

<b>Section A</b>	<b>Business Area:</b>	<b>Field Team:</b>	<b>ORCS/ARCS File(s):</b>	<b>Date of Pre-Work:</b>
	<b>Contract #:</b>	<b>Geographic Location:</b>	<b>Project Name:</b>	<b>Pre-Work Type:</b>
	<b>Contractor:</b>		<b>On-site Supervisor:</b>	

<b>Section B</b>	<b>Pre-Work Scope &amp; Detail</b>		
	<p><b>Project Risk Ranking</b> EMS/Safety: High Medium Low</p> <p><b>BCTS EMS &amp; Safety Inspection Frequency:</b> <b>Other Comment:</b></p> <p><b>Contractor EMS Inspection Frequency:</b></p> <p><b>Tests and Drills</b> Requirement: <input type="checkbox"/> Test <input type="checkbox"/> Drill Type: <input type="checkbox"/> Fire <input type="checkbox"/> Spill <input type="checkbox"/> Slide By when: _____</p>	<p><b>Contract Type</b> Tree Planting Mechanical Site Preparation Stand Tending Herbicide Treatment Manual Brushing Prescribed Burning Silviculture Project Implementation Contract Other (specify): _____</p> <p><b>Blocks / Areas Applicable to Pre-work</b></p>	<p><b>Pre-work Method</b> Field Office Telephone</p> <p><b>Applicable Legislation</b> <input type="checkbox"/> FRPA <input type="checkbox"/> FPC <input type="checkbox"/> Other (Specify): _____</p>

<b>Section C</b>	<b>Requirement ID # &amp; Status</b>					
	<p><b>Yes:</b> Inspector's opinion requirement is being met. <b>Comments optional – Section E</b>  <b>No:</b> Inspector's opinion of non-conformance requiring <b>Corrective Actions – Section D</b> or, Incident requiring Incident Root Cause Investigation <b>Issue(s) – Section D</b>.  <b>ND:</b> Not discussed. <b>NA:</b> Not applicable. <b>Note:</b> Refer to <b>Guidance Document</b> for requirement detail.</p>					
	<b>ID #</b>	<b>01: Contract Safety Requirements</b>	<b>Status Y N ND NA</b>	<b>ID #</b>	<b>04: Legislative - Area and General Requirements</b>	<b>Status Y N ND NA</b>
	0101	SAFE Company status ensured?		0401	Damage to the environment discussed	
	0103	First Aid Assessment discussed?		0404	Landslide or Gully Process with Adverse Effects discussed	
	0104	Evidence of adequate supervision?		0405	Fan Destabilization resulting from activities discussed	
	0109	Adequate Safety ERP?		0412	General Wildlife Measures discussed	
	0111	Communication – signage, man check, etc. discussed?		0413	Resource Features discussed	
	0112	Discuss Road safety protocols		0414	Wildlife Habitat Features discussed	
	0113	SWP and PPE requirements discussed?		0415	Burn plan in place	
	0114	Known Hazards Identified?		0416	Smoke Venting index discussed	
	0115	Hazard Reporting discussed?		0417	FSP Results, Strategies & Measures discussed	
	0116	No MEWP created?		0418	FPC Requirements discussed	
	0117	Continual Improvement discussed?		0420	Other Legislative Requirements (Federal & BC) discussed	
	0118	NOP confirmation received and recorded		0421	First Nations Requirements discussed	
	0120	Manual Falling Addressed		<b>ID #</b>	<b>05: Legislative – Stream and Riparian Requirements</b>	<b>Status Y N ND NA</b>
	<b>ID #</b>	<b>02: Multiple Employer Workplace (applied to Prime Contractor)</b>	<b>Status Y N ND NA</b>	0502	RMA Retention on Temperature Sensitive Streams discussed	
	0202	PC Agreement Signed?		0503	Stream Crossings installed to protect channels and mitigate disturbance discussed	
	0203	PC obligations understood?		0504	Fish Passage maintained and Fish Habitat discussed	
	0204	Is PC qualified?		0506	Drinking Water Quality & Licensed Water works discussed	
	0211	Designated safety coordinator?		0507	Restrictions (herbicide, MSP, brushing/spacing) in RRZ discussed	
	0212	PC's safety program adequate?		0508	Use of livestock is appropriate (i.e.: no corral, or CWS)	
	0213	WSBC coverage confirmed?		0509	Use of fertilizers in appropriate areas	
	0214	PC reviewed safety programs?		<b>ID #</b>	<b>07: Legislative – Integrated Pest Management</b>	<b>Status Y N ND NA</b>
	0215	Known hazards identified?		0701	General prohibitions and restrictions as per IPMP discussed	
				0702	License/certificate for use of pesticides discussed	
				0703	Use of pesticides in accordance with a pesticide use notice discussed	

ID #	08: Environmental Emergency Response Requirements	Status Y N ND NA	ID #	10: General Contractual Conditions	Status Y N ND NA
0801	Environmental Emergency Response Plan discussed		1001	Work Progress Plan discussed	
0802	Awareness of roles, responsibilities, and procedures discussed		1002	Fire Protection requirements discussed	
0803	Incident Reporting discussed		1003	Site Clean-Up requirements discussed	
0804	Test and Drills discussed		1004	Camping and Parking requirements discussed	
0805	Emergency response equipment discussed		1005	Employment Standards Act Requirements	
0806	24 hour contact # provided to local Fire Centre		1006	Industrial Camp Standards Requirements	
0807	Appropriate Fire Danger Class discussed		<b>ID #</b>	<b>11: Specific Contractual Conditions (Schedules &amp; Appendices)</b>	<b>Status Y N ND NA</b>
0808	Fire Hazard Assessments and Abatement discussed		1101	Schedule Conditions discussed	
<b>ID #</b>	<b>09: EMS – Documents, Records &amp; General Requirements</b>	<b>Status Y N ND NA</b>	1102	Appendix Requirements discussed	
0901	Pre-work meetings discussed		1103	Stakeholder Notification discussed	
0902	Self Inspections discussed		<b>ID #</b>	<b>80: Sustainable Forest Management Certification</b>	<b>Status Y N ND NA</b>
0903	Project Plan documents to be on-site discussed		8001	SFM Certification Requirements discussed	
0904	Training current – records completed, updated and available		<b>ID #</b>	<b>90: Business Area Specific Requirements</b>	<b>Status Y N ND NA</b>
0905	Industrial Waste discussed		9005	A Fire Hazard Assessment must be completed and supplied to BCTS.	
0906	BCTS Fuel Handling (EFP 06) requirements discussed				
0907	Other Environmental Field Procedures discussed				

Section D	ID #	CORRECTIVE ACTION – 1			
		<b>Requirement:</b>	<b>Responsibility:</b>		
	<b>Description:</b>		<b>Target Date:</b>	<b>Completion Date:</b>	
	<b>Corrective Action:</b>		<b>Follow-up:</b>		
	<b>ID #</b>	<b>CORRECTIVE ACTION – 2 (add extra sheets for more actions)</b>			
		<b>Requirement:</b>	<b>Responsibility:</b>		
<b>Description:</b>			<b>Target Date:</b>	<b>Completion Date:</b>	
<b>Corrective Action:</b>			<b>Follow-up:</b>		

<b>ISSUE(S)</b>	Complete Incident Report Form for each incident type. Enter in Issue Tracking System (ITS) linked to the Pre-work. ITS required for significant or repeat non-conformance, potential non-compliance, or Incident (as defined in EOP-04).	Issue #: _____ Issue Type: _____ Issue #: _____ Issue Type: _____
<b>Section E</b>	<b>GENERAL PRE-WORK COMMENTS</b> (Reference Requirement ID # where appropriate, add extra sheets for more comments)	
	Pre-Work delivered by: _____	Received by: _____
	Signature X: _____	Signature X: _____
<i>I accept receipt of this pre-work and am in agreement with the stated actions.</i>		
Attachment: Additional Pages <input type="checkbox"/> Photos <input type="checkbox"/> Maps <input type="checkbox"/> Correspondence <input type="checkbox"/> Incident Report <input type="checkbox"/> Other <input type="checkbox"/>	Date of Delivery to Contractor:  Planned Inspection Date:	Delivery Method: On-site <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/>

**ADDITIONAL PERSONNEL RECEIVING PRE-WORK**

Section F	Name (print)	Signature	Employer	Pre-Work delivered by	Date of Pre-Work delivery