PEAK LINING, LLC

PROGRAM DOCUMENT · 2026

# SAFETY & HEALTH PROGRAM

Procedures, task hazard controls and field forms for every Peak Lining crew and jobsite.

EFFECTIVE NOVEMBER 2026 · REVIEWED ANNUALLY



SECTION 1

# EMERGENCY RESPONSE PLAN

**Complete this form before work begins on every job.** Keep a copy in the rig and review it with the crew at the pre-job safety briefing.

**JOB NUMBER** _____

**CITY / LOCATION** _____

**SUBDIVISION** _____

**JOBSITE ADDRESS** _____

**JOBSITE CONTACT** _____

## EMERGENCY CONTACTS

**LOCAL FIRE DEPT. / EMS** _____

**AMBULANCE SERVICE** _____

**NEAREST MEDICAL FACILITY** _____

**ADDRESS** _____

**NEAREST EMERGENCY ROOM** _____

**ADDRESS** _____

## ON-SITE EMERGENCY EQUIPMENT

☐ First aid kit ☐ Eye wash station ☐ Fire extinguisher

☐ Rescue winch and tripod ☐ SDS binder and chemical injection card

**BRIEFING HELD BY** _____

**DATE** _____

SECTION 2

# SAFETY POLICY STATEMENT

**To:** All employees · **From:** Peak Lining, LLC · **Re:** Safety policy statement

Peak Lining believes our employees are our most valuable asset. Protecting the safety and health of every employee is part of every phase of our work, and we aim to keep every jobsite as free from hazards as possible.

Every employee is responsible for working safely and productively, staying aware of the hazards of the job, and following safe work practices, including the use of personal protective equipment (PPE). A safety program only works with everyone's involvement, so this program depends on your support and full participation.

## PRODUCTION IS NEVER MORE IMPORTANT THAN WORKER SAFETY.

## GOALS

Safety starts at the top and extends to every employee. Our goal is to run a profitable business while protecting employees from injury, illness or harm. Everyone takes responsibility for their own work and is held accountable for it.

- Minimize injuries and the loss of property and equipment
- Eliminate fatalities and permanent disabilities
- Eliminate OSHA citations
- Reduce workers' compensation and operating costs
- Keep the best safety and health conditions possible on every jobsite

## MANAGEMENT COMMITMENT

Peak Lining management commits to:

- Appointing a safety coordinator
- Setting company safety goals and objectives
- Keeping this written safety and health program current and in use
- Providing safety training for every employee
- Setting clear responsibilities for management and employees, and holding everyone accountable
- Setting and enforcing disciplinary procedures
- Reviewing this program every year and updating it as needed

**SAFETY COORDINATOR** _____

SECTION 3

# SAFETY TEAM & MEETINGS

## SAFETY TEAM

- The team includes management and field employees, led by the safety coordinator.
- It promotes safety and health through communication, and reviews policies and procedures with management.
- It reviews every accident and near-miss report.
- It identifies unsafe conditions and work practices and recommends corrections.
- It monitors each crew's atmospheric readings and keeps the records on file.
- It makes sure every employee is trained and understands their duties.

## WEEKLY SAFETY MEETINGS

Every Peak employee attends the weekly safety meeting, led by the safety coordinator. The meeting covers problems that came up or are expected, and other safety and health topics. To keep it useful:

- Start and stop on time and keep it moving.
- Use pictures, demonstrations and handouts to make the point.
- Cover each topic thoroughly.
- Review accidents, injuries, property losses and near misses for trends, and agree on corrective actions.
- Log the meeting time and have every attendee sign in.

## STOP-WORK AUTHORITY

Anyone on a Peak jobsite can stop the work if something is not safe, with no questions asked and no penalty. Work restarts only when the supervisor has corrected the hazard.

SECTION 4

# EMPLOYEE RESPONSIBILITIES

## FIELD TECHNICIANS

- Understand and follow the company safety program and jobsite procedures.
- Wear the required PPE at all times.
- Report unsafe conditions and incidents to the supervisor or safety coordinator.
- Refuse any work that threatens your safety or health, and use your stop-work authority.
- Keep the work area clean, organized and free of trip hazards.
- Understand the atmospheric readings for the space you are working in.
- Keep a tight respirator fit by following the respirator section of this program.

## SUPERVISORS AND FOREMEN

- Identify jobsite hazards and put the right controls in place.
- Make sure crews follow safe work practices, and correct problems right away.
- Investigate accidents, find root causes and put preventive measures in place.
- Lead by example and encourage everyone to take part in safety.
- Make sure the crew knows the emergency plan and is trained to respond.
- Make sure safety equipment is used properly and inspected.
- Sign off on every confined space entry after confirming the atmosphere is safe.
- Keep management and the safety coordinator informed and raise concerns early.

SECTION 5

# TRAINING & EQUIPMENT

| JOB TASK | QUALIFICATION | WHO |
|---|---|---|
| Supervise safety on the jobsite (OSHA 30) | Trained | Foremen / project managers |
| Confined space entry | Trained | All field employees |
| Confined space rescue | Trained | All field employees |
| First aid / CPR | Trained | Foremen / project managers |
| Fall protection supervision and inspection | Competent person | Foremen / project managers |
| Fall protection plan development and anchors | Qualified person | Foremen / project managers |
| Ladder inspection | Competent person | All field employees |
| Scaffold erection, dismantling and inspection | Competent person | Foremen / project managers |
| Heavy equipment operation | Qualified / licensed | Designated employees |
| Air and power actuated tools | Competent person | All field employees |
| Abrasive blasting | Trained | All field employees |
| Plural-component spray application | Trained | Applicators |
| Silica exposure control plan | Qualified person | Foremen / project managers |

A **qualified person** holds a recognized degree, certificate or professional standing, or has shown through knowledge, training and experience the ability to solve problems with the subject matter or work. A **competent person** can identify existing and predictable hazards and has the authority to correct them promptly.

## MINIMUM PPE

Hard hat · high-visibility vest · safety glasses · steel-toe boots · leather and nitrile gloves · ear plugs or muffs · face shield · protective suit · full-face respirator · supplied (clean forced) air where this program requires it

## CONFINED SPACE EQUIPMENT, EVERY ENTRY

Tripod with main winch and rescue winch · full-body harness · calibrated four-gas monitor · ventilation blower · clean forced-air supply with CO alarm · two-way communication

SECTION 6

# TASK HAZARD CONTROLS

## TASK: CONFINED SPACE ENTRY

| HAZARDS | CONTROLS |
|---|---|
| **Confined space** | ■ Follow the written entry procedure and complete an entry permit for every entry.<br>■ Plug or block lines carrying hazardous material.<br>■ A trained standby attendant, current in CPR and first aid, stays in constant contact with the entrant and wears a respirator while work is underway.<br>■ A second employee stays within sight and call of the attendant.<br>■ Watch the surroundings for drifting vapor, dust, traffic and pedestrians, and keep the space well lit. |
| **Atmosphere: $H_2S$, CO, LEL, $O_2$** | ■ Test and record the atmosphere before any ventilation.<br>■ Ventilate, then retest and record before entry.<br>■ Oxygen must be between 19.5% and 23.5%. If any gas is detected, only the foreman or project manager decides on entry, using clean forced air.<br>■ Monitor and record the atmosphere continuously while the space is occupied. |

## TASK: CONFINED SPACE ENTRY (CONTINUED)

| HAZARDS | CONTROLS |
|---|---|
| **Falls** | ■ Use and inspect all fall protection to the manufacturer's instructions; a trained employee inspects it before each use.<br>■ Use a tripod on every confined space, whatever the depth.<br>■ Lower entrants on both the main and rescue winch lines until they are on their feet; the main line stays connected at all times.<br>■ Entrants stay in their harness the whole time they are in the space and inspect it for tears and damaged stitching or D-rings before each use. |
| **Overhead hazards** | ■ Entrants wear hard hats at all times.<br>■ Keep tools and materials at least 10 ft from the opening.<br>■ Lower tools and materials by rope in a bucket; nothing over 50 lb by rope. Use a winch for heavy loads, per the manufacturer. |

## TASK: LADDER USE

| HAZARDS | CONTROLS |
|---|---|
| **Falls from ladders** | ■ Select the right ladder; never a light household aluminum ladder. Do not exceed its duty rating.<br>■ Inspect before use. Keep a 4:1 slope, extend 36 in. above a landing, and secure extension ladders.<br>■ Use 3-point contact; stay off the top step of a stepladder and the top 3 rungs of a straight ladder.<br>■ Set on firm, level footing with non-slip feet; never against a movable object. Guard or tape off the ladder where people or vehicles pass.<br>■ A ladder alone is never allowed for confined space entry; it may be used together with the tripod and harness. |

## TASK: POWER TOOLS

| HAZARDS | CONTROLS |
|---|---|
| **Shock** | ■ Use tools with intact, grounded casings, on GFCI protection.<br>■ Unplug before changing any part. No cords with exposed wire; employees do not replace cord ends. |
| **Cuts and eye injuries** | ■ Wear leather gloves to handle blades and bits, and keep guards in place.<br>■ Wear safety glasses and hearing protection; no loose clothing; secure the work piece. Stop if a blade or bit binds. |

## TASK: AIR-POWERED TOOLS

| HAZARDS | CONTROLS |
|---|---|
| **High-pressure hose and fittings** | ■ Inspect tools daily and oil as needed. A competent person inspects hoses before each use.<br>■ Connect 3/4 in. Chicago fittings with pins and hose whip restraints.<br>■ No hose is swapped without the foreman's approval, and no air is charged until the foreman has inspected the whole system. |
| **Hand-arm vibration** | ■ Wear anti-vibration gloves. No continuous tool use over 60 minutes. |
| **Eye and hearing injuries** | ■ Wear safety glasses, face shield or full-face respirator, and hearing protection.<br>■ Use hoses and fittings rated for the pressure; disengage tools when not in use; never point a tool at anyone.<br>■ The standby attendant wears the same PPE as the entrant. |

## TASK: SCAFFOLD USE

| HAZARDS | CONTROLS |
|---|---|
| **Falls and improper assembly** | ■ Erect and use scaffolds per OSHA and the manufacturer, under a competent person.<br>■ Fall protection or guardrails at 6 ft and above.<br>■ Inspect before each shift and tag green; tag defective scaffolds red, do not use. Lock wheels and check pins and bolts before climbing. |

## TASK: ABRASIVE BLASTING

| HAZARDS | CONTROLS |
|---|---|
| **Struck by abrasive** | ■ Only trained employees blast, following the standard operating procedure.<br>■ Never point the nozzle at a person; keep hands clear of the nozzle; confirm the remote deadman control works before starting.<br>■ The attendant stays close enough to communicate but out of the blast area. |
| **Silica dust** | ■ The blaster wears a supplied-air blasting hood. Everyone else on site wears a full-face respirator with P100 filters until cleanup is done.<br>■ Wet down the work area to keep dust down, and follow the silica exposure control plan. |
| **Eye, skin and hearing** | ■ Full-body protective suit for the blaster; hearing protection for everyone during blasting.<br>■ Flush eyes right away at the eye wash station if irritation occurs. |

## TASK: SPRAY APPLICATION OF POLYUREA AND FOAM (PLURAL-COMPONENT, HIGH PRESSURE)

| HAZARDS | CONTROLS |
|---|---|
| **Inhalation** | ■ Review the Safety Data Sheet for each Pure Green Shield product before use.<br>■ Inside confined spaces the applicator works on supplied (clean forced) air. Anyone else exposed wears a full-face respirator with organic vapor/P100 cartridges, including the standby attendant. |
| **Skin and eye contact** | ■ Wear protective suits and chemical-resistant gloves. Wash exposed skin with soap and water or hand cleaner, never solvent.<br>■ Replace tear-off lens covers to keep visibility clear; flush eyes at the eye wash station if exposed. |
| **Injection injury** | ■ Maintain the proportioner per the manufacturer; keep screens and lubrication in place, fittings tight and valves closed before startup.<br>■ Keep the hose stretched out with no kinks.<br>■ If material is injected into the skin, take the chemical injection card from the SDS station and go to the nearest emergency room immediately. |

### TASK: WORKING IN ROADWAYS AND PARKING LOTS

| HAZARDS | CONTROLS |
|---|---|
| **Pedestrians and property** | ■ Secure the work area to keep unauthorized people out.<br>■ Schedule work to limit exposure to people and property, and plan around mailboxes, driveways, ramps, doorways and sidewalks. |
| **Struck by vehicle** | ■ Set traffic control first, using MUTCD signs and devices; reflective signs at night.<br>■ Use 36 in., 12 lb cones spaced no more than 10 ft apart.<br>■ Flaggers are trained to 29 CFR 1926.201 and wear high-visibility vests. Only trained, authorized employees work in the roadway. |

SECTION 7

# RESPIRATOR FIT & SEAL

Each employee is issued their own full-face respirator and is fit tested before first use, using an OSHA-accepted qualitative method (irritant smoke). If a seal can't be made, check for:

- Facial hair at the cheeks and chin
- Jewelry caught between the face and the seal
- Straps that are loose or uneven
- Tears or cracks; a damaged respirator is taken out of service

The safety coordinator records each fit test on the fit test record, and a copy goes to every jobsite. Supervisors check the seal before each use:

- **Positive pressure:** cover the exhalation valve and exhale gently. Pressure should build with no air escaping.
- **Negative pressure:** cover the filters and inhale. No air should leak in past the seal.

FORM A

# CONFINED SPACE ENTRY PERMIT

**ENTRY DATE** _____ **START TIME** _____

**LOCATION** _____ **LOCAL EMERGENCY #** _____

**STRUCTURE ID** _____ **STRUCTURE TYPE** _____

## ENTRY CHECKLIST (CIRCLE)

| | |
|---|---|
| Potential hazards identified YES / NO | Area secured YES / NO |
| Communications established YES / NO | Harness inspected YES / NO |
| Emergency procedures reviewed YES / NO | Rescue equipment inspected YES / NO |
| Entrants and attendants trained YES / NO | Emergency response plan complete YES / NO |

## EQUIPMENT AND PPE IN USE

☐ Tripod, main and rescue winch ☐ Harness ☐ Two-way communication ☐ Ventilation

☐ Clean forced air ☐ Air-purifying respirator ☐ Chemical-resistant suit ☐ Hard hat ☐ Gloves

☐ Glasses / goggles ☐ Hearing protection ☐ Steel-toe boots

## AIR MONITORING BEFORE ENTRY

**MONITOR TYPE** _____ **SERIAL NUMBER** _____

**CALIBRATION DATE** _____ **TIME / INITIALS** _____

| TIME | $O_2$ % | LEL % | CO PPM | $H_2S$ PPM |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

By signing, each person confirms they have reviewed this permit and the procedures in this program. Entry is not approved for anyone not confined-space trained. The permit is void if any box is NO or the monitor calibration has expired.

| ROLE | NAME | SIGNATURE | DATE |
|---|---|---|---|
| Entrant | | | |
| Entrant | | | |
| Attendant | | | |
| Supervisor | | | |

FORM B

# QUALITATIVE RESPIRATOR FIT TEST RECORD

Fit testing conducted in compliance with OSHA 29 CFR 1910.134(f).

**DATE** _____ **LOCATION** _____

**FIT TESTER** _____ **OTHER REGULATIONS** _____

**Protocol used:** ☐ Saccharin ☐ Bitrex ☐ Isoamyl acetate ☐ Irritant smoke

| NAME | RESPIRATOR (MAKE, MODEL, STYLE, SIZE) | PASS | FAIL | COULD NOT TEST, WHY | SIGNATURE |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

## COMMENTS

**FIT TESTER SIGNATURE** _____