjoining buildings, walls, sidewalks or other structures.

Support systems (such as shoring, bracing, or underpinning) shall be used to assure the stability of structures and the protection of employees where excavation operations could affect the stability of adjoining buildings, walls, or other structures.

Excavation below the level of the base or footing of any foundation or retaining wall that could be reasonably expected to pose a hazard to employees shall not be permitted except when:

- A support system, such as underpinning, is provided to ensure the safety of employees and the stability of the structure
- The excavation is in stable rock

- A registered professional engineer has approved the determination that the structure is sufficiently removed from the excavation to be unaffected by the excavation activity
- Where review or approval of a support system by a registered professional engineer is required, the department shall secure this review and approval in writing before the work is begun with a copy of this approval provided to management

Adequate protection shall be provided to protect employees from loose rock or soil that could pose a hazard by falling or rolling from an excavation face.

Such protection shall consist of:

- Scaling to remove loose material; Installation of protective barricades, such as wire mesh or timber, at appropriate intervals on the face of the slope to stop and contain falling material; or
- Benching sufficient to contain falling material.

Protection shall be provided by keeping such materials or equipment at least two (2) feet from the edge of excavations, by the use of restraining devices that are sufficient to prevent materials or equipment from falling or rolling into excavations, or by a combination of both if necessary.

Materials and equipment may, as determined by the competent person, need to be stored further than two (2) feet from the edge of the excavation if a hazardous loading condition is created on the face of the excavation.

Materials piled, grouped or stacked near the edge of an excavation must be stable and self-supporting.

### **Inspection by the competent person**

The departmental competent person shall conduct daily inspections of excavations, adjacent areas, and protective systems for evidence of a situation that could result in possible cave-ins, failure of protective systems, hazardous atmospheres, or other hazardous conditions. An inspection shall be conducted by the competent person prior to the start of work and as needed throughout the shift. They shall also be made after every rainstorm or other hazard increasing occurrence. These inspections are only required when the trench will be or is occupied by employees.

Where the competent person finds evidence of a situation that could result in a possible cave-in, failure of protective systems, hazardous atmosphere, or other hazardous conditions, exposed employees shall be removed from the hazardous area until precautions have been taken to secure their safety.

The competent person shall maintain a written log of all inspections conducted. This log shall include the date, work site location, results of the inspection, and a summary of any action taken to correct existing hazards.

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## Requirements for protective systems

### Protection of employees in excavations

Employees in an excavation shall be protected from cave-ins by using either an adequate sloping and benching system or an adequate support or protective system. The only exceptions are:

- Excavations made entirely in stable rock
- Excavations less than 5 feet in depth where examination of the ground by the competent person provides no indication of a potential cave-in

Protective systems shall be capable of resisting all loads that could reasonably be expected to be applied to the system.

### Design of sloping and benching systems

The slope and configuration of sloping and benching systems shall be selected and constructed by the competent person in accordance with either:

- **Option 1 - Allowable configurations and slopes**  
Excavations shall be sloped at an angle not steeper than one and one-half horizontal to one vertical (34 degrees measured from the horizontal), unless the competent person uses one of the other options listed below.

- **Option 2 - Designs using other tabulated data**  
The design of sloping or benching systems may be selected from, and shall be constructed in accordance with, other tabulated data, such as tables and charts. The tabulated charts must be in written form and include all of the following: Identification of the factors that affect the selection of a sloping or benching system; Identification of the limits of use of the data, including the maximum height and the angle of the slopes determined to be safe; other information needed by the user to make correct selection of a protective system:

One copy of the tabulated data that identifies the registered professional engineer who approved the data shall be maintained at the jobsite during construction of the protective system. After that time the data may be stored off the jobsite, but a copy of the data shall be made available to management upon request.

- **Option 3 - Design by a registered professional engineer**  
Sloping and benching systems not utilizing the other options shall be approved by a registered professional engineer.

Designs shall be in written form and shall include at least the following:

- The maximum height and angle of the slopes that were determined to be safe for the project
- The identity of the registered professional engineer approving the design.

At least one copy of the design shall be maintained at the jobsite while the slope is being constructed. After that time, the design need not be at the jobsite, but a copy shall be made available to management upon request.

#### **Design of support systems, shield systems, and other protective systems**

The design of support systems, shield systems, and other protective systems shall be selected and constructed by the competent person in accordance with the following requirements:

- **Option 1- Design of timber shoring in trenches**
  - Shall be made in accordance with the requirements of this program
- **Option 2 - Designs using manufacturer's tabulated data**
  - Support systems, shield systems, or other protective systems drawn from manufacturer's tabulated data shall be constructed and used in accordance with all specifications, recommendations, and limitations issued or made by the manufacturer.
  - Deviation from the specifications, recommendations, and limitations issued or made by the manufacturer shall only be allowed after the manufacturer issues specific written approval.
  - Manufacturer's specifications, recommendations, and limitations, and manufacturer's approval to deviate from the specifications, recommendations, and limitations shall be kept in written form at the jobsite during construction of the protective system. After that time, this data may be stored off the jobsite, but a copy shall be made available to management upon request.
- **Option 3- Designs using other tabulated data**

Designs of support systems, shield systems, or other protective systems shall be selected from and be constructed in accordance with tabulated data, such as tables and charts.

The tabulated data shall be in written form and include all the following:

- Identification of the factors that affect the selection of a protective system drawn from such data.
- Identification of the limits of use of the data
- Information needed by the user to make a correct selection of a protective system from the data.

At least one copy of the tabulated data, which identifies the registered professional engineer who approved the data, shall be maintained at the jobsite during construction of the protective system. After that time, the data may be stored off the jobsite, but a copy of the data shall be made available to management upon request.

- **Option 4- Design by a registered professional engineer**

Support systems, shield systems, and other protective systems not using the options detailed above shall be approved by a registered professional engineer.

Designs shall be in written form and shall include the following:

- A plan indicating the sizes, types, and configurations of the materials to be used in the protective system
- The identity of the registered professional engineer approving the design.

At least one copy of the design shall be maintained at the jobsite during construction of the protective system. After that time, the design may be stored off the jobsite, but a copy of the design shall be made available to management upon request.

### **Materials and equipment**

Materials and equipment used for protective systems shall be free from damage or defects that might affect their proper function.

Manufactured materials and equipment used for protective systems shall be used and maintained in accordance with the recommendations of the manufacturer, and in a manner that will prevent employee exposure to hazards.

When material or equipment used for protective systems are damaged, the competent person shall ensure that these systems are examined to evaluate its suitability for continued use. If the competent person can not assure the material or equipment is able to support the intended loads or is otherwise suitable for safe use, then such material or equipment shall be removed from service. These materials or equipment shall be evaluated and approved by a registered professional engineer before being returned to service.

### **Installation and removal of support**

#### **General**

Members of support systems shall be securely connected to prevent sliding, falling, kickouts, or other potential hazards.

Support systems shall be installed and removed in a manner that protects employees from cave-ins, structural collapses, or from being struck by members of the support system.

Individual members of support systems shall not be subjected to loads exceeding those which those members were designed to support.

Before temporary removal of individual support members begins, additional precautions shall be taken as directed by the competent person to ensure the safety of employees. These precautions could include, for example, the installation other structural members to carry the loads imposed on the support system.

Removal of support systems shall begin at, and progress from, the bottom of the excavation. Members shall be released slowly. If there is any indication of possible failure of the remaining members of the structure or possible cave-in of the sides of the excavation the work shall be halted until it can be examined by the competent person.

Backfilling shall progress together with the removal of support systems from excavations.

#### **Additional requirements for support systems for trench excavations**

Excavation of material to a level no greater than 2 feet below the bottom of the members of a support system is allowed, but only if the system is designed to resist the forces calculated for the full depth of the trench. There shall be no indications while the trench is open of a possible loss of soil from behind or below the bottom of the support system.

Installation of a support system shall be closely coordinated with the excavation of trenches.

#### **Sloping and benching systems**

Employees shall not be permitted to work above other employees on the faces of sloped or benched systems except when employees at the lower levels are protected from the hazard of falling, rolling, or sliding material or equipment

#### **Shield systems**

##### **General**

Shield systems shall not be subjected to loads that are greater than those they were designed to withstand.

Shields shall be installed in a manner that will restrict lateral or other hazardous movement of the shield that could occur during cave-in or unexpected soil movement. Employees shall be protected from the hazard of cave-ins when entering or exiting the areas protected by shields.

Employees shall not be allowed in shields when shields are being installed, removed, or moved vertically.

#### **Additional requirement for shield systems used in trench excavations**

Excavation of material to a level no greater than 2 feet below the bottom of the shield system is allowed, but only if the system is designed to resist the forces calculated for the full depth of the trench. There shall be no indications while the trench is open of a possible loss of soil from behind or below the bottom of the shield system.

#### **Training and duties of program participants**

All personnel involved in trenching or excavation work shall be trained in the requirements of this program. Departmental personnel shall be trained by the departmental competent person with assistance from the safety coordinator.

- Training shall be performed **before** the employee is assigned duties in excavations.
- Retraining will be performed whenever work site inspections conducted by the competent person indicate that an employee does not have the necessary knowledge or skills to safely work in or around excavations.



- Training records will be maintained by the competent person and will be copied to the safety coordinator. These records shall include the date(s) of the training program, the instructor(s) of the training program, a copy of the written material presented, and the names of the employee(s) to whom the training was given.

### **Training and duties of workers**

All personnel that perform work in excavations shall comply with the requirements of this program. These personnel shall receive appropriate training that shall include, at a minimum:

- The work practices that must be followed during excavating or working in excavations
- The use of personal protective equipment that will typically be required during work in excavations, including but not limited to safety toed shoes, hard-hats, and fall protective devices
- Procedures to be followed if a hazardous atmosphere exists or could reasonably be expected to develop during work in an excavation
- Emergency and non-entry rescue methods, and procedure for calling rescue services.

### **Training and duties of the competent person**

The Competent person shall receive the training detailed above and shall, in addition, receive training on the requirements detailed in this program. The Competent person shall:

- Coordinate and actively participate in the training of departmental employees. A copy of the training records shall be maintained by the competent person, and shall be copied to management
- Ensure daily, or more often as detailed in this program, that work site conditions are safe for employees to work in excavations
- Determine the means of protection (sloping back the sides of the excavation, use of trench shields, or shoring) that will be used for each excavation project
- Ensure, if required, that the design of a protective system has been completed and approved by a registered professional engineer before work is begun in the excavation.

### **Definitions**

**Accepted engineering practices** means the standards of practice required by a registered professional engineer.

**Aluminum hydraulic shoring** means a manufactured shoring system consisting of aluminum hydraulic cylinders (cross braces) used with vertical rails (uprights) or horizontal rails (wales). Such system is designed to support the sidewalls of an excavation and prevent cave-ins.

**Bell-bottom pier hole** means a type of shaft or footing excavation, the bottom of which is made larger than the cross section above to form a bell shape.

**Benching (Benching system)** is a method of protecting employees from cave-ins by excavating the sides of an excavation to form one or more horizontal steps, usually with vertical or near-

vertical surfaces between levels.

**Cave-in** means the movement of soil or rock into an excavation, or the loss of soil from under a trench shield or support system, in amounts large enough to trap, bury, or injure and immobilize a person.

**Competent person** means one who has been trained to identify hazards in the workplace, or working conditions that are unsafe for employees, and who has the authority to have these hazards corrected. The competent person will conduct all required tests and inspections as detailed in this program, and ensure that employees working in excavations have been trained and are following the requirements of this program.

**Cross braces** mean the horizontal members of a shoring system installed from side to side of the excavation. The cross braces bear against either uprights or wales.

**Department** means a department that conducts work in excavations.

**Excavation** means any man-made cut, cavity, trench, or depression in an earth surface formed by earth removal.

**Faces or sides** mean the vertical or inclined earth surfaces formed as a result of excavation work.

**Failure** means the movement or damage of a structural member or connection that makes it unable to support loads.

**Hazardous atmosphere** means an atmosphere that is explosive, flammable, poisonous, corrosive, oxidizing, irritating, oxygen deficient, toxic, or otherwise harmful, that may cause death, illness, or injury.

**Kickout** means the accidental movement or failure of a cross brace.

**Protective system** means a method of protecting employees from cave-ins, from material that could fall or roll from an excavation face into an excavation, or from the collapse of adjacent structures. Protective systems include support systems, sloping and benching systems, shield systems, and other systems that provide the necessary protection.

**Ramp** means an inclined walking or working surface that is used to gain access to one point from another. A ramp may be constructed from earth or from structural materials such as steel or wood.

**Registered professional engineer** means a person who is registered as a professional engineer.

**Safety coordinator** means the individual responsible for developing and implementing this program, conducting unannounced work site inspections, and ensuring that the departments comply with the program requirements.

**Sheeting** means the members of a shoring system that retain the earth in position and in turn

are supported by other members of the shoring system.

**Shield (Shield system)** means a structure used in an excavation to withstand cave-ins and which will protect employees working within the shield system. Shields can be permanent structures or portable units moved along as work progresses. Shields used in trenches are usually referred to as "trench boxes" or "trench shields."

**Shoring (Shoring system)** means a structure that is built or put in place to support the sides of an excavation to prevent cave-ins.

**Sides.** See "Faces."

**Sloping (Sloping system)** means sloping the sides of the excavation away from the excavation to protect employees from cave-ins. The required slope will vary with soil type, weather, and surface or near surface loads that may affect the soil in the area of the trench (such as adjacent buildings, vehicles near the edge of the trench and so forth).

**Stable rock** means natural solid mineral material that can be excavated with vertical sides that will remain intact while exposed.

**Structural ramp** means a ramp built of steel or wood, usually used for vehicle access. Ramps made of soil or rock are not considered structural ramps.

**Support system** means a structure such as underpinning, bracing, or shoring, which provides support to an adjacent structure, underground installation, or the sides of an excavation.

**Tabulated data** means tables and charts approved by a registered professional engineer and used to design and construct a protective system.

**Trench (Trench excavation)** means a narrow excavation (in relation to its length) made below the surface of the ground.

**Trench box or shield.** See "Shield".

**Uprights** mean the vertical members of a trench shoring system placed in contact with the earth and usually positioned so that individual members do not contact each other. Uprights placed so that individual members are closely spaced, in contact with or interconnected to each other, are often called "sheeting."

**Wales** are horizontal members of a shoring system placed in the direction of the excavation face whose sides bear against the vertical members of the shoring system or earth (the uprights or sheeting).

**Protection of the public:** Barricades, walkways, lighting and posting shall be provided as necessary for the protection of the public prior to the start of excavation operations.

Guardrails, fences, or barricades shall be provided on excavations adjacent to walkways, driveways and other pedestrian or vehicle thoroughfares. Warning lights or other illumination

shall be maintained as necessary for the safety of the public and employees from sunset to sunrise.

Wells, holes, pits, shafts and all similar hazardous excavations shall be effectively barricaded or covered and posted as necessary to prevent unauthorized access. All temporary excavations of this type shall be backfilled as soon as possible.

Walkways or bridges protected by standard guardrails shall be provided where employees and the public are permitted to cross over excavations. Where workers in the excavation may pass under these walkways or bridges, a standard guardrail and toe board shall be used

**Pittsburg County**  
**Trenching and excavation program acknowledgement**

I, \_\_\_\_\_ have received training on the proper assessment, expectations, and safe options for trenching and excavations. I have asked and received clarification on all questions regarding this program. I understand that my failure to follow the requirements outlined in this program may result in disciplinary actions, up to, and including, termination.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

RESOLUTION  
25-254

The Board of County Commissioners, Pittsburg County met in regular session on Monday April 14, 2025.

WHEREAS, the following individuals wish to make a donation to the Pittsburg County Animal Shelter Donation Account (1235-1-8020-2202)

David Robinson - \$400.00

WHEREAS, the Board of County Commissioners accepts this donation on behalf of the Pittsburg County Animal Shelter, to be deposited into the Pittsburg County Animal Shelter's Donation account (1235-1-8020-2202), to be used for the items that cannot be purchased through the Maintenance & Operations accounts.

THEREFORE, BE IT RESOLVED, the Board of County Commissioners. Pittsburg County, do hereby approves this donation, to be deposited into the Pittsburg County Animal Shelter's Donation Account.

BOARD OF COUNTY COMMISSIONERS  
PITTSBURG COUNTY, OKLAHOMA

ATTEST:



CHAIRMAN

VICE-CHAIRMAN

MEMBER

COUNTY CLERK

*[Signature]*

*[Signature]*

*[Signature]*

*[Signature]*



RESOLUTION  
25-255

The Board of County Commissioners, Pittsburg County, met in regular session on Monday, April 14, 2024.

WHEREAS, Pittsburg County District 2, issued the following purchase order:

6940, issued on February 5, 2025 to Warren Power & Machinery Inc. in the amount of \$2573.56 for Fans

WHEREAS, the above-mentioned Purchase Order was not used and, therefore no longer needed, and should be canceled.

THEREFORE, BE IT RESOLVED, the Board of County Commissioners, Pittsburg County, do hereby cancel Purchase Order 6940 for FY 2024-2025

BOARD OF COUNTY COMMISSIONERS  
PITTSBURG COUNTY, OKLAHOMA

ATTEST:



CHAIRMAN

*[Signature]*

VICE-CHAIRMAN

*[Signature]*

MEMBER

*[Signature]*

COUNTY CLERK

*[Signature]*



2025TOW25002-Palmer WC  
N 3970 RD aka Ragan RD  
STATE OF OKLAHOMA  
COUNTY OF PITTSBURG  
APPLICATION FOR PERMIT  
PUBLIC SERVICE/PIPELINE CROSSING

PERMIT# 25-015

We, the undersigned, hereby petition the Board of County Commissioners, Pittsburg County, to grant a permit for a public service, pipeline crossing, ingress and egress, or line installation as described below and in accordance with the provisions as listed.

PLEASE PRINT

PUBLIC SERVICE/PIPELINE OWNER NAME: Tall Oak Woodford, LLC

CONTACT: John Jeffreys / Selyna Parker EMAIL: john@redlandman.com - email Selyna to

ADDRESS: 910 Louisiana Street, Suite 4200 PHONE: 405 823 2511 John Jeffrey

CITY: Houston STATE: TX ZIP CODE: 77002

CONSTRUCTION COMPANY NAME: TBD

CONTACT: Junior Bailey EMAIL:

ADDRESS: PHONE: 580 326 4768

CITY: STATE: ZIP CODE:

TYPE OF INSTALLATION (Please mark all boxes that apply)					
<input type="checkbox"/> Electric	<input checked="" type="checkbox"/> Permanent Line	<input type="checkbox"/> Salt Water	<input type="checkbox"/> Residential	<input checked="" type="checkbox"/> Boring	
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Temporary Line	<input type="checkbox"/> Fresh Water	<input type="checkbox"/> Commercial	<input type="checkbox"/> Trenching	
<input type="checkbox"/> Oil		<input type="checkbox"/> Other	<input type="checkbox"/> Agricultural	<input type="checkbox"/> In/Through existing culvert	
<input type="checkbox"/> Water			<input type="checkbox"/> Oil/Gas Service Road	<input type="checkbox"/> Temporary Road	
<input type="checkbox"/> Telephone			<input type="checkbox"/> Other	<input type="checkbox"/> Cross Bridge	
<input type="checkbox"/> Sewer				<input type="checkbox"/> Other:	
<input type="checkbox"/> Other					

This permit is to erect, construct and maintain a Pipeline along, upon and across the hereinafter said county highway/road for the purpose of transporting, selling, and using natural Gas

LOCATION  
Beginning at LAT: N35.08891802' LO and Cross N 3970 RD aka Ragan RI  
GPS Location (in decimals) freeway route County Road Name

Approximately 612' feet miles of Wolfhunters LN and ending at  
North, South, East, West Name of Closest Intersecting Road or Highway

LAT: N35.08891919' LONG: Embraced in Section 09 Township 07N Range 13E  
GPS Location (in decimals)

PIPELINES		ELECTRIC
SIZE 16		
ALLOY/MATERIAL Steel		VOLTAGE
WALL THICKNESS 0.375		CONDUCTOR SIZE
CONTENTS Natural Gas		TYPE OF STRUCTURE
MFG. TEST PRESSURE		RULING SPAN
MAX. OPERATING PRESSURE 285		
WORKING PRESSURE 100		
COMMUNICATIONS		SERVICE ENTRANCE
WIRES/PAIRS/STRANDS		
GUAGE		DIAMETER OF CULVERT PIPE
CABLE TYPE		LENGTH OF CULVERT PIPE

CASING

SIZE \_\_\_\_\_ ALLOY/MATERIAL \_\_\_\_\_ WALL THICKNESS \_\_\_\_\_

FLOODPLAIN ADMINISTRATOR'S REVIEW

Upon review, I, Tawana Cathey, a Floodplain Administrator for Pittsburg County, have determined that the above-referenced public service/pipeline crossing permit:

X Does \_\_\_\_\_ Does Not \_\_\_\_\_

fall within any floodplain.

Tawana Cathey

Signature, Pittsburg County Floodplain Administrator

(Administrator: Please attach a copy of the floodplain permit and receipt where permit was paid if road crossing is within a floodplain)

If granted, this permit is subject to the following conditions, requirements and covenants, to-wit, please initial that you have read each condition, requirement or covenant:

1. Applicant/contractor is aware that all road crossing permits for PITTSBURG COUNTY shall require approval from the Pittsburg County Floodplain Administrator's Office and that all permits and fees owed to the Floodplain Administrator's Office will be paid in full before approval is given by the Board of County Commissioners.

Initial: JEG

2. Application for road crossing must be submitted no later than 5 days before a meeting of the Board of County Commissioners with a check for the amount of permit made payable to the Pittsburg County Commissioners. The petitioner/contractor shall contact the County Commissioners Office at the completion of crossing for an onsite inspection.

Initial: JEG

3. The applicant must agree to hold Pittsburg County harmless for any damage or injury to persons or property caused by or resulting from the construction, maintenance, operation, or repair of the facilities on, under, or over the County right-of-way. The petitioner/contractor will be responsible for any damage resulting from deviation of the plat.
- Initial: JEG
4. All crossings shall be bored on blacktop/asphalt roads. Cutting may be permitted on dirt roads, ditches, or other surfaces with approval from the Board of County Commissioners. Blasting is not permitted.
- Initial: JEG
5. In construction pipelines or utility routes that cross county highways or roads, NO DITCH, TRENCH, OR BORING, shall be done by the applicant/contractor until approved by the Board of County Commissioners. All ditching and trenching shall be completed to the County Commissioner's specifications. Applicants, contractors or owners shall maintain crossing. (Signs, grass, brush control, etc.)
- Initial: JEG
6. The petitioner/contractor shall furnish all flag men, lights, barricades, and warning signs meeting all laws and regulations, including those in the "Manual on Uniform Traffic Control Devices" appropriate for the construction project. The petitioner/contractor agrees to keep the road open to traffic unless approved by the Board of County Commissioners. At the conclusion of such work, the right-of-way must be in a presentable condition.
- Initial: JEG
7. When notified to do so by the Board of County Commissioners, the petitioner/contractor agrees at their expense to make all changes in the facility on County right-of-way.
- Initial: JEG
8. Relocation - Applicant, upon 30 days written notice, agrees to relocate utilities at their expense should it interfere with County construction and/or maintenance.
- Initial: JEG
9. Aerial facilities - Clearance above the traffic lanes of the road at all aerial pole line crossings shall comply with applicable safety codes and will not be less than 20 feet. All poles, posts, stubs, fixtures, down guys, wires, and other appurtenances must be kept in good repair at all times and free from weeds and brush within a 5-foot area of the installation. These facilities, when paralleling the roadway, shall be single pole construction and located within 3 feet of the fence line, if a fence exists. If no fence exists, the right-of-way shall be located by an Oklahoma Registered Land Surveyor at the petitioner's expense and a copy provided to the Board prior to construction. All crossings shall be as nearly perpendicular as possible. Facility shall not interfere with the natural flow of waters or ditch.
- Initial: JEG
10. Underground facilities - All shall be a minimum of 5 feet below the elevation of the center line of the road, but not less than 4 feet below the bottom of the ditch. Crossings shall be encased from right-of-way line to right-of-way line and be vented off the right-of-way lines. Concrete caps of 4' wide and 6" deep may be required from edge of road to fence line. Identification markers shall be installed at each right-of-way line directly above the facility. The markers must identify the owner's name, address and telephone

number, size of facility, and emergency contact number in black with a yellow background. Marker must be at least 130 sq. inches in area and erected at a height plainly visible from the road right-of-way.

All underground electric cable crossings must be placed in a conduit and be a minimum of 4 feet below the ditch flow lines. Conduit placed beneath a roadway must be steel, HDPE, heavy-duty PVC, or fiberglass if it is designed to withstand roadway loading and is properly protected.

Steel pipelines crossing the right-of-way may be, upon approve of the Commissioner, installed without encasement if the carrier pipe material within the right-of-way is superior to the carrier pipe material outside the right-of-way by being of steel at least one grade better and of the same wall thickness, or a minimum of one wall thickness greater and of the same alloy. Pipe must be properly protected from corrosion.

Facilities such as water and sanitary sewer lines crossing the county right-of-way shall be encased. Maintenance will be performed by a method that will not disturb the through lanes or interfere with traffic. All conduits shall be sufficient to withstand roadway loadings.

Initial: JEG

11. All section corners and ¼ section corners shall be protected. No pipeline or utility line shall cross an intersection diagonally. No liens shall cross within 50 feet of a ¼ section corner or 100' of a bridge.

Initial: JEG

12. Owners of all facilities shall be responsible, at their own expense, for decommissioning of sites. Roads and right-of-way shall be restored to the original condition or better.

Initial: JEG

13. All road crossings shall comply with all Department of Transportation and/or Oklahoma Corporation Commission pipeline safety standards rules and regulations in effect at the time of the permit.

Initial: JEG

14. All pipelines made of non-metallic materials must have a tracer wire installed so the pipeline can be located from above the ground.

Initial: JEG

15. Above ground water lines are temporary and shall be placed within three (3) feet of fence line or county right-of-way as not to disrupt road maintenance. All temporary water lines shall be marked or identified with a company contact number or sign at every county road crossing.

The type of temporary road crossing, either above the road surface or trenched, are at the discretion of the individual commissioner. Trenched lines shall be at sufficient depth as to not interfere with normal maintenance and shall be removed at applicant's expense. The owner, firm or company requesting the permit for temporary or permanent line(s) shall be responsible for all damages to county roads or right-of-way caused by such installation. Temporary installation permits are for a period of thirty (30) days. A new permit will be required for each thirty (30) day time period.

Initial: JEG

16. Any pipe or tin horns to be installed shall be a beveled end at a 45° angle with concrete end treatments. The commissioner shall approve proper diameter of pipe.

Initial: JEG

**FEE SCHEDULE**  
(Check must accompany permit)

Floodplain Inspection Fee (if necessary)	\$50.00 each
Floodplain Oil & Gas Pipeline Burial Permit Fee	\$300.00 each
Floodplain Permit extension	1/2 of permit fee each (all floodplain permits expire 6 months for original permit date)
Road Bore - Permanent	\$1,000.00 each
Domestic or livestock water 3" diameter or less	N/C
Cut or trenched permanent	\$1,500.00 each
Temporary lines through culverts/bridges	\$1,500.00 each
Temporary buried line, cut or trenched	\$1,500.00 each
Temporary Road Crossing Bridge	\$1,500.00 each

**NOTE: FAILURE TO NOTIFY COMMISSIONERS OF HEAVY LOAD MOVEMENT OR IF A LINE OR SERVICE ENTRANCE IS PLACED IN COUNTY RIGHT-OF-WAY WITHOUT THE PROPER PERMIT(S) MAY RESULT IN A FINE UP TO \$5,000 PLUS COURT COSTS**

**PETITIONER/CONTRACTOR'S ATTESTMENT**

I hereby attest to the accuracy of the information contained on this application. I further certify that, in my professional opinion, the facility line is installed, the drawings, plans and specifications therefore comply in all respects with the requirement of said permit.

*Tall Oak Woodford, LLC*

*By: John D. [Signature]*  
Petitioner/Contractor Signature

*3/20/2025*  
Date

*Vice President, Deputy General Counsel*  
Title

*832-608-6154*  
Phone Number

PERMIT APPROVAL

The undersigned Board of County Commissioners, Pittsburg County, do hereby grant the crossing described in the application hereinabove set forth; provided that, the same shall be subject to the terms and conditions of the application incorporated herein by this reference.

Approved on the 14 day of April, 20 25.

Pittsburg County District # 3

Company Check# 037 Date of Check 3/27/25 Amount of Check 1000.00

COMMISSIONERS COMMENTS/CHANGES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTEST:



BOARD OF COUNTY COMMISSIONERS  
PITTSBURG COUNTY, OKLAHOMA

Carl R.  
District 1 Commissioner

Mike Haynes  
District 2 Commissioner

Ronald L.  
District 3 Commissioner

Hope Transmell  
County Clerk

Email the approved permit to:

[john@redlandman.com](mailto:john@redlandman.com)

and

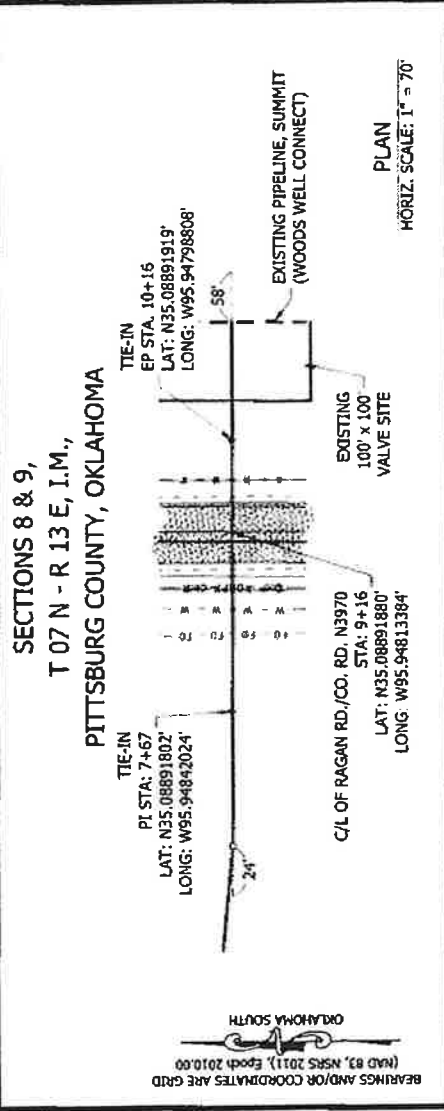
[selyna.parker@summitmidstream.com](mailto:selyna.parker@summitmidstream.com)

09-07N-13E

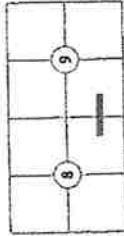
Approximate  
location of the  
crossing

Image © 2025 Airbus

Wolfhantopfen



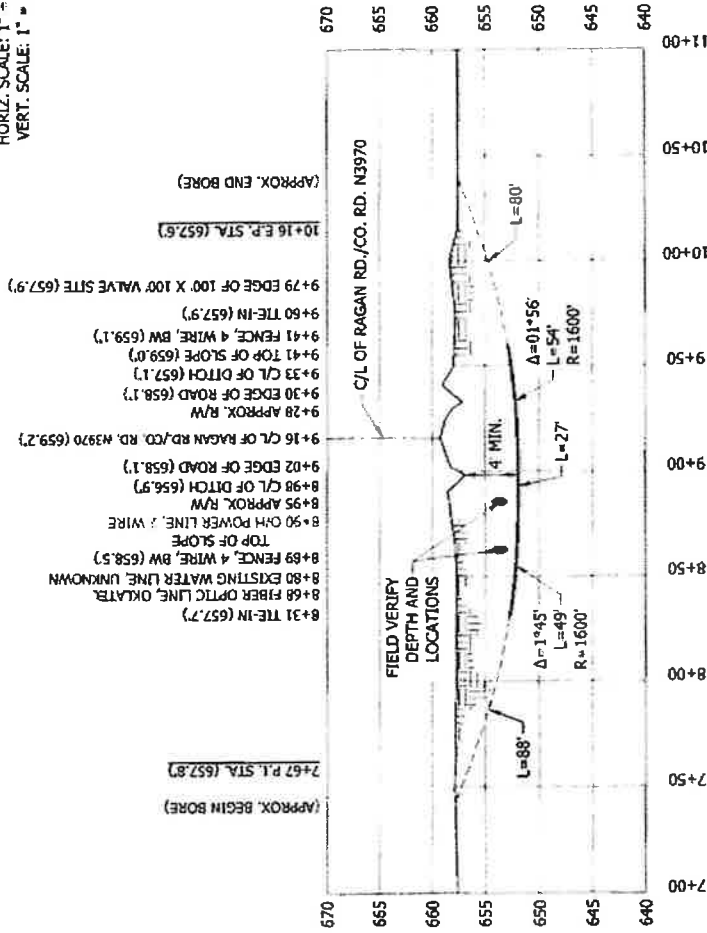
VICINITY MAP: N.T.S.



PLAN AND PROFILE SHOWING A PROPOSED SUMMIT  
PIPELINE CROSSING RAGAN RD./CO. RD. N3970 BEING 612  
FEET NORTH OF RAGAN RD./CO. RD. N3970 AND  
WOLF HUNTERS LN. JCT. AND 612 FEET NORTH OF THE  
APPROX. SW COR. SEC. 9, BETWEEN SECTIONS 8 AND 9,  
TWP 07N, R13E, PITTSBURG COUNTY, OKLAHOMA

PROFILE

HORIZ. SCALE: 1" = 70'  
VERT. SCALE: 1" = 14'



PALMER VIC  
16 O.D. X 0.312 W.T., X-52, W/14-16 MIL FBE & 30 MIL ARO  
ENTRY TO EXIT TIE-IN TO TIE-IN  
= 298' = 129'



Gateway  
Gateway Services Group, LLC

EXHIBIT "A" PRELIMINARY  
PALMER VIC  
T 07 N - R 13 E, I.M.,  
PITTSBURG COUNTY, OKLAHOMA  
RAGAN RD./CO. RD. N3970 (1-16) CROSSING



NOTE:  
This exhibit represents a proposed pipeline route for eventual easement  
acquisition. The footcages and ties shown hereon are from lines of  
occupation and do not reflect actual boundary lines. This exhibit does not  
comply with the O.B.P.E.L.S. minimum standards for land boundary  
surveys. Any monumentation shown hereon has not been verified as being  
actual section, quarter section or property corners.  
All ownership and title information shown hereon has been provided and/or  
verified by others.

The location of pipeline facilities as shown hereon must be considered as  
approximate only. Before digging or for an exact location, please contact  
your state's underground utility location service.

DATE	BY	SCALE	FILE
25-03-13	0311275	1" = 14'	0311275
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25-03-13	0311275	1" = 14'	0311275

LINE NO.	DESCRIPTION	DATE
1	EXISTING PIPELINE	
2	PROPOSED PIPELINE	
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480	PROPOSE	



To: PITTSBURG COUNTY

205048

Date:

03/27/2025

Invoice number	Invoice date	Description	Gross amount	Payment amount
ROW CK RQST 3/2	3/25/2025	N 3970 RD AKA RAGAN RD	\$1,000.00	\$1,000.00
VENDOR #: 205048			TOTALS:	
PITTSBURG COUNTY			\$1,000.00	\$1,000.00

FOR SECURITY PURPOSES, THE FACE OF THIS DOCUMENT CONTAINS A COLORED BACKGROUND AND MICROPRINTING IN THE BORDER

Tall Oak Woodford, LLC

JP Morgan Chase

00000037

910 Louisiana Street  
Suite 4200  
Houston, TX 77002  
USA

9-32/720 160

DATE  
03/27/2025

AMOUNT  
\$1,000.00

\*\*\* One Thousand and 00/100

VOID AFTER 90 DAYS

PAY TO THE ORDER OF  
PITTSBURG COUNTY  
ROOM 100, COUNTY COMMISSIONERS  
115 E. CARL ALBERT PKWY

McALESTER, OK 74501  
USA



SECURITY FEATURES INCLUDED. DETAILS ON BACK

00000037 072000326 687572761



## RIGHT OF WAY CHECK REQUEST

CHECK DETAILS				
GATHERING ENTITY:	Tall Oak Woodford, LLC			
DATE REQUESTED:	March 14, 2025	DATE NEEDED:		RUSH? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
PAYEE NAME:	PITTSBURG COUNTY			
PAYEE ADDRESS:	ROOM 100 COUNTY COMMISSIONERS 115 E CARL ALBERT PKWY MCALISTER, OK 74501			
CHECK AMOUNT:	\$1,000.00	Road Permit		
CHECK DESCRIPTION:	N 3970 RD aka Ragan RD	CAPITAL EXPENSE (OR) <input checked="" type="checkbox"/> OPERATING EXPENSE		
PROJECT INFORMATION				
PROJECT CODE:	2025TOW25002	LOCATION CODE:		
PROJECT NAME:	PALMER WC			
TRACT NUMBER:	See Below			
PAYMENT FOR:	Road Permit			
FOR ROW / EASEMENT AGREEMENTS ONLY				
PROPERTY OWNER(S)/LANDOWNER(S): PITTSBURG COUNTY ROOM 100 COUNTY COMMISSIONERS				
Tall Oak Woodford, LLC 2025TOW25002 - PALMER WC		March 14, 2025 W-9 Included w/ attached document		
PITTSBURG COUNTY		\$1,000.00		
ROOM 100 COUNTY COMMISSIONERS 115 E CARL ALBERT PKWY MCALISTER, OK 74501		Perm Additional Roads Feet \$/Rod / ROW Cost SSG / Other Permit / Adjust Total Balance		
Road Permit N 3970 RD aka Ragan RD		\$1,000.00 \$1,000.00 \$0.00		
COMMENTS:				
REQUIRED APPROVAL				
BUSINESS SPONSOR NAME / TITLE:	SELYNA PARKER, LAND ADMINISTRATION MANAGER			
BUSINESS SPONSOR SIGNATURE:				

#	Parcel ID	Type	Fees	Roads	\$ / Rod	SSG	Permit / Adj	TOTAL
1.5	N 3970 RD aka Ragan RD	ROAD CROSSING					\$1,000.00	\$1,000.00
							\$1,000.00	\$1,000.00

## PLEASE READ CAREFULLY.

### THE APPROVAL PROCESS AND FEE FOR PUBLIC SERVICE & PIPELINE CROSSING PERMITS HAS CHANGED.

1. Once you have picked up or received a Application for Permit from the Board of County Commissioners, Pittsburg County, you should fill in the application has usual. A fillable form of this permit is available under the forms section on Pittsburg County's website at [pittsburg.okcounties.org](http://pittsburg.okcounties.org).
2. Once your permit is ready for approval, please deliver to the Pittsburg County Floodplain Administrator's Office. You may want to email them a copy of this permit so that they can make the determination of whether this location is located within a floodplain, the Floodplain Administrator's email address is [floodplain.pittsburgco@gmail.com](mailto:floodplain.pittsburgco@gmail.com). If this location is located within a floodplain, it will be necessary to acquire a floodplain permit before this permit is presented to the Board of County Commissioners. Please Be Advised, the Board of County Commissioners, Pittsburg County, will not act on this permit until a floodplain determination has been made, and if required, a floodplain permit has been issued. You can find the fee schedule in the body of the permit. You will want to provide this form in duplicate, should you wish to obtain an original copy.
3. Once the determination, and if required, a floodplain permit is issued, this/these permit(s) must be delivered to the Board of County Commissioners Office, 115 E. Carl Albert Parkway, Room 100, McAlester, Oklahoma, 74501 along with payment for the permit, which can be found in the fee schedule located in the body of the permit.

Email the approved permit to:  
[john@redlandman.com](mailto:john@redlandman.com)  
and  
[selyna.parker@summitmidstream.com](mailto:selyna.parker@summitmidstream.com)

**PITTSBURG COUNTY  
FLOODPLAIN DEVELOPMENT  
PERMIT APPLICATION**  
For Proposed Development on  
LANDS LOCATED WITHIN FLOODPLAIN AREAS

To comply with floodplain management regulations and to minimize potential flood damage, if you are building within an identified flood hazard area, you must agree to construct your proposed development in accordance with the following special provisions.

**SPECIAL FLOODPLAIN PROVISIONS:**

1. For RESIDENTIAL structures, the lowest floor (including basement) must be elevated at or above the base flood elevation (100-year flood elevation) as delineated in the Pittsburgh County Floodplain Regulations.
2. For NON-RESIDENTIAL structures, the lowest floor must be elevated at or above the base flood elevation, or flood proofed to withstand depths, pressures, velocities, impact and uplift forces associated with the 100-year flood.
3. For ALL STRUCTURES, the foundation and the materials used must be constructed to withstand the pressures, velocities, impact and forces associated with the 100-year flood.
4. All utility supply lines, outlets, switches and equipment must be installed and elevated so as to minimize damage from potential flooding. Water and sewer connections must have automatic back flow devices installed.
5. You must submit certification on the attached form(s) from a REGISTERED ENGINEER, ARCHITECT, or LAND SURVEYOR, that the floor elevation and/or flood proofing requirements have been met. Failure to provide the required certification is a violation of this permit.

**AUTHORIZATION**

I have read or had explained to me and understand the above special provisions for floodplain development. Authorization is hereby granted the permitting authority and their agents or designees, singularity or jointly, to enter upon the above-described property during daylight hours for the purpose of making inspections for any reason consistent with Pittsburgh County Floodplain Regulations.

Tall Oak Woodford, LLC

By: John Dill  
Signature of Applicant

April 2, 2025  
Date

John Griffin, VP-Deputy General Counsel  
Print Name

**PITTSBURG COUNTY FLOODPLAIN  
DEVELOPMENT PERMIT/APPLICATION FORM**  
**For Proposed Development on**  
**LANDS LOCATED WITHIN FLOODPLAIN AREAS**

Applicant Name: Tall Oak Woodford, LLC Permit No.: \_\_\_\_\_  
Address: 910 Louisiana Street, Suite 4200 Permit Fee: \_\_\_\_\_  
Houston, TX 77002

List Type and Purpose of Development: Natural Gas Pipeline  
Located: Crossing N3970 RD, aka Ragan RD 612 'ft north of Wolfhunters Lane

Is property to be located in an identified Special Flood Hazard Area (Regulatory Floodplain)? Yes: X No: \_\_\_\_\_

If yes, complete the following and require certified elevation of lowest floor (including basement) and lowest adjacent grade.

Engineer: Surveyor - Gary Paule, Gateway Services Group LLC. CA 4091

Contractor: TBD

Name of Community: Pittsburg County Unincorporated Areas

NFIP Community No. Number: 400494

Applicant Request That (To):  
Construct        Mine        Construct Addition        Remodel        Elevate        Drilling         
Burial, Pipeline or Cable X Demolish        Add Fill        Manufactured Housing (Placement)         
Storage (Equipment or Supplies)       

Latitude: N35.08891880 Longitude: W95.94813384

Base Flood Elevation: 658.7 ft. FEMA 100 yr. (est BFE) Proposed Lowest Flood Elevation: Top of pipe at C/L Ragan RD. = 652.0 ft.

Flood Map Effective Date: July 22, 2010

Flood Zone Type: (please circle) (A) B C X Other: \_\_\_\_\_

Community – Panel No.: Panel: 0275

Lowest Finished Floor Elevation: N/A Lowest Adjacent Grade: N/A

Plans, specifications and application for permit filed by the applicant shall constitute by reference, a part of this permit.

Tall Oak Woodford, LLC Date 4/2/2025  
By: John Griffith  
Signature of Applicant

John Griffith, VP-Deputy General Counsel  
Print Name Here

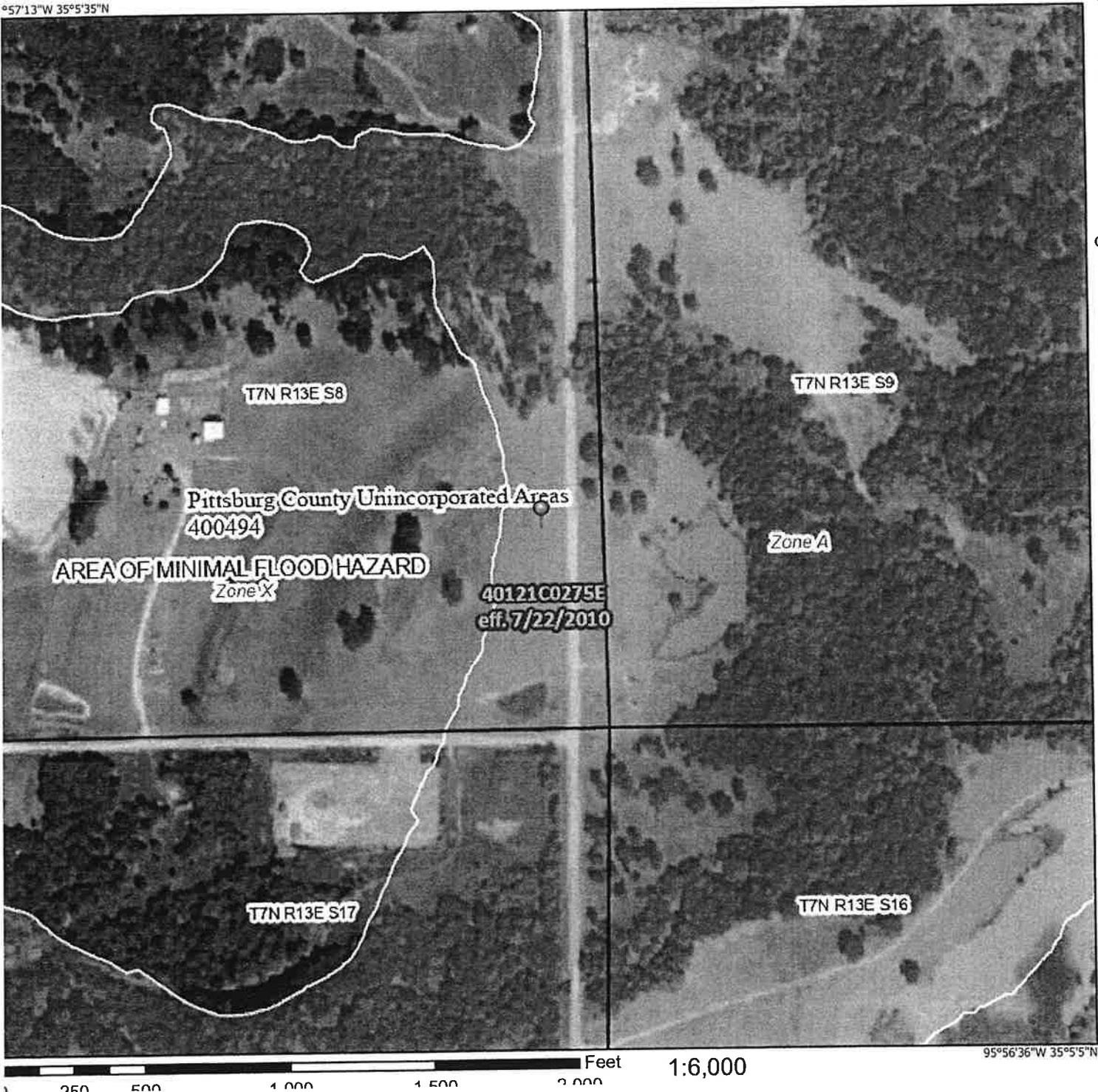
DO NOT WRITE BELOW THIS AREA – FLOODPLAIN OFFICE USE ONLY

Approved: X Not Approved: \_\_\_\_\_ Date: 4/8/2025

Tara Cather Has Permit Fee Been Collected? Yes: X No: \_\_\_\_\_  
Pittsburg County Floodplain Administrator  
Pittsburg County Floodplain Permit/Application. Rev. 07/2017



# National Flood Hazard Layer FIRMMette



## Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

- |                             |  |  |
|-----------------------------|--|--|
| SPECIAL FLOOD HAZARD AREAS  |  | Without Base Flood Elevation (BFE)<br>Zone A, V, A99   |
|                             |  | With BFE or Depth Zone AE, AO, AH, VE, AR  |
|                             |  | Regulatory Floodway  |
| OTHER AREAS OF FLOOD HAZARD |  | 0.2% Annual Chance Flood Hazard, Area of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone J |
|                             |  | Future Conditions 1% Annual Chance Flood Hazard Zone X   |
|                             |  | Area with Reduced Flood Risk due to Levee. See Notes. Zone X   |
|                             |  | Area with Flood Risk due to Levee Zone D   |
| OTHER AREAS                 |  | NO SCREEN Area of Minimal Flood Hazard Zone X  |
|                             |  | Effective LOMRs  |
| GENERAL STRUCTURES          |  | Area of Undetermined Flood Hazard Zone   |
|                             |  | Channel, Culvert, or Storm Sewer   |
| OTHER FEATURES              |  | Levee, Dike, or Floodwall  |
|                             |  | Cross Sections with 1% Annual Chance Water Surface Elevation   |
|                             |  | Coastal Transect   |
|                             |  | Base Flood Elevation Line (BFE)  |
|                             |  | Limit of Study   |
|                             |  | Jurisdiction Boundary  |
|                             |  | Coastal Transect Baseline  |
| MAP PANELS                  |  | Profile Baseline   |
|                             |  | Hydrographic Feature   |
|                             |  | Digital Data Available   |
|                             |  | No Digital Data Available  |
|                             |  | Unmapped   |

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 4/1/2025 at 9:03 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.