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| Section A | Business Area: | | | Field Team: | | | | ORCS/ARCS File(s): | | | Date of Inspection: Click here to enter a date. | | |
| Contract #: | | | **Geographic Location:** | | | | **Project Name:** | | | **Inspection Type:** | | |
| Contractor*:* | | | | | | | On-site Supervisor: | | | | | |
| Section B | Inspection Detail & Activity Status | | | | | | | | | | | | |
| **Contract Type**  Development/Planning Site Plan/Survey  Road Layout  Block Layout  Cruising  Professional Services  Silviculture Surveys  Site Assessments  Other: (specify):       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Note: Check applicable boxes for Multi phase contracts | | | | **Inspection Method**  Field Office  **Areas Inspected** | | | | | **Applicable Legislation**  FRPA  FPC  Other (specify): | | **Operational Status**  Inactive  Active  **\_\_\_\_\_\_\_**% complete  Complete | |
| Section C | **Requirement ID # & Status** | | **Yes:** Inspector’s opinion requirement is being met. **Comments** **optional – Section E.**  **No:** Inspector’s opinion of non-conformance requiring **Corrective** **Actions – Section D** or,  Incident requiringIncident Root Cause Investigation **Issue(s) –** **Section D**.  **NI:** Not inspected. **NA:** Not applicable.  **Note:** Refer to **Guidance Document** for requirement detail. | | | | | | | | | | |
| ID # | 01: Contract – Safety Requirements | | | | Status  Y N NI NA | 0409 | | Cutblock adjacency requirements met | | | |  | |
| 0101 | SAFE Company status? | | | |  | 0410 | | Wildlife Tree Retention Areas Requirements followed | | | |  | |
| 0102 | First Aid requirements met? | | | |  | 0412 | | General Wildlife Measures followed | | | |  | |
| 0104 | Evidence of adequate supervision? | | | |  | 0413 | | Resource Features protected | | | |  | |
| 0105 | No BCTS Safety concerns reported? | | | |  | 0414 | | Wildlife Habitat Features protected | | | |  | |
| 0106 | No Safety Incidents? | | | |  | 0417 | | FSP Results, Strategies & Measures followed | | | |  | |
| 0107 | No contractor safety concerns from section 3.10? | | | |  | 0418 | | FPC Requirements met | | | |  | |
| 0108 | CAL up to date? | | | |  | 0420 | | Other Legislative Requirements (Federal & BC) followed | | | |  | |
| 0109 | Adequate Safety ERP? | | | |  | 0421 | | First Nations Requirements met | | | |  | |
| 0110 | Safety Records | | | |  | ID # | | 05: Legislative – Stream and Riparian Requirements | | | | Status  Y N NI NA | |
| 0111 | Communication – signage, man check, etc.? | | | |  | 0501 | | Road in RMA, Cutting in RRZ, RMZ Retention as authorized | | | |  | |
| 0112 | Conformance with Road safety protocols | | | |  | 0502 | | RMA Retention on Temperature Sensitive Streams followed | | | |  | |
| 0113 | Apparent conformance with SWPs & PPE? | | | |  | 0503 | | Stream Crossings located to protect channels and mitigate disturbance | | | |  | |
| 0118 | NOP confirmation received and recorded | | | |  | 0506 | | Drinking Water Quality & Licensed Water works protected | | | |  | |
| 0119 | Safety meeting documentation? | | | |  | ID # | | 06: Legislative – Road, Trail and Structure Requirements | | | | Status  Y N NI NA | |
| 0120 | Manual Falling Addressed | | | |  | 0601 | | Permanent Access Limits met | | | |  | |
| **ID #** | 02: Multiple Employer Workplace (applied to Prime Contractor) | | | | Status  **Y N NI NA** | 0603 | | Design of bridge meets or exceeds standards | | | |  | |
| 0201 | PC designation? | | | |  | 0604 | | Bridge or culvert designed to pass highest peak flow | | | |  | |
| 0205 | Communication of hazards by PC? | | | |  | 0608 | | Road Clearing Widths Appropriate for Conditions, including safety | | | |  | |
| 0206 | Adequate coordination by PC? | | | |  | **ID #** | | 08: Environmental Emergency Response Requirements | | | | Status  **Y N NI NA** | |
| 0207 | PC roles & responsibilities clear | | | |  | 0801 | | Env Emergency Response Plan onsite, location known | | | |  | |
| 0208 | Adequate coordination & supervision | | | |  | 0802 | | Awareness of roles, responsibilities and procedures confirmed | | | |  | |
| 0209 | Appropriate Prime Contractor records | | | |  | 0803 | | Incident Reporting documented and reported | | | |  | |
| 0210 | PC CAL up to date | | | |  | 0804 | | Test and Drills scheduled and completed | | | |  | |
| ID # | 04: Legislative – Area and General Requirements | | | | Status  Y N NI NA | 0805 | | Emergency response equipment onsite and maintained | | | |  | |
| 0401 | Damage to the environment prevented | | | |  | 0806 | | 24 hour contact # provided to local Fire Centre | | | |  | |
| 0407 | Site Plans prepared in accordance with prescribed requirements | | | |  | 0807 | | Appropriate Fire Danger Class determined | | | |  | |
| 0408 | Maximum cutblock size not exceeded | | | |  | 0808 | | Fire Hazard Assessments and Abatement conducted | | | |  | |

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|  | ID # | | 09: EMS – Documents, Records & General Requirements | | Status  **Y N NI NA** | | ID # | 11: Specific Contractual Conditions (Schedules & Appendices) | | | | Status  Y N NI NA |
| 0901 | | Pre-work meetings done & documented | |  | | 1101 | Schedule Conditions followed | | | |  |
| 0902 | | Self Inspections & Corrective Actions complete, documented & followed-up | |  | | 1102 | Appendix Requirements followed | | | |  |
| 0903 | | Project Plan documents on-site and available | |  | | 1103 | Stakeholders notified | | | |  |
| 0904 | | Training current – records completed, updated and available | |  | | **ID** # | 80: Sustainable Forest Management Certification | | | | Status  **Y N NI NA** |
| 0905 | | Industrial Waste contained and timely removal | |  | | 8001 | SFM Certification Requirements met | | | |  |
| 0906 | | Conformance to BCTS Fuel Handling (EFP 06) requirements | |  | | ID # | 90: Business Area Specific Requirements | | | | Status  **Y N NI NA** |
| 0907 | | Environmental Field Procedures on site and followed | |  | | 9001 |  | | | |  |
| ID # | | 10: General Contractual Conditions | | Status  Y N NI NA | | 9002 |  | | | |  |
| 1001 | | Work proceeding in accordance with Work Progress Plan | |  | | 9003 |  | | | |  |
| 1002 | | Fire Protection requirements met | |  | | 9004 |  | | | |  |
| 1003 | | Site Clean-Up requirements met | |  | | 9005 |  | | | |  |
| 1004 | | Camping and Parking requirements met | |  | |  |  | | | |  |
| 1006 | | Industrial Camp Standards Requirements | |  | |  |  | | | |  |
| **Section D** | | ID # | | CORRECTIVE ACTION – 1 | | | | | | | | |
|  | | Requirement: | | | | | | Responsibility: | | |
| Description: | |  | | | | | | Target Date:  Click here to enter a date. | Completion Date:  Click here to enter a date. | |
| Corrective Action: | |  | | | | | | Follow-up: | | |
| ID # | | CORRECTIVE ACTION – 2 | | | | | | | | |
|  | | Requirement: | | | | | | Responsibility: | | |
| Description: | |  | | | | | | Target Date:  Click here to enter a date. | Completion Date:  Click here to enter a date. | |
| Corrective Action: | |  | | | | | | Follow-up: | | |
| ID # | | CORRECTIVE ACTION – 3 | | | | | | | | |
|  | | Requirement: | | | | | | Responsibility: | | |
| Description: | |  | | | | | | Target Date:  Click here to enter a date. | Completion Date:  Click here to enter a date. | |
| Corrective Action: | |  | | | | | | Follow-up: | | |
| ID # | | CORRECTIVE ACTION – 4 (add extra sheets for more actions) | | | | | | | | |
|  | | Requirement: | | | | | | Responsibility: | | |
| Description: | |  | | | | | | Target Date:  Click here to enter a date. | Completion Date:  Click here to enter a date. | |
| Corrective Action: | |  | | | | | | Follow-up: | | |
| **ISSUE(S)** | | | | 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:** | | |
| **Section E** | | **GENERAL INSPECTION COMMENTS**  (Reference Requirement ID # where appropriate, add extra sheets for more comments) | | | | | | | | | | |
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| **Inspected by:**  **Signature X**: | | | | **Received by:**        **Signature** ***X***:  *I accept receipt of this inspection and am in agreement with the stated actions.* | | | | | | |
| Attachment:  Additional Pages  Photos  Maps  Correspondence  Incident Report  Other | | | Date of Delivery to Contractor:  Click here to enter a date.  Next Planned Inspection Date:  Click here to enter a date. | | | | Delivery Method:  On-site  Email  Fax  Mail  Hand Delivered | | | |