COVID-19 Jobsite Specific Work Plan

Project: _____ **Contact Person:** _____ **Date:** _____

HAZARD CHECKLIST (following guidelines from the AGC COVID-19 Jobsite Practices Document)

1. Worker Personal Responsibilities	4. Personal Protective Equipment	7. Entering Occupied spaces
2. Social Distancing	5. Sanitation and Cleanliness	8. Other
3. General Jobsite/ Office practices	6. Jobsite Visitors	

HAZARD DESCRIPTION	guidelines	SITE SPECIFIC PROTECTIONS REQUIRED
	1, 2, 3, 4, 5, 6	*Increase space, break & lunch rotation, small group safety meetings, foreman sign in or photo documentation, glasses and gloves, restrict visitors*

MEANS OF SANITATION:

1. Hand Washing Stations ☐
2. Hand Sanitizer Stations ☐
3. Disinfect Frequently Touched Surfaces ☐
4. Office Cleaning twice daily ☐
5. Tissue availability ☐
6. Regular disposal of refuse ☐

METHODS OF DISTANCING:

1. Trade coordination ☐
2. Visitor/ Employee monitoring ☐
3. Break and/or shift rotation ☐
4. 6-foot personal space ☐

RESPONSIBLE PERSONS:

Break/lunch schedule: _____

Employee/ Visitor Monitoring: _____

Sanitation manager: _____

PPE: _____

Site Plan and Updates: _____

Employee Concerns _____