

## Appendix B: Trench Inspection Form

TRENCH INSPECTION AND ENTRY AUTHORIZATION FORM									
<b>LOCATION:</b>							<b>DATE:</b>		
<b>TIME OF INSPECTION(S)</b>									
<b>WEATHER CONDITIONS:</b>						<b>APPROX. TEMP.:</b>			
<b>CREW LEADER:</b>					<b>SUPERVISOR:</b>				
<b>DIMENSIONS:</b>		<b>DEPTH =</b>			Yes No		<b>HAZARDOUS CONDITIONS</b>		
		<b>TOP =</b>		W	L	<input type="checkbox"/> <input type="checkbox"/> ..... Saturated soil / standing or seeping water			
		<b>BOTTOM =</b>		W	L	<input type="checkbox"/> <input type="checkbox"/> ..... Cracked or fissured wall(s)			
<b>SOIL TYPE:</b>				<b>TESTED:</b>		<input type="checkbox"/> <input type="checkbox"/> ..... Bulging wall(s)			
<input type="checkbox"/> Solid rock (most stable)				<input type="checkbox"/> Yes		<input type="checkbox"/> <input type="checkbox"/> ..... Floor heaving			
<input type="checkbox"/> Average soil				<input type="checkbox"/> No		<input type="checkbox"/> <input type="checkbox"/> ..... Frozen soil			
<input type="checkbox"/> Fill material						<input type="checkbox"/> <input type="checkbox"/> ..... Super-imposed loads			
<input type="checkbox"/> Loose sand						<input type="checkbox"/> <input type="checkbox"/> ..... Vibration			
						<input type="checkbox"/> <input type="checkbox"/> ..... Depth greater than 10'			
<b>PROTECTION METHODS:</b>					<b>PLACEMENT OF SPOILS &amp; EQUIPMENT</b>				
<i>(Walls MUST be vertical—NO voids)</i>					<input type="checkbox"/> <input type="checkbox"/> ..... Spoils at least 2 feet from edge of trench				
<b>SHORING</b>					<input type="checkbox"/> <input type="checkbox"/> ..... Equipment at least 2 feet from edge				
<input type="checkbox"/> Timber					<input type="checkbox"/> <input type="checkbox"/> ..... Backhoe at end of trench				
<input type="checkbox"/> Pneumatic					<input type="checkbox"/> <input type="checkbox"/> ..... Compressor, etc. at remote location				
<input type="checkbox"/> Hydraulic					<b>LADDER LOCATION</b>				
<input type="checkbox"/> Screw Jacks					<input type="checkbox"/> <input type="checkbox"/> ..... Located in protected area				
<input type="checkbox"/> Trench Shield					<input type="checkbox"/> <input type="checkbox"/> ..... Within 25 feet of safe travel				
<b>UNEVEN, IRREGULAR WALLS</b>					<input type="checkbox"/> <input type="checkbox"/> ..... Secured				
<input type="checkbox"/> Trench Box					<input type="checkbox"/> <input type="checkbox"/> ..... Extends 36 inches above the landing				
<b>Sloping:</b> q 1:1 (45°)      q 1 ½:1 (34°)					<input type="checkbox"/> <input type="checkbox"/> ..... Leads to safe landing				
Yes No <b>ENVIRONMENTAL CONDITIONS:</b>					<b>OTHER:</b>				
<input type="checkbox"/> <input type="checkbox"/> Gas detector used?					<input type="checkbox"/> <input type="checkbox"/> Shoring equip. & mats inspected prior to use?				
<input type="checkbox"/> <input type="checkbox"/> Confined space permit issued?					<input type="checkbox"/> <input type="checkbox"/> Is trench SAFE to enter?				
<b>COMMENTS:</b>									
					<b>Work Order #</b>				
<b>N O T E</b> All unsafe conditions must be corrected prior to trench entry. If any hazardous conditions are observed, the trench must be immediately evacuated and no one allowed to re-enter until corrective action has been taken.					<b>TO BE FILLED OUT BY EHS PERSONNEL</b>				
					<b>Excavation Entry Authorized By:</b> _____ <div style="text-align: right;"><b>EHS Inspector</b></div>				