



STATE OF WASHINGTON
DEPARTMENT OF LABOR AND INDUSTRIES
Division of Occupational Safety and Health
PO Box 44600 • Olympia, Washington 98504-4600

October 4, 2021

INTEGRITY TRAFFIC WA LLC
Attn Geoff Barrios
7874 Sw Nimbus Ave # 9a
Beaverton, OR 97008-6403

OSHA #: 1534968
Inspection: 317964244
UBI: 604462732
Region: 2-Safety
Inspector ID: W1400

Dear Employer:

Enclosed are the results of the safety and health inspection of your workplace. This packet contains:

- **Citation Invoice** – The total assessed penalty is \$4,800.00
- **Citation and Notice of Assessment** – Washington Administrative Code (WAC) Violations.
- **Employer Appeal Rights** – You have 15 working days to appeal this citation.

You must immediately post this Citation and Notice of Assessment at or near where the violation(s) occurred, where employees can easily find and read it, or where employees normally receive posted information. All postings must remain until you have corrected all violations, or for three working days, whichever is longer. “Working day” means a calendar day, except Saturdays, Sundays and all legal state holidays.

Because this inspection is public information, the result will be posted online 30 days after the above date by the Department of Labor & Industries. You may view it at <https://secure.lni.wa.gov/verify> .

Please visit <https://www.lni.wa.gov/agency/public-disclosure/> if you would like to request a copy of the inspection file. Your choices are:

- Safety & Health Citation Only
- Safety & Health Brief Inspector Summary Report (short description the inspector writes to summarize the reason for the inspection only – not complete file)
- Safety & Health Detailed Inspection Summary Report (detailed summary of inspection including penalty calculation only – not complete file)
- Safety & Health Citation and Complete Inspection File (The complete legal file which contains the detailed information regarding the inspector’s findings, the citation, and calculation of any penalty. This will be especially helpful if you are contemplating filing an appeal.)

If you have questions, call the compliance supervisor, Rod Julian, at (509) 764-6906.

Respectfully,

L&I Assistant Director
Division of Occupational Safety & Health

Enclosure(s)



Washington State Department of
Labor & Industries
Division of Occupational Safety and Health

Invoice

Inspection: 317964244

| | |
|---|--|
| UBI: 604462732 | Issued: October 4, 2021 |
| Legal Name: INTEGRITY TRAFFIC WA LLC | Opening Conference: May 26, 2021 |
| DBA Name: INTEGRITY TRAFFIC WA LLC | Closing Conference: September 7, 2021 |
| Inspection: 13905 Auburn-Black Diamond Rd, | Inspector ID: W1400 |
| Site: Auburn, WA, 98092 | |

Summary of Assessed Penalties Due

The Citation and Notice of Assessment includes a full description of each violation.

| Violation Item | Violation Type | WAC | Correction Due Date | Penalty Amount |
|---------------------------------|----------------|-----------------------|---------------------|----------------|
| 1-1 | Serious | WAC 296-155-305(8)(c) | Not Applicable | \$4,800.00 |
| <u>Total Penalty Due</u> | | | | \$4,800.00 |

PAYMENT INFORMATION

Payment is due 15 working days from receipt of this citation.

Make check payable to the Department of Labor and Industries.

Write Inspection number 317964244 on the check and mail to:

Attn: DOSH Cashier
Department of Labor and Industries
PO Box 44835
Olympia, WA 98504-4835
 Or deliver to: **Any L&I office**



Post This Document

Citation and Notice of Assessment
Citación por Infracción y Multa Civil
Inspection: 317964244

UBI: 604462732

Issued: October 4, 2021

Legal Name: INTEGRITY TRAFFIC WA LLC

Opening Conference: May 26, 2021

DBA Name: INTEGRITY TRAFFIC WA LLC

Closing Conference: September 7, 2021

Inspection 13905 Auburn-Black Diamond Rd Auburn, WA

Inspector ID: W1400

Site: 98092

Violation 1 Item 1

Violation Type: Serious

WAC 296-155-305(8)(c)

The employer did not ensure that the two employees have advance warning signs placed out on the road way correctly.

The employees were working in the area of 13905 Auburn Black-Diamond Rd Auburn WA and flagging for A&M Cable with the wrong distance, spacing between signs, and number of signs.

By not having proper setup, the moving vehicles don't have proper knowledge to slow down and avoiding an accident that may cause serious injury or death to seven workers that are working in close proximity to traffic.

Situation not believed to exist any longer. However, if this violation is identified again during future inspections, it may result in repeat or failure to abate violations which may include penalties.

Assessed penalty: \$4,800.00

For Employers

If you are cited for a violation of Occupational Safety and/or Health rules, you have the right to appeal the citation. **You have 15 working days from the date you receive this citation to appeal.** (RCW 49.17.140(1)) "Working day" means a calendar day, except Saturdays, Sundays and all legal state holidays. Your appeal must be in writing. It may be mailed, faxed, personally delivered or electronically filed. If you electronically file, the Department will send an automated acknowledgement that the appeal was received. **If you do not receive acknowledgement, please ensure you have addressed it to the correct email.** You can also contact the Appeals Program at the number listed below.

For violations classified as serious, willful, repeat serious, or failure to abate serious, an employer must correct the violations by the date listed on the Citation and Notice / Employer's Certification of Abatement form unless a stay of abatement date is requested in the appeal as described on this page. A stay of abatement date means the employer's requirement to abate or correct the hazard is put on hold until the appeal is resolved. All general and repeat general violations under appeal automatically have stay of abatement dates until a final order on those violations has been issued. If you only need an extension of an abatement date, please see the above section entitled, **"If you are unable to fix the hazard(s) by the correction due date(s)"**.

Your appeal must include:

- Name, address, telephone number, and fax number if available of the employer who is appealing, and for the employer's representative, if any, such as an attorney or interpreter.
- Inspection Number (You will find this nine-digit number in the top right corner of this page.)
- Statement explaining:
 1. What you think is wrong with the citation and any related facts.
 2. How you think the citation should be changed.
 3. What relief you are seeking and why.

If you are requesting a stay of abatement date for serious, willful, repeat serious or failure to abate serious, you must also include:

- Each violation and item number for which a stay of abatement date is requested; and
- The reason for the stay of abatement date request.

Note: Employees and/or employee representatives may elect to participate in appeal hearings.

Posting requirement:

You must post your appeal documents (along with this citation packet) until the appeal is resolved. You must also post all other documents related to this appeal.

For Employees or Their Representatives

If your employer is cited, you may only appeal the correction due date(s).

Your appeal must include:

- Your name, address, telephone number, and fax number if available and the same information for anyone who is representing you, if any.
- Inspection number.
- Statement explaining why the correction due date should be changed.

Send all appeals to:

Assistant Director for DOSH
Attn: Appeals Program
PO Box 44604
Olympia, WA 98504-4604
Fax to: **(360) 902-5581** or deliver to: **Any L&I office**
Electronically to: DOSHAppeals@Lni.wa.gov

For more information call the Appeals Program: **(360) 902-5486.**

INTEGRITY TRAFFIC WA LLC
Attn Geoff Barrios
7874 Sw Nimbus Ave # 9a
Beaverton, OR 97008-6403

INTEGRITY TRAFFIC WA LLC
Attn Geoff Barrios
7874 Sw Nimbus Ave # 9a
Beaverton, OR 97008-6403

Inspection Summary Report



Inspection Information

| | | | | |
|--|----------------------------------|--|-----------------------|-------------------------------|
| Inspection Number / Program | Triggering Activity | UBI / Bus Loc | Account Number | Special Tracking |
| 317964244 / Safety | | 604462732 / 1629093 | 68837700 | Joint Inspection |
| Establishment DBA / Legal Name | Legal Entity | Assignment Type | Site Region | Inspection Scope |
| INTEGRITY TRAFFIC WA LLC / INTEGRITY TRAFFIC WA LLC | Limited Liability Corp | Other High Hazard | 1055320 | Partial |
| CSHO ID / CSHO Name | CSHO Region | Target List / Rank | On List | OSHA Inspection Number |
| W1400 / SCOTT WAULTERS | 1055380 | None | N | 1534968 |
| Primary NAICS | Primary NAICS Description | | | |
| 561990 | ALL OTHER SUPPORT SERVICES | | | |
| Site NAICS | Site NAICS Description | | | |
| 561990 | ALL OTHER SUPPORT SERVICES | | | |
| Site Address | | Mailing Address | | |
| INTEGRITY TRAFFIC WA LLC 13905 Auburn-Black Diamond Rd Auburn, WA 98092 Phone: (909) 239-0304 Email: carrie@integritytraffic.com | | INTEGRITY TRAFFIC WA LLC Attn Geoff Barrios 7874 Sw Nimbus Ave # 9a Beaverton, OR 97008-6403 Phone: (909) 239-0304 Email: carrie@integritytraffic.com | | |

Violation List

| Inspection Number / Program | Triggering Activity | UBI / Bus Loc | Account Number | | | | | | |
|---|-------------------------------|--------------------------------|----------------|-------------------|----------|-----------|---------------------|----------------|-----------|
| 317964244 / Safety | | 604462732 / 1629093 | 68837700 | | | | | | |
| Establishment DBA / Legal Name | Assignment Type / Site Region | CSHO / CSHO Region | | | | | | | |
| INTEGRITY TRAFFIC WA LLC / INTEGRITY TRAFFIC WA LLC | Other High Hazard / 1055320 | W1400 SCOTT WAULTERS / 1055380 | | | | | | | |
| Violation | Item | Group | Type | Standard | Penalty | Instances | Abatement Days/Date | Date Corrected | Quick Fix |
| 1 | 1 | | S | 296-155-305(8)(c) | 3,200.00 | 1 | | | No |
| Total Penalty: \$3,200.00 | | | | | | | | | |

Inspection Summary

Opening Conference: 5/26/2021 @ 4:45 PM W3535

Closing Conference: 9/7/2021 @ 1:20 PM W1400

While driving on the Auburn- Black Diamond Road I observed traffic signs that were set up improperly, I entered the job site ,showed my credential's and obtained consent from Rickey Colby(traffic Lead) to continue with the inspection. He said "Yes".

Sent E-Mail on 7/30/2021 @ 11:16 to Dave Fleischman (Supervisor) and Mike Zahniser (COO) requesting the following documents, Accident Prevention Program (APP), Covid-19 Plan, all training records for Rick Colby (Traffic Lead), Blake Powell (Flagger), and Eric Miller (Flagger) who were on site during the inspection, a copy of the documented Traffic Control Supervisor for the jobsite located at Auburn-Black Diamond Road, A copy of OSHA 300A for 2020, and a copy of the traffic control plan.

On 8/24/2021 my Supervisor assigned this W1400

After reviewing the requested documents I am proposing 1 serious violation.

Scott Weber 21/sept 2021
CSHO Signature Date

G. Julian 21 Sep 2021
Supervisor Signature Date

Reviewer Signature Date



MS 44600

| | | | | |
|---|--|---|---|--|
| Inspection # 317964244 | CSHO ID(s) W3535 | Credentials presented? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Date of Entry 5/26/21 | Time of Entry 4:45 |
| Business name Integrity Traffic | | Consent Statement "My name is Larry . I am an inspector for the Washington State Department of Labor and Industries. I am here to conduct a workplace safety and health inspection. Do I have your consent to enter the premises?" (The CSHO will show credentials while getting consent.) | | |
| Site Address 13905 Auburn Black Diamond Rd Auburn WA, 98092 | | Employer Rep: (first and last name) David Fleishman | | |
| Mailing Address Atten Geoff Barrios Beverton OR, 97008 | | If, and only if, the owner or his/her authorized representative does not affirmatively respond to the above requests for consent to enter, the inspector will then state: "Thank you, the state may seek a warrant for entry into the premises from a court of competent jurisdiction and such a warrant may be issued to permit me to enter the premises." | | |
| Phone # 209 828 7628 | Alternate Phone # | Consent/Denial Response "yes" | | |
| Email David.Fleishman@integritytraffic.com | UBI 604462732 | Temp EEs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| EEs on site 3 | EEs Covered 3 | EEs in USA 200 | | |
| ER Reprs Name | Title | OC | WA | CC |
| David Fleishman | Supervisor | - | - | - |
| Adam Brooks | Supervisor | - | - | - |
| Rickey Colby | Traffic lead | - | - | - |
| Chet Harmon | Regional Manager | - | - | - |
| EE Reprs Requested Participated: Name | Title | OC | WA | CC |
| Blake Powell | Flagger | - | - | - |
| Eric Miller | Flagger | - | - | - |
| Mike Zahriser | COO | - | - | ✓ |
| Employees Interviewed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No How many? 1 | Union NA | Address | | Local # Phone |
| Opening Conference - Date: 5/26/2021 Time: 4:45 | Closing Conference - Date: 9/7/2021 Time: 1:20 pm | | | |
| <input checked="" type="checkbox"/> Explain WISH Act and DOSH | <input checked="" type="checkbox"/> Discuss hazards observed | | | |
| <input type="checkbox"/> Department can provide standards, posters, logs | <input checked="" type="checkbox"/> Proposed violations and their severity | | | |
| <input checked="" type="checkbox"/> Confidentiality of trade secrets | <input checked="" type="checkbox"/> Penalties may be assessed (explain calculation) | | | |
| <input checked="" type="checkbox"/> Request written programs | <input checked="" type="checkbox"/> Subject to further review | | | |
| <input checked="" type="checkbox"/> Request copy of OSHA 300/300A | <input checked="" type="checkbox"/> Set reasonable abatement periods | | | |
| <input checked="" type="checkbox"/> Explain walk around procedure | <input checked="" type="checkbox"/> Explain extension of abatement | | | |
| <input checked="" type="checkbox"/> Interview employees in private | <input checked="" type="checkbox"/> Advise results will be issued | | | |
| <input checked="" type="checkbox"/> Discrimination against EEs | <input checked="" type="checkbox"/> Post citation/results | | | |
| <input type="checkbox"/> Walk around pay | <input checked="" type="checkbox"/> Explain proof of correction requirements | | | |
| <input type="checkbox"/> Closing conference will be held | <input checked="" type="checkbox"/> Results of failure to correct | | | |
| <input checked="" type="checkbox"/> Do you have minors (17 or under) working for you? [yes] [no] [no] | <input checked="" type="checkbox"/> Availability of consultation and risk management services after abatement period | | | |
| <input checked="" type="checkbox"/> Explain violations/penalties may result | <input checked="" type="checkbox"/> Variance (if applicable) | | | |
| <input checked="" type="checkbox"/> Inquire of other PPE/safety requirements for inspector (list below) | <input checked="" type="checkbox"/> Appeal rights (15 working days after receipt) | | | |
| | <input checked="" type="checkbox"/> Stay of abatement | | | |
| Shape sheet included <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Stute worksheet included <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | ICP Provided <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Closing Conference Review provided <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Complaint/referral provided <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

317964244

- ✓ App
- ✓ COVID
- ✓ All Training Records
- ✓ TCS ON Site
- ✓ ~~Review~~ Safety meeting minutes
- ✓ 300A Log
- ✓ A copy of your traffic control plan for The Job Site.

317964243 - AEM Cable.

Closing Conference set for 9
Address: 6224 114th Ave CT
Puyallup WA 98372

Mike Zahniser (COU) requesting proof of Violation Inspection with all supporting documentation.
mike@integritycorps.com

08/24/2021 Transferred to W1400

HAZARD

| Date/Time | WAC # | Classifi. | Citation # | Item # | Grp | Inst | Inspection Report # | Abatement Period |
|-------------|-------------------|-----------|------------|--------|-----|------|---------------------|------------------|
| 26 MAY 2021 | 296-155-305(B)(C) | S | 1 | 1 | / | 1 | 317964244 | Ø |

Description of observed hazards, conditions and practices

Improper flagger sign setup and usage did not follow sign spacing standards for distance between signs and the number of signs required, they were flagging for AEM cable who were doing telecommunication work on the side of the road, occupying part of lane traffic ^{Area}.

Measurements Method of measurement (tape measure, blueprints, employer statement, other)

total distance for Flaggers Signs - sign # 4560' to work site, Elwood parked to approx flagger ahead # 3163', and Elwood parked to work zone 1925', total distance 9648'

| Exposed employee Address | Occupation Phone number | # EEs exposed | Duration of hazard | Frequency of exposure |
|-----------------------------|----------------------------|------------------|-----------------------|--------------------------|
| Blake Powell | flagger | 4 | Approx 8 hrs | 1 time |
| Eric Miller | flagger | 1 | Approx 8 hrs | 1 time |
| 5 AEM cable employees | telecommunication work | 5 | Approx 8 hrs | 1 time |

| Equipment Type | Make | Model |
|----------------|------|----------|
| SN | HP | RPMs |
| | | Voltage |
| | | Amperage |

Comments (Employee statement. Employer statement. How complied. PPE, guards, controls)

employee from Integrity stated "I only had 4 month of experience and was unaware that he had to move signs on a mobile operation."
 management: said that the employee was in charge of the flagging operation as there was no traffic control supervisor on site.

Discussed with employer regarding abatement assistance. Abatement method to comply



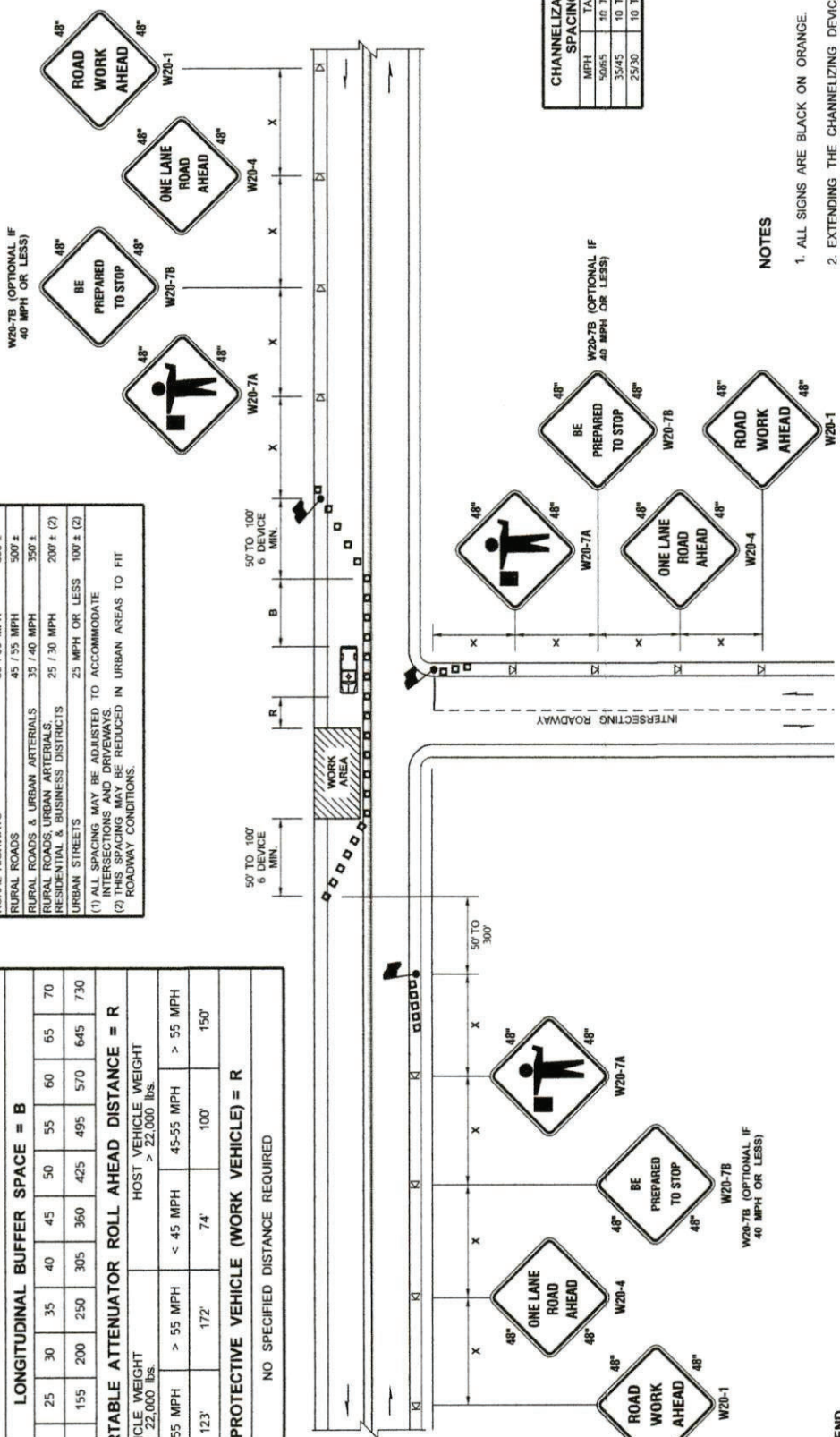
3163' Approximate Flagger ahead
1925' Elwood to work zone
4560 Work zone to fist sign
9648 total

BUFFER DATA

| LONGITUDINAL BUFFER SPACE = B | |
|--|---|
| SPEED (MPH) | 25 30 35 40 45 50 55 60 65 70 |
| LENGTH (feet) | 155 200 250 305 360 425 495 570 645 730 |
| TRANSPORTABLE ATTENUATOR ROLL AHEAD DISTANCE = R | |
| HOST VEHICLE WEIGHT 9,900 TO 22,000 lbs. | |
| < 45 MPH | > 55 MPH |
| 123' | 172' |
| 45-55 MPH | > 55 MPH |
| 74' | 100' |
| 100' | 150' |
| PROTECTIVE VEHICLE (WORK VEHICLE) = R | |
| NO SPECIFIED DISTANCE REQUIRED | |

| SIGN SPACING = X (1) | |
|----------------------------------|---------------------------|
| RURAL HIGHWAYS | 60 / 65 MPH 800' ± |
| RURAL ROADS | 45 / 55 MPH 500' ± |
| RURAL ROADS & URBAN ARTERIALS | 35 / 40 MPH 350' ± |
| RURAL ROADS URBAN ARTERIALS | 25 / 30 MPH 200' ± (2) |
| RESIDENTIAL & BUSINESS DISTRICTS | 25 / 30 MPH 200' ± (2) |
| URBAN STREETS | 25 MPH OR LESS 100' ± (2) |

(1) ALL SPACING MAY BE ADJUSTED TO ACCOMMODATE INTERSECTIONS AND DRIVEWAYS.
(2) SPACING MAY BE REDUCED IN URBAN AREAS TO FIT ROADWAY CONDITIONS.



| CHANNELIZATION DEVICE SPACING (FEET) | |
|--------------------------------------|---------------|
| MPH | TAPER TANGENT |
| 50-65 | 40 TO 20 |
| 35-45 | 10 TO 20 |
| 25-30 | 10 TO 20 |
| | 40 |

NOTES

- ALL SIGNS ARE BLACK ON ORANGE.
- EXTENDING THE CHANNELIZING DEVICE TAPER ACROSS SHOULDER IS RECOMMENDED.
- NIGHT WORK REQUIRES ADDITIONAL ROADWAY LIGHTING AT FLAGGING STATIONS. SEE THE STANDARD SPECIFICATIONS FOR ADDITIONAL DETAILS.
- SEE SPECIAL PROVISIONS FOR WORK HOUR RESTRICTIONS.

ONE-LANE, TWO-WAY TRAFFIC CONTROL WITH FLAGGERS

NOT TO SCALE

- LEGEND**
- FLAGGING STATION
 - TEMPORARY SIGN LOCATION
 - CHANNELIZING DEVICES
 - PROTECTIVE VEHICLE

| | |
|---|---|
| FILE NAME | S:\Design_R_P8_Six-Shardara\25-Jan-Sheet-Library\01-Published-FBL\TC\Work-Zone-Traffic-Control\TC-1\One-Lane-Two-Way-Traffic-Control-with-Flaggers\TC-1.dgn |
| DATE | 3/25/14 PM |
| DESIGNED BY | Hidden |
| ENTERED BY | Hidden |
| CHECKED BY | Hidden |
| PROJ. ENGR. | Hidden |
| REGIONAL ADM. | Hidden |
| REVISION | DATE BY |
| FED.AID PROJ.NO. | |
| WASH STATE | |
| JOB NUMBER | |
| CONTRACT NO. | |
| LOCATION NO. | |
| DATE DATE | |
| P.L. STAMP BOX | |
| P.L. STAMP BOX | |
| Washington State Department of Transportation | |
| TRAFFIC CONTROL PLAN | |
| TC1 | |

EMPLOYEE/EMPLOYER INTERVIEW WORKSHEET

Company Name: Integrity TRAFFIC WA, LLC CSHO ID: W3535/W1400

Inspection #: 317964244 Interview Date: 26 MAY 2021 Time: 5:00 P.M.

- Present Credentials & give business card to employee
- Explain WISH Act
- Inform EE of Purpose of Visit
- Explain discrimination & walk-around pay
- Explain Confidentiality

Employee Name: Eric Miller Contact Phone # _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Work hours/Shifts: 7:30 - 4:30 M-F

Job Title: Flogger Time With Employer: _____

Time in Trade: 2 months Union Name: NA Local: _____

1. Do you have the ability to hire/fire employees? Yes: _____ No:

2. Who has the authority to enforce safety policies at this worksite?
All of us

3. Does the company have a written safety program? Yes: No: _____ Unknown: _____
Have you seen the written program? Yes: No: _____ N/A: _____

4. How is the safety program enforced? Verbal Written termination

5. Did you have a safety orientation for this job? Yes: No: _____ Unknown: _____

6. Were you given training for this job? Yes: No: _____ OJT: Other: Classroom
If yes, given by whom (employer, other job, etc.) _____

7. Do you have safety meetings? Yes: No: _____ If so, how often? 1 A month

8. Is there a Safety Committee? Yes: No: _____
If yes, who is/are the employee-elected representative(s)? Don Wilkinson

9. Are there specific emergency procedures (fire, earthquake, etc.)? Yes: No: _____ Unknown: _____

10. What chemicals do you work with?
Abuse Hand Sanitizer

11. Is there a written Hazard Communication Program (Chemicals)? Yes: No: _____ Unknown: _____ N/A: _____

Employee Name: Eric Miller

12. Where do you find the Safety Data Sheets (MSDS)? N/A: _____

Crew room

13. Do you have a current Certified First Aid card/first aid training? Yes: No: Unknown:

14. Know of any employee with a First Aid card/training on site? Yes: No: N/A: UNKNOWN

Names: _____

15. What kind of Personal Protective Equipment (PPE) is required for the job? Check all that apply:

Safety Foot Wear: Hard Hat: Gloves: Safety Glasses: Splash Goggles: NA Hearing Protection: N/A

Respirator: NA Fall Protection: NA Special Outer Clothing: NA High Visibility Clothing:

Other: _____

(CSHO Note type, style, brand, and photograph all PPE): _____

16. How do you report an injury? Call Supervisor

17. How do you report safety concerns? Supervisor

18. Where are the first-aid kits located? Truck

19. Where are the Fire Extinguishers located? NA

20. Have you ever been injured or felt ill because of your job? Yes: No:

21. Has anyone else been injured on this job? Yes: No: N/A:

22. Is there anything you think I should look at while I am here? Yes: No:

Additional Notes:

Safety and Health Program Evaluation (SHAPE sheet)

Division of Occupational Safety & Health
MS: 44630

| | |
|---|---|
| Employer Integrity Traffic | Inspection Number 317 964244 |
|---|---|

| | NA=Not Addressed | | |
|--|-------------------------------------|--------------------------|-------------------------------------|
| | YES | NO | N/A |
| Is there a WISHA poster posted at this place of employment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the employer have a written accident prevention program? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are employees provided safety orientation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the APP cover at least the basic elements and is it tailored to the operational needs of the workplace? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety Orientation including: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • A description of the employer's total safety and health program. | | | |
| • On-the-job orientation showing employees what they need to know to perform their initial job assignments safely. | | | |
| • How and when to report on-the-job injuries including instruction about the location of first-aid facilities in your workplace. | | | |
| • How to report unsafe conditions and practices. | | | |
| • The use and care of required personal protective equipment (PPE). | | | |
| • What to do in an emergency, including how to exit the workplace. | | | |
| • Identification of hazardous gases, chemicals, or materials used on-the-job and instruction about the safe use and emergency action to take after accidental exposure. | | | |
| Does the employer have a procedure for enforcing safety rules | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the APP implemented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the employer effectively investigate accidents and make changes based on findings? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Has the employer established a foreman/crew meetings or an informal safety committee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| May elect to have foreman/crew meetings which were held | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Designated H&S committee if > 10 EEs. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • employer and employee-elected members. Not to exceed 1 yr. . | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • chairperson elected by committee | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • frequency of meetings determined by committee (also date, time, location) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • written meeting minutes on file for one year. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • subjects to be covered: S&H inspection reports reviewed to correct unsafe conditions or practices; accident investigation evaluations determine if causes of unsafe acts or conditions are properly identified and corrected; evaluate overall APP and recommend improvements. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Did the employer do an assessment of the workplace to establish what PPE is necessary? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the employer certify, in writing, that the assessment had been done? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the employer in an SIC code that requires an OSHA 300 log? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the employer, with 11 or more employees, keep an OSHA 300 log? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the employer post the summary from February 1 through April 30? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is there a written and implemented chemical hazard communication program for hazardous chemicals? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the employer have an inventory of hazardous chemicals in the workplace? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Are there accessible MSDSs for each hazardous chemical in the workplace? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Did the employer provide training to employees in the hazard communication program? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Has the employer addressed heat stress issues? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do employees handle strong irritants, toxics or corrosives? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Do employers use appropriate PPE? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Are there emergency eyewash facilities when use could result in exposure to eyes? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Are there emergency showers when use could result in exposure to body? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Do the emergency washing facilities meet the requirements for flow, travel time, access, annual inspection, & weekly checks? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

SHAPE SHEET

| | Yes | No | NA |
|---|-------------------------------------|--------------------------|-------------------------------------|
| Does the employer have conditions that require an energy control program (ECP)? (repair own equipment, have hardwired electrical) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Did the employer develop a written ECP? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Did the employer develop specific step-by-step procedures for equipment and machinery that has more than one power source? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Did the employer perform an annual evaluation of the ECP to ensure procedures are being followed? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Were employees trained in the ECP? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Did the employer provide EC hardware such as padlocks, pins, wedges, chains, blanks and such to lock equipment out? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | |
| Is there a clinic, infirmary or hospital in near proximity to the workplace? (5 minute unobstructed travel) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is there a person or persons adequately trained to render first aid? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the employer have adequate first aid supplies? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | |
| Are employees exposed to loud noise? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Does the employer have a hearing conservation program in place? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Noise survey | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Hearing protection | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Engineering controls | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Audiograms | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Training | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | |
| Are employees exposed to hazardous atmospheres? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Do employees wear dust masks or respirators? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is there a respiratory protection program in place? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Written program | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Administrator | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Respirator/cartridge selection | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Medical evaluation | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Fit test | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Training | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | |
| Are there any confined spaces at the workplace? Large enough to bodily enter, not intended for human occupancy, limited access & egress) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Do employees enter confined spaces? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is there a confined space program in place? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Evaluation | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Signs | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Permit required? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

REFERRAL TO: IH Safety for: _____

COMMENTS: _____

| | OK | NOT OK | N/A | COMMEMTS |
|--------------------------|----|--------|-----|----------|
| APP | ✓ | | | |
| TRAINING PROGRAM | ✓ | | | |
| SAFETY MEETINGS | ✓ | | | |
| FIRST AID/CPR TRAINING | ✓ | | | |
| TRAFFIC CONTROL | | ✓ | | |
| WORK ZONE PROTECTION | | ✓ | | |
| SIGNS | | ✓ | | |
| CONES | | ✓ | | |
| FLAGGERS | ✓ | | | |
| TRUCK | | | ✓ | |
| WINDSHIELD | | | | |
| CONTROLS WORKING | | | | |
| FLASHING LIGHTS | | | | |
| EMERGENCY BRAKE | | | | |
| CHOCK BLOCKS | | | | |
| VEHICLE HOUSE KEEPING | | | | |
| TOOL STORAGE | | | | |
| FIRST AID KIT | | | | |
| FIRE EXTINGUISHER | | | | |
| AERIAL LIFT | | | | |
| CONTROLS WORKING | | | ✓ | |
| YEARLY INSPECTION | | | | |
| HYDRAULIC LEAKS | | | | |
| COMMUNICATIONS TO DRIVER | | | | |
| HARNES/LANYARD | | | | |
| GENERATOR | | | | |
| TOOLS & EQUIPMENT | | | ✓ | |
| VOLTAGE TESTER | | | | |
| AIR/GAS TESTER | | | | |
| VENTILATION SYSTEM | | | | |
| EXTENSION CORDS | | | | |
| DRILL | | | | |
| PPE | ✓ | | | |
| RUBBER INSULATED GLOVES | ✓ | fine | ✓ | |
| HARD HAT | ✓ | | | |
| REFLECTIVE VEST | ✓ | | | |
| EYE PROTECTION | ✓ | | | |
| GLOVES/HAND PROTECTION | ✓ | | | |
| SHOES/BOOTS | ✓ | | | |
| HEARING PROTECTION | | | | |
| CLIMBING GEAR | | | | |
| BELT & STRAP | | | | |
| GAFFS | | | | |

| | OK | NOT OK | N/A | COMMENTS |
|------------------------------------|----|--------|-----|----------|
| LADDERS | | | ✓ | |
| SIDE RAILS | | | ✓ | |
| RUNGS | | | ✓ | |
| ROPE | | | ✓ | |
| AERIAL WORK | | | ✓ | |
| HANGING STRAND | | | | |
| USE OF HOT GLOVES | | | | |
| TEMP GROUND | | | | |
| REAL TENDER | | | | |
| COMMUNICATIONS | | | | |
| CABLE/FIBER/TELEPHONE | | | ✓ | |
| EQUIPMENT | | | ✓ | |
| BACKHOE | | | | |
| LIGHTS/FLASHING 4-WAYS | | | | |
| BACKUP ALARM | | | | |
| BRAKES | | | | |
| TRENCHER/BORING MACHINE | | | ✓ | |
| GUARDING AREA AROUND MACHINE | | | | |
| GROUNDING MACHINE | | | | |
| INSULATED GLOVES/BOOTS | | | | |
| DUMP TRUCKS | | | ✓ | |
| FIRE EXTINGUISHER/WARNING TRIANGLE | | | | |
| FIRST AID KIT | | | | |
| WINDSHIELD | | | | |
| BACKUP ALARM | | | | |
| COMPRESSOR | | | ✓ | |
| AIR LINE CONNECTOR SAFETY PINS | | | | |
| TRENCHING | | | ✓ | |
| COMPETENT PERSON | | | | |
| SOIL TYPE | | | | |
| LOCATES | | | | |
| TRENCH | | | | |
| SHORING | | | | |
| SLOPING | | | | |
| MEANS OF EGRESS | | | | |
| VAULT/MANHOLE WORK | | | ✓ | |
| GUARD RAILS | | | | |
| TEST FOR GAS | | | | |
| PROPER VENTILATION | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | | | |
|------------------------------------|--|--|---|
| CENTRAL OFFICES/STORAGE YARDS | | | ✓ |
| EXITS MARKED | | | |
| NO EXITS MARKED AS NO EXIT | | | |
| EMERGENCY LIGHTING | | | |
| CLEAR MEANS OF EGRESS | | | |
| POWER PANELS | | | ✓ |
| OPEN BUS BARS | | | |
| MARKING OF BREAKERS | | | |
| STORAGE IN FRONT OF PANEL | | | |
| HOUSE KEEPING | | | ✓ |
| BATTERY STORAGE AREA | | | ✓ |
| PPE, GLOVES EYE/FACE SHIELD, APRON | | | |
| EYE WASH | | | |
| BACK UP GENERATOR | | | ✓ |
| LOCKOUT/TAGOUT | | | |
| FUEL STORAGE | | | |
| START UP BATTERIES | | | |
| OUTSIDE STORAGE | | | ✓ |
| CABLE REALS CHOCKED | | | |
| POLES STACKED | | | |
| STORAGE OF EQUIPMENT | | | |
| STORAGE OF GAS/FUEL | | | |

In response to the Washington State Department of Transportation's Phase 1 Construction Restart COVID-19 Job Site Requirements, Integrity Traffic has adopted the following policies:

- PPE - Integrity has provided face covering, eye protection, and gloves, in addition to the existing PPE provided (hard hats & vests) If you have not already been issued these items, please contact the office to pick up the provided PPE at any time. Integrity will also provide a Washington job site box to each lead assigned to Washington job sites. Continue to wear your hard hat, vest, and work boots, as these measures are additional and not replacing current PPE practices.
- On-site Social Distancing -
 - Maintain a distance of 6 feet from all persons on the job site.
 - Minimize interactions when picking up or dropping off equipment.
 - **All persons must comply or the job will be shut down.**
- Hygiene and Sanitation -
 - Soap and Water has been provided by Integrity, for frequent handwashing. Wash your hands regularly, and before and after eating, before and after going to the bathroom, after coughing, sneezing, or blowing your nose.
 - Do not touch your face with unwashed hands or dirty gloves
 - Wash your hands for at least 20 seconds
 - Use sanitizers with at least 60% alcohol
 - Cover your mouth when you cough, sneeze, or yawn
 - When interacting with the public, maintain a distance of 10 feet
- Symptom Monitoring -
 - Stay home or leave the worksite when feeling sick or when you have been in close contact with a confirmed positive case. If you develop symptoms of acute respiratory illness, seek medical attention and inform the office.
 - If you have a sick family member at home, contact HR; if a family member has been sick with COVID-19, follow the isolation/quarantine requirements as established by the State Department of Health.
 - Take your temperature before beginning your shift, if you have a fever, cough, shortness of breath, fatigue, muscle aches, or new loss of taste or smell, notify HR immediately.
 - If an employee is confirmed to have COVID-19, Integrity will notify fellow employees of their possible exposure while maintaining confidentiality.
- Incident Reporting -
 - If an employee develops symptoms or becomes exposed, they will immediately notify their supervisor and HR, then follow the appropriate protocol. If exposure occurs in the field, an incident sheet must be submitted,
 - Follow normal protocol for incident reporting.
- Site Decontamination -
 - If equipment has potentially been contaminated, it will be reported and cleaned following manufacturer guidelines.
- Training -
 - Integrity has been consistently updating training videos and documentation regarding slowing the spread of COVID in the workplace. Please continue to check www.integritytrafficemployee.com for ongoing updates and training videos.

Eric Miller Terminated
 Not employed since 07/01/2021 Private Data Show

- Employment
- Personal
- Time Off
- Benefits
- Career
- Performance
- Impressions
- Journals
- Goals
- Learning
- Skills
- Events
- Experience

Course

| Course | Status | Due Date | Start Date | Completion Date | Assigned By |
|----------------------------------|-----------|------------|------------|-----------------|-------------|
| Washington Lead 1 Test 5-13-2021 | Completed | 06/03/2021 | 06/03/2021 | 06/03/2021 | P7 |

54

| Card Number Issued | Instructor Name & Number | Flagger First Name | Flagger MI | Flagger Last Name | ID Number | Phone | Score | City, State | Organization/ Company | Class Date | Exp. Date | Email | Old Card # | Old Card Exp | 8Hr | 8Hr |
|--------------------|--------------------------|--------------------|------------|-------------------|-----------|--------------|-------|--------------|---------------------------|------------|-----------|-------------------------|------------|--------------|-----|-----|
| 451281 | Andrea Supunwala 02786 | Haylee | A | Crennan | 00023 | 253-332-3588 | 98% | Puyallup, WA | Integrity Traffic WA, LLC | 4/28/2021 | 4/28/2024 | hayleecg@gmail.com | NA | NA | X | NA |
| 451282 | Andrea Supunwala 02786 | Valerie | M | McMillan | 206RP | 380-402-9582 | 82% | Puyallup, WA | Integrity Traffic WA, LLC | 4/28/2021 | 4/28/2024 | valmcmiller@gmail.com | NA | NA | X | NA |
| 451283 | Andrea Supunwala 02786 | Eric | J | Miller | 6183B | 253-905-0798 | 84% | Puyallup, WA | Integrity Traffic WA, LLC | 4/28/2021 | 4/28/2024 | ericmiller112@gmail.com | NA | NA | X | NA |



Blake Powell Active

WA Flagger 1 [95223]

Employed since 05/17/2021

Private Data

Hide

Show

- Employment
- Pay
- Personal
- Time Off
- Benefits
- Career

- Performance
- Impressions
- Journals
- Goals
- Learning
- Skills
- Events
- Experience

Course ^

Completed Training

- Washington Lead 1 Test 5-13-2021
- Heat Stress: Facts & Prevention - SSG001E (9 Min.) Week 23
- What Causes Accidents - Safety Training Video - Preventing Accidents & Injuries

| Status | Due Date | Start Date | Completion Date | Assigned By |
|-----------|------------|------------|-----------------|-------------|
| Completed | 06/03/2021 | 06/03/2021 | 06/03/2021 | P7 |
| Completed | 06/06/2021 | 06/03/2021 | 06/03/2021 | P7 |
| Completed | 05/27/2021 | 06/03/2021 | 06/03/2021 | P7 |

| Card Number Issued | Instructor Name & Number | Flagger First Name | Flagger MI | Flagger Last Name | ID Number | Phone | Score | City, State | Organization/ Company | Class Date | Exp. Date | Email | Old Card # | Old Card Exp | B/Hr | 4Hr |
|--------------------|--------------------------|--------------------|------------|-------------------|-----------|--------------|-------|--------------|---------------------------|------------|-----------|----------------------------|------------|--------------|------|-----|
| 451286 | Andrea Sopruhweda 02786 | Dru | | Youngs | C443B | 360-606-8817 | 94% | Puyallup, WA | Integrity Traffic WA, LLC | 5/12/21 | 5/12/2024 | druy@texas.com | NA | NA | X | |
| 451287 | Andrea Sopruhweda 02786 | Kimberly | R | Mondak | D823B | 503-794-7221 | 88% | Puyallup, WA | Integrity Traffic WA, LLC | 5/12/2021 | 5/12/2024 | venthoulkimberly@yahoo.com | NA | NA | X | |
| 451288 | Andrea Sopruhweda 02786 | Blake | D | Powell | 054KD | 253-394-8059 | 80% | Puyallup, WA | Integrity Traffic WA, LLC | 5/12/21 | 5/12/2024 | blake.powell37@yahoo.com | NA | NA | X | |

< Colby, Rickey [95209]

> 60 Employees

1 filters applied

Close



Rickey Colby Active

WA Lead Flagger 1 [95209]

Employed since 03/29/2021

Private Data

Hide

Show

Employment

Pay

Personal

Time Off

Benefits

Career

Performance

Impressions

Journals

Goals

Learning

Skills

Events

Experience

Course ^

Status

Due Date

Start Date

Completion Date

Assigned By

Completed Training

Active Shooter Awareness Video: Helping Prevent Tragedy - SS1075IE (9 min.) Week 26

Back Injury: Exercise And Ergonomics - SS1016DE (16 mins) Week 20

Backing, Parking, Intersections SS1069IE (10 Min) Week 17

Cell Phone Hands Free Driving Awareness - SS1089IE (8 min) Week 15

COVID -19: Cleaning & Disinfecting SS2212AE (5 Min.) Week 21

CPR AED Awareness Training - SS21070I (11 min.) Week 27

Driving Distractions Of The Professional Driver - SS13025A (15 min.) Week 18

Emergency Preparedness: An Employee's Responsibility - SS1051I (25 min.) Week 29

Evaluating Near Misses To Prevent Accidents - SS1008E (8 min.) Week 30

GHS: Hazardous Materials Labels SS2001FE (8 Min.) Week 16

Heat exhaustion vs heat stroke (6min)

Completed 06/17/2021 06/14/2021 06/14/2021 P7

Completed 05/16/2021 05/10/2021 05/10/2021 P7

Completed 04/22/2021 04/25/2021 04/25/2021 P7

Completed 04/08/2021 04/24/2021 04/25/2021 P7

Completed 05/20/2021 05/17/2021 05/17/2021 P7

Completed 06/25/2021 06/21/2021 06/21/2021 P7

Completed 04/29/2021 04/27/2021 04/27/2021 P7

Completed 07/25/2021 07/20/2021 07/20/2021 P7

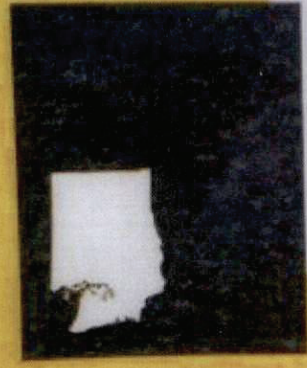
Completed 08/01/2021 07/26/2021 07/26/2021 P7

Completed 04/15/2021 04/25/2021 04/25/2021 P7

Completed 07/01/2021 06/28/2021 06/28/2021 P7

Close

| Colby, Rickey [95209] | 60 Employees | 1 filters applied | | | | |
|---|--------------|-------------------|------------|------------|------------|----|
| Active Shooter Awareness Video: Helping Prevent Tragedy - SS1075IE (9 min.) Week 26 | Completed | 06/17/2021 | 06/14/2021 | 06/14/2021 | 06/14/2021 | P7 |
| Back Injury: Exercise And Ergonomics - SS1016DE (16 mins) Week 20 | Completed | 05/16/2021 | 05/10/2021 | 05/10/2021 | 05/10/2021 | P7 |
| Backing, Parking, Intersections SS1069IE (10 Min) Week 17 | Completed | 04/22/2021 | 04/25/2021 | 04/25/2021 | 04/25/2021 | P7 |
| Cell Phone Hands Free Driving Awareness - SS1089IE (8 min) Week15 | Completed | 04/08/2021 | 04/24/2021 | 04/24/2021 | 04/25/2021 | P7 |
| COVID -19: Cleaning & Disinfecting SS2212AE (5 Min.) Week 21 | Completed | 05/20/2021 | 05/17/2021 | 05/17/2021 | 05/17/2021 | P7 |
| CPR AED Awareness Training - SS21070I (11 min.) Week 27 | Completed | 06/25/2021 | 06/21/2021 | 06/21/2021 | 06/21/2021 | P7 |
| Driving Distractions Of The Professional Driver - SS13025A (15 min.) Week 18 | Completed | 04/29/2021 | 04/27/2021 | 04/27/2021 | 04/27/2021 | P7 |
| Emergency Preparedness: An Employee's Responsibility - SS1051I (25 min.) Week 29 | Completed | 07/25/2021 | 07/20/2021 | 07/20/2021 | 07/20/2021 | P7 |
| Evaluating Near Misses To Prevent Accidents - SS1008E (8 min.) Week 30 | Completed | 08/01/2021 | 07/26/2021 | 07/26/2021 | 07/26/2021 | P7 |
| GHS: Hazardous Materials Labels SS2001FE (8 Min.) Week 16 | Completed | 04/15/2021 | 04/25/2021 | 04/25/2021 | 04/25/2021 | P7 |
| Heat exhaustion vs heat stroke (6min) | Completed | 07/01/2021 | 06/28/2021 | 06/28/2021 | 06/28/2021 | P7 |
| Heat Stress: Facts & Prevention - SSG001E (9 Min.) Week 23 | Completed | 06/06/2021 | 06/01/2021 | 06/01/2021 | 06/01/2021 | P7 |
| How to hook-up a Standard Trailer - Hitchinfo.com | Completed | 06/13/2021 | 06/08/2021 | 06/08/2021 | 06/08/2021 | P7 |
| Safety Video Nothing is Routine (3min) week 51 | Completed | 07/15/2021 | 07/12/2021 | 07/12/2021 | 07/12/2021 | P7 |
| Texting And Driving: The Facts - SS1072IE (11 min.) Week 35 | Completed | 07/09/2021 | 07/07/2021 | 07/07/2021 | 07/07/2021 | P7 |
| What Causes Accidents - Safety Training Video - Preventing Accidents & Injuries | Completed | 05/27/2021 | 05/24/2021 | 05/24/2021 | 05/24/2021 | P7 |
| Workplace Harassment: Sexual Harassment - SS9110AE (10 Min.) Week 19 | Completed | 05/06/2021 | 05/03/2021 | 05/03/2021 | 05/03/2021 | P7 |



WASHINGTON STATE TRAFFIC CONTROL
SUPERVISOR

valid
with
photo
ID

Name
David C Fleischman

I.D. No. / S.S.N.
PJD93B

Card No. **012514**

Date of Expiration
7/31/2024

Judy Gable

Instructor's signature

[Handwritten Signature]

TCS's signature

WA WASHINGTON
USA

DRIVER LICENSE

FEDERAL LIMITS APPLY

18



CLOSING CONFERENCE REVIEW PROPOSED VIOLATIONS

Important: This document is for your information only and may differ from the Citation and Notice that will be sent to you at a later date.

Employer INTEGRITY TRAFFIC WA LLC, Inspection 317964244

This closing conference is held to discuss the inspection findings and any hazards(s) discovered during the inspection. During this conference a discussion will occur on the actions necessary to abate any hazard(s) discovered and the date by which they must be corrected or abated. The department routinely allows employee representatives to be present during the closing conference. However, either the employer or the employee representatives may request separate closing conferences. In accordance with WAC 296-900-13010, employees or their representatives may request copies of Citation and Notices issued to the employer.

Citation & Notice (C&N):

You will receive a Citation and Notice containing the alleged cited violations(s) and the date by which the alleged violation(s) must be abated or corrected. Any alleged violations cited as serious will have a monetary penalty as required by RCW 49.17.180. The findings of this inspection and the recommendations of the inspector are subject to change prior to C&N issuance.

| Citation | Item | Group | Classification | Standard or Law Violated | # Days to Correct |
|----------|------|-------|----------------|--|-------------------|
| 1 | 1 | | Serious | 296-155-305(8)(c) Improper signage setup. | Unable to Correct |

Posting Requirements (WAC 296-900-13015)

You must post the Citation and Notice for three (3) working days, or until the last violation has been corrected, whichever is longer. **You must comply with these posting requirements even if you appeal the citation, or if no violations were noted.**

Your Appeal Rights As An Employer (RCW 49.17.140 and WAC 296-900-17005)

You have fifteen (15) working days from the date you receive your Citation and Notice to file a written appeal. You may appeal all or part of any alleged violation including the violation, penalty or abatement date.

Your notice of appeal must include the business name, name, telephone number; the name and address and telephone number of any person representing you; the citation number; what you think is wrong with the citation or corrective notice and any related facts; what you think should be changed and why, You should also state whether all the violations on the citation, or just specific violations, or only the penalties, are being appealed.

An appeal does not stay the abatement date for serious, willful, repeat serious, and failure to abate serious violations, unless a stay of abatement date is requested and granted by the Department of Labor & Industries according to WAC 296-900-17006, or by the Board of Industrial Insurance Appeals according to WAC 263-12-050. For any appealed general violation(s) and violation(s) for which a stay of abatement date is granted, this requirement is postponed until a final order is issued for the violations(s).

Labor and Industries has the option to forward the appeal to the Board of Industrial Insurance Appeals, an independent state agency, or to reassume jurisdiction and hold an informal conference to try and resolve the citation.

At the informal conference you should be prepared to briefly explain your reasons for the appeal and be ready to provide any additional information you would like the department to consider.

Employees may appeal only the abatement date.

Employee Discrimination (RCW 49.17.160 and 296-360 WAC)

By law, your employees must be allowed to participate in the DOSH inspection. They must be paid for the time they spend assisting the Compliance Inspector or doing related activities. They may not be fired, demoted, or otherwise discriminated against if they talk to the Inspector, file a complaint about unsafe or unhealthy working conditions, or exercise any other right protected under the Act.

If you have any questions concerning the inspection, please contact the Compliance Inspector, or the supervisor.

For additional information about DOSH and the various programs available, you may visit our web site at <https://www.lni.wa.gov/safety-health/> .

For information about filing a public records request, you may visit our web site at <https://www.lni.wa.gov/agency/public-disclosure/> .

604462732 INTEGRITY TRAFFIC WA LLC SI: STAT: 0 TYPE: L ACCT: 688,377-00

* BUSINESS INFORMATION INACTIVE:
DBA: INTEGRITY TRAFFIC WA LLC BUSLOC/AKA: * LEGAL OWNER: 2 *
MAIL: ATTN GEOFF BARRIOS EXPR FCTR: 0.9000 CMPT EXPR: 0.9072
ADDR: * BEAVERTON, OR 97008 6403 OWNERSHIP: Private BM NAICS: 561990 *
CONT: PHONE: 909 239-0304 SIC:
NUM PLS: 1 *
CLAIMS 1 YEAR * RANGE 05/01/2020 - 05/01/2021 CNT 3 COSTS 13,328
BY UBI/ 3 * 05/01/2018 - 05/01/2021 3 13,328
ACCOUNT 5 * 05/01/2016 - 05/01/2021 3 13,328

S&H INSPECTION DATA NUM: 0
NOTE: Use WIN for Inspection data with open conference dates post JULY 1, 1997
NOTE: Use WIN for ALL Consultation history
S&H VARIANCE DATA: Use WIN for All S & H Variance History

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
Help More Retrtn Rstrt Exit



Year 2020

U.S. Department of Labor

Occupational Safety and Health Administration

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0". Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

Establishment Information

Your establishment name Integrity Traffic WA, LLC - Integrity Traffic WA, LLC

Street 7874 SW NIMBUS AVE

City BEAVERTON State OR ZIP 97008

Industry Description
OTHER _____

Standard Industrial Classification _____

North American Industrial Classification (NAICS)
561990

Employment Information

Annual average number of employees 105.00

Total hours worked by all employees last year 66,712

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate and complete.

 _____
Company executive
C.O.O. Title
09/16/2021 Date
360-787-3732 Phone

Number of Cases

| | | | |
|------------------------|--|--|--|
| Total number of deaths | Total number of cases with days away from work | Total number of cases with job transfer or restriction | Total number of other recordable cases |
| <u>0</u> (G) | <u>0</u> (H) | <u>0</u> (I) | <u>2</u> (J) |

Number of Days

| | |
|-------------------------------------|---|
| Total number of days away from work | Total number of days of job transfer or restriction |
| <u>0</u> (K) | <u>0</u> (L) |

Injury and Illness Types

| | | | | | |
|-------------------------|------------|-------------------|---------------------------|------------------|-------------------------|
| Total number of ... (M) | (1) Injury | (2) (4) Poisoning | (3) Respiratory Condition | (5) Hearing Loss | (6) All Other Illnesses |
| <u>0</u> | <u>2</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |

Company Integrity Traffic
S&H No. 317964244
Inspector ID W3535 / W1400
Date 9/21/2021
UBI No. 604 462 732

CD - Photos - DOL's



CLOSING CONFERENCE REVIEW PROPOSED VIOLATIONS

Important: This document is for your information only and may differ from the Citation and Notice that will be sent to you at a later date.

Employer INTEGRITY TRAFFIC WA LLC, Inspection 317964244

This closing conference is held to discuss the inspection findings and any hazards(s) discovered during the inspection. During this conference a discussion will occur on the actions necessary to abate any hazard(s) discovered and the date by which they must be corrected or abated. The department routinely allows employee representatives to be present during the closing conference. However, either the employer or the employee representatives may request separate closing conferences. In accordance with WAC 296-900-13010, employees or their representatives may request copies of Citation and Notices issued to the employer.

Citation & Notice (C&N):

You will receive a Citation and Notice containing the alleged cited violations(s) and the date by which the alleged violation(s) must be abated or corrected. Any alleged violations cited as serious will have a monetary penalty as required by RCW 49.17.180. The findings of this inspection and the recommendations of the inspector are subject to change prior to C&N issuance.

| Citation | Item | Group | Classification | Standard or Law Violated | # Days to Correct |
|----------|------|-------|----------------|--|-------------------|
| 1 | 1 | | Serious | 296-155-305(8)(c) Improper signage setup. | Unable to Correct |

Posting Requirements (WAC 296-900-13015)

You must post the Citation and Notice for three (3) working days, or until the last violation has been corrected, whichever is longer. **You must comply with these posting requirements even if you appeal the citation, or if no violations were noted.**

Your Appeal Rights As An Employer (RCW 49.17.140 and WAC 296-900-17005)

You have fifteen (15) working days from the date you receive your Citation and Notice to file a written appeal. You may appeal all or part of any alleged violation including the violation, penalty or abatement date.

Your notice of appeal must include the business name, name, telephone number; the name and address and telephone number of any person representing you; the citation number; what you think is wrong with the citation or corrective notice and any related facts; what you think should be changed and why, You should also state whether all the violations on the citation, or just specific violations, or only the penalties, are being appealed.

An appeal does not stay the abatement date for serious, willful, repeat serious, and failure to abate serious violations, unless a stay of abatement date is requested and granted by the Department of Labor & Industries according to WAC 296-900-17006, or by the Board of Industrial Insurance Appeals according to WAC 263-12-050. For any appealed general violation(s) and violation(s) for which a stay of abatement date is granted, this requirement is postponed until a final order is issued for the violations(s).

Labor and Industries has the option to forward the appeal to the Board of Industrial Insurance Appeals, an independent state agency, or to reassume jurisdiction and hold an informal conference to try and resolve the citation.

At the informal conference you should be prepared to briefly explain your reasons for the appeal and be ready to provide any additional information you would like the department to consider.

Employees may appeal only the abatement date.

Employee Discrimination (RCW 49.17.160 and 296-360 WAC)

By law, your employees must be allowed to participate in the DOSH inspection. They must be paid for the time they spend assisting the Compliance Inspector or doing related activities. They may not be fired, demoted, or otherwise discriminated against if they talk to the Inspector, file a complaint about unsafe or unhealthy working conditions, or exercise any other right protected under the Act.

If you have any questions concerning the inspection, please contact the Compliance Inspector, or the supervisor.

For additional information about DOSH and the various programs available, you may visit our web site at <https://www.lni.wa.gov/safety-health/> .

For information about filing a public records request, you may visit our web site at <https://www.lni.wa.gov/agency/public-disclosure/> .

Enforcement Case File Information

[Inspection Information](#) • [Attachments](#) • [Violation Information](#) • [Case File Checkout Card](#) • [View ARC](#) • [Citation](#) • [Summary Report](#) • [Letters](#)

Enforcement Inspection Information

[Top](#)

| | | | | |
|--|-------------------------------------|--|-----------------------------|-------------------------------|
| Inspection Number / Program | Triggering Activity | UBI / Bus Loc | Account Number | Special Tracking |
| 317964244 / Safety | | 604462732 / 1629093 | 68837700 | Joint Inspection |
| Establishment DBA / Legal Name | Legal Entity | Assignment Type | Site Region | Inspection Scope |
| INTEGRITY TRAFFIC WA LLC / INTEGRITY TRAFFIC WA LLC | Limited Liability Corp | Other High Hazard | 02 | Partial |
| CSHO ID / CSHO Name | CSHO Region | Target List / Rank | On List | OSHA Inspection Number |
| W1400 / SCOTT WAULTERS | 08 | None | N | 1534968 |
| Primary NAICS | Primary NAICS Description | | | |
| 561990 | ALL OTHER SUPPORT SERVICES | | | |
| Site NAICS | Site NAICS Description | | | |
| 561990 | ALL OTHER SUPPORT SERVICES | | | |
| Site Address | | Mailing Address | | |
| INTEGRITY TRAFFIC WA LLC 13905 Auburn-Black Diamond Rd Auburn, WA 98092 Phone: (909) 239-0304 Email: carrie@integritytraffic.com | | INTEGRITY TRAFFIC WA LLC Attn Geoff Barrios 7874 Sw Nimbus Ave # 9a Beaverton, OR 97008-6403 Phone: (909) 239-0304 Email: carrie@integritytraffic.com | | |
| Representatives | | | | |
| Name | Title | Participation | Type | Email |
| Mike Zahniser | COO | Closing Conference | Management Official | |
| Chet Harmon | Regional Manager | Closing Conference | Management Official | |
| David Fleischman | Supervisor | Opening Conference, Walk-Around | Management Official | |
| Adam Brooks | Supervisor | Opening Conference, Walk-Around | Management Official | |
| Blake Powell | Flagger | Opening Conference, Walk-Around | Employee Rep. | |
| Ricky Colby | Traffic Lead | Opening Conference, Walk-Around | Employee Rep. | |
| Eric Miller | Flagger | Opening Conference, Walk-Around | Employee Rep. | |
| Other Languages Spoken | | | | |
| No Other Language records to display. | | | | |
| Additional Citation Mailings | | | | |
| No Additional Citation Mailings Found | | | | |
| Related Activities | | | | |
| No Related Activities Found | | | | |
| Advance Notice | Opening Conference Date/Time | Site SIC/NAICS | Type of Operation | |
| No | 5/26/2021 - 4:45 PM | / 561990 | Flagging/ Communications | |
| Inspection Type | Days Site Visited | Inspection Scope | Reason No Inspection | |

| | | | |
|---------|---|---------|--|
| Planned | 2 | Partial | |
|---------|---|---------|--|

Asbestos Certifications

No Certifications Found

| Source for Programmed | National Emphasis Program | Special Tracking Information | Cranes |
|--|--|-------------------------------------|-------------------|
| Electrical, Utilities & Communications Industry | | Joint Inspection | |
| Multi-Employer: Inspection that initiated the stop | Focused Inspection: Controlling Employer | Focused Inspection: Sub-Contractors | Employers On Site |
| | No | No | |

| Immediate Restraint | Red Tag Number | Union | Hospitalization |
|---------------------|----------------|-------|-----------------|
| No | | No | No |

| Employees On Site | Employees Covered By Inspection | Employees Controlled Nationwide |
|-------------------|---------------------------------|---------------------------------|
| 3 | 3 | 200 |

| Employee Participation | Closing Conference Date/Time | Citation Issued/Date | Case Received Date |
|--------------------------|------------------------------|----------------------|--------------------|
| Walkthrough, Interviewed | 9/7/2021 - 1:20 PM | Yes 10/4/2021 | 9/21/2021 |

| Citation Sent Date | Citation Delivery Status | Citation Delivery Status Date |
|--------------------|--------------------------|-------------------------------|
| 10/4/2021 | DELIVERED | 10/8/2021 |

Citation and Notice Messages

| Route to P&TS | Reason | Other Reason |
|---------------|--------|--------------|
| No | | |

| Anticipatory Warrant/ Subpoena Served | Non-Anticipatory Warrant/ Subpoena Served | Date Denied | Date Re-entered |
|---------------------------------------|---|-------------|-----------------|
| None | None | | |

| CSHO Approved Date / CSHO Approved | CSHO Supervisor | Supervisor Approved Date / Supervisor Approved | Send C & N? | Case Closed Date |
|------------------------------------|------------------|--|-------------|------------------|
| 9/22/2021 / W1400 SCOTT WAULTERS | G7024 ROD JULIAN | 9/22/2021 / G7024 ROD JULIAN | Yes | 12/3/2021 |

Inspection Summary

Opening Conference: 5/26/2021 @ 4:45 PM W3535
 Closing Conference: 9/7/2021 @ 1:20 PM W1400
 While driving on the Auburn- Black Diamond Road I observed traffic signs that were set up improperly, I entered the job site, showed my credential's and obtained consent from Rickey Colby(Traffic Lead) to continue with the inspection. He said "Yes".

Sent E-Mail on 7/30/2021 @ 11:16 to Dave Fleischman (Supervisor) and Mike Zahniser (COO) requesting the following documents, Accident Prevention Program (APP), Covid-19 Plan, all training records for Rick Colby (Traffic Lead), Blake Powell (Flagger), and Eric Miller (Flagger) who were on site during the inspection, a copy of the documented Traffic Control Supervisor for the jobsite located at Auburn-Black Diamond Road, a copy of OSHA 300A for 2020, and a copy of the traffic control plan.

On 8/24/2021 my Supervisor assigned this W1400.

After reviewing the requested documents I am proposing 1 serious violation.

OSHA 300 Information

| Year | OSHA 300 Data | OSHA Log Information | Hours Worked By All Employees | Annual Average Number of Employees | DART Rate | |
|------|---------------|----------------------|-------------------------------|------------------------------------|-----------|----------------------|
| 2020 | Yes | 0 | 66712 | 105 | 0 | View |
| 2019 | Yes | 0 | 18634 | 18 | 0 | View |

Letters - Case

[Top](#)

| Description | Create Date | View |
|---------------------------|-------------|----------------------|
| Closing Conference Review | 9/2/2021 | View |
| Citation | 9/30/2021 | View |

Attachments - Inspection Report

[Top](#)

| Description | Notes | Create Date | View |
|--------------------|----------------------------------|-------------|----------------------|
| Initial Inspection | | 9/21/2021 | View |
| Inspection Photos | | 9/21/2021 | View |
| Other | Requested documents | 9/21/2021 | View |
| Other | New inspection summary - 2 pages | 9/30/2021 | View |

Attachments - Confidential

| Description | Notes | Create Date | View |
|-------------|-------|-------------|------|
|-------------|-------|-------------|------|

There are no attachments for this inspection.

Enforcement Violation Information

[Top](#)

| Inspection Number / Program | | Triggering Activity | | UBI / Bus Loc | | Account Number | | | | |
|---|------|----------------------------|------|--------------------------------------|----------|-----------------------|---------------------------|----------------|-----------|--|
| 317964244 / Safety | | | | 604462732 / 1629093 | | 68837700 | | | | |
| Establishment DBA / Legal Name | | | | Assignment Type / Site Region | | | CSHO / CSHO Region | | | |
| INTEGRITY TRAFFIC WA LLC / INTEGRITY TRAFFIC WA LLC | | | | Other High Hazard / 02 | | | W1400 SCOTT WAULTERS / 08 | | | |
| Violation | Item | Group | Type | Standard | Penalty | Instances | Abatement Days/Date | Date Corrected | Quick Fix | |
| 1 | 1 | | S | 296-155-305(8)(c) | 4,800.00 | 1 | | | No | |
| Total Penalty: \$4,800.00 | | | | | | | | | | |

| | | | | | |
|--|--|----------------------------------|---------------------------|---------------------------------------|--|
| Inspection Number / Program | | UBI / BusLoc | | CSHO ID / CSHO Region | |
| 317964244 / Safety | | 604462732 / 1629093 | | W1400 / SCOTT WAULTERS / 08 | |
| Triggering Activity | | Account Number | | Assignment Type / Site Region | |
| | | 68837700 | | Other High Hazard / 02 | |
| Violation # | Item # | Group | Standard Violated | Violation Tracking | |
| 1 | 1 | | 296-155-305(8)(c) | Not Applicable | |
| Type | Number of Instances | Number of Workers Exposed | Related Event Code | Related Violation Inspection # | |
| S | 1 | 5 | Not Applicable | | |
| Abatement # of Days/Date | Immediate Restraint | Egregious | Substance | Abatement Documents Required | |
| | No | No | | No | |
| Date Corrected | Complied During Inspection | Date Verified | How Verified | Date/Time Violation Identified | |
| | Unable to Correct | | | 5/26/2021 4:45 PM | |
| Statutory Penalty | Asbestos Good Faith | Asbestos # of Days | Severity | Probability | |
| No | No | | 3 | 2 | |
| Gravity | Gravity Based Penalty | Faith / Adj | Size / Adj | History Adj | |
| 6 | 6000.00 | Average 0.00 | 101-250 -1,200.00 | Average 0.00 | |
| Quick Fix / Adj | Adjusted Subtotal | Calculated Base | Adjusted Base | Base Applied | |
| No 0.00 | -1,200.00 | 4,800.00 | 4,800.00 | 4,800.00 | |
| Base Applied Override Justification | | | | | |
| N/A | | | | | |
| Willful Factor Number | Repeat Factor Number | FTA Factor Number of Days | Calculated Penalty | Assessed Penalty | |
| N/A | N/A | N/A | 4,800.00 | 4,800.00 | |
| Assessed Applied Override Justification | | | | | |
| N/A | | | | | |
| AVD | <p>The employer did not ensure that the two employees have advance warning signs placed out on the road way correctly.</p> <p>The employees were working in the area of 13905 Auburn Black-Diamond Rd Auburn WA and flagging for A&M Cable with the wrong distance, spacing between signs, and number of signs.</p> <p>By not having proper setup, the moving vehicles don't have proper knowledge to slow down and avoiding an accident that may cause serious injury or death to seven workers that are working in close proximity to traffic.</p> | | | | |
| Message | | | | | |
| How Complied | | | | | |
| Violation Summary Text | Improper signage setup. | | | | |
| Documentation | What was the hazard and location? Improper signage setup with winding roads at 13905 Auburn Black-Diamond Rd in Auburn WA. | | | | |

What were the applicable measurements or exposure data? (Make, Model, Serial Number, Height, Etc.)
 Total site distance is 9648' Feet in length 1st sign to work zone is 4560' Feet, approximate flagger ahead to work zone 5055' Feet W3535 to work were flagger was 1925' Feet away
 there is a pic with the distance mapped with distance markings

How are employees exposed to the hazard?
 By not having proper signage the vehicles that were traveling down the highway at 45 miles per hour, didn't know where the actual overhead telecommunications work was being conducted along side the road with 5 A&M Cable employees, which may have caused an accident.

How long has the hazard existed?
 Approximately 8 hours in duration.

Employee Exposure Information: (Name and Job Title)
 Blake Powell (Flagger)
 Eric Miller (Flagger)
 Zack Macavley (Forman A&M Cable)
 Jesse Millholland (Ground Hand A&M Cable)
 Brandon Lasher (Lineman A&M Cable)
 Ryan Ziebarc (Ground Hand A&M Cable)
 Kegan Wentworth (Ground Hand A&M Cable)

What did employee(s) say about this violation/hazard?
 Employee Said "he only had only 4 month experience and was unaware that he had to move his signs on a mobile operation".

What did management say about this violation/hazard?
 Management said that the Employee was in charge of the flagging operation as there was no traffic control supervisor on site.

| | |
|--------------------|--|
| Severity | By not having proper setup, the moving vehicles don't have proper knowledge to slow down and avoiding an accident that may cause serious injury or death to seven workers that are working in close proximity to traffic. |
| Probability | <p>Frequency of exposure/number of employees exposed: Approximately for a 8 hour shift there were a total of 7 workers at that site.</p> <p>Instances or number of times the hazard is identified in the workplace: This is a difficult question to answer at time, it is unknown because it is a busy rural roadway. possibly hundreds or possible thousands of vehicles in a 8 hour shift.</p> <p>Employee proximity to the hazard: The employees were working next to the the roadside doing telecom work.</p> <p>Weather and other working conditions: Was a sunny, cloudy day.</p> <p>Employee skill level and training: Employees all had their Washington State Traffic Control Flagger Card and other training.</p> <p>Employee awareness of the hazard: The Employee said he was unaware of the problem of the signs being improperly placed.</p> <p>Pace/speed/nature of task/work: Normal pace, flagging for a telecom company doing pole work, and string fiber.</p> <p>Use of personal protective equipment:</p> |

The employees from Integrity had there personal protective equipment (PPE) and were wearing it, but A&M Cable employee was sited for not wearing high visibility PPE.

Other mitigating or contributing circumstances (Mitigating circumstances may lower the probability; contributing may raise the probability):

By having the traffic signs spaced correctly may reduce the chance for vehicle, worker accident because they would be better informed of the location where the work was taking place.

Quick Fix

Is management's commitment at all levels apparent?

Yes, managements commit is apparent.

Are employees clearly involved in the safety and health programs?

Yes, the employees attend safety meeting regularly.

Good Faith

Are the safety and health policies communicated and applied?

Yes, they have an APP and all employees sign it after it has been read, go through a safety orientation and tests.

Is there evidence of the overall safety and health program, including a written accident prevention program (APP), other required written programs, training, etc.?

Yes they have an APP, and other programs that help with all aspects of there job.

History

What is the employer's statewide history of previous WISHA violations for the past three years?

They have had one other inspection in the last three years which had no violations.

Photos

No

Photos

0

Total Penalty: \$4,800.00