

Inspection Correction Notice

| PROJECT NAME: | DATE: |
|---|---------------------|
| JOB#: | - |
| INSPECTOR: | CORRECTION NOTICE # |
| CONTRACTOR: | |
| CONTRACTOR ACKNOWLEDGEMENT (INITIAL) | |
| LIBERTY UTILITIES STANDARD VIOLATION OR DIFFICIENT COND | DITION: |
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| CORRECTION REQUIRED: | |
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| Final Acceptance by LU Inspector /date: | |

NOTICE: Please note all correction notices shall be closed and approved by IOR prior to final project acceptance. Contractor final payment and schedule may be impacted. Liberty Utilities is not responsible for loss in production or schedule impacts due to deficient work or standards violations.

PLEASE coordinate all inspection with Liberty IOR or PM <u>48-HOURS IN ADVANCE</u> OF INSPECTION.

This form is to be maintained by LU's Inspector and placed in project job folder on the X drive in addition to the onsite project folder. At the completion of the project they will be filed with "as built" drawing for permanent record.



JOB HAZARD ANALYSIS (JHA)

| JOB ORDER NUMBER: | | POLE NUMBER [REMOVED]: | |
|---------------------------------|--|---|---------------------------------------|
| CIRCUIT / LINE NAME: | | POLE NUMBER [INSTALLED]: | |
| PRIMARY V: | | | LLED]: |
| INSTALLATION DATE: | | | |
| | | | |
| ADDRESS: | | | |
| SUPERVISOR / FOREMAN: | | LINE INSPECTOR: | |
| WORK TYPE: □ EMERGENCY □ | MAINTENANCE CAPITAL | FIRE THREAT TIER: \Box 2 \Box | 3 SEE PAGE 2 FOR DETAIL |
| (SELECT ALL | THAT APPLY) | WEATHER CONDITIONS: | |
| CREW: □ LIBERTY □ CONTRA | CTOR: | | |
| SWITCHING / ORDER NUMBER: | | | |
| | ERENCE DESIGN PACKAGE): | | |
| STEP 1: [SUPERVISOR / FOREM | IAN] PLEASE SELECT ALL THAT APP | PLY | |
| PERMITS / CLEARANCES: | FALL PROTECTION: | ☐ HEAVY LIFTING OR AWKWARD | ☐ PROPER RIGGING PRACTICE |
| ☐ ENVIRONMENTAL | ☐ SAFETY HARNESS | ☐ VISIBILITY | □ PERSONNEL PLATFORM |
| ☐ VEGETATION | LIFELINE | ☐ COMMUNICATIONS (PLAN) | ☐ PRELIFT FORM |
| ☐ CALTRANS / LU TRANS | ☐ MAN BASKET | ☐ OTHER: | □ PROPER BARRICADES |
| ☐ LAND / ROW | ☐ PROPER ANCHORAGE POINT | SITE PROVISIONS: | ☐ OTHER: |
| ☐ TRAFFIC CONTROL / FLAGGING | ☐ INSPECTION | □ MATER | EXTENSION LADDER / CLIMB: |
| LOCATES (811) | ☐ OTHER: | □ SHADE / AC | □ LADDER TIE OFF |
| CUSTOMER CONTACT | EXCAVATIONS: | ☐ HEATER | ☐ INSPECTED |
| OTHER: | □ PROPERLY BARRICADED | ☐ BLANKET / WRAP | ☐ TAGGED |
| PPE: | ☐ SHORING / SLOPING / BENCHING | ☐ OTHER: | _ \(\subseteq \text{ ACCESS} \) |
| ☐ HARD HAT | ☐ PROPER ACCESS | CDANE / HETING EQUIDMENT: | ☐ PROPER LADDER |
| ☐ SAFETY GLASSES | ☐ INSPECTION | CRANE / LIFTING EQUIPMENT: ☐ CRAWLER CRANE | ☐ OTHER: |
| ☐ HEARING | ☐ OTHER: | ☐ HYDRAULIC CRANE | HUMAN HAZARDS: |
| BOOTS | ENVIRONMENTAL: | ☐ INSPECTED | ☐ CONFUSION / MIX-UP POTENTIALS |
| ☐ FR CLOTHING ☐ GLOVE TYPE: | ☐ CUT / SPILL DISPOSAL | ☐ PROPER MAINTENANCE | ☐ DISTRACTIONS |
| ☐ CLASS 0 (RED) | ☐ SPILL PREVENTION MEASURES | ☐ COMMUNICATIONS | ☐ FIRST TIME EVOLUTION |
| ☐ CLASS 1 (WHITE) | ☐ SPILL CONTAINMENT | ☐ OUTRIGGERS EXTENDED | $\ \square$ Working after long breaks |
| ☐ CLASS 2 (YELLOW) | ☐ STORM DRAINS / DISCHARGE | ☐ MANUAL LIFTING EQUIPMENT | ☐ LACK OF EXPERIENCE |
| ☐ CLASS 3 (GREEN) | CLEAN UP MATERIALS | | GROUNDMAN |
| ☐ CLASS 4 (ORANGE) | ☐ OTHER: | ☐ PROPER RIGGING PRACTICE | NEW CREW - APPRENTICE |
| ☐ FACE SHIELD | GENERAL: | ☐ PERSONNEL PLATFORM | NAME(S): |
| □ OTHER: | - GASES / LIQUIDS | □ PRELIFT FORM | |
| EMERGENCY EQUIPMENT: | ☐ STRUCK BY | ☐ PROPER BARRICADES | ☐ OTHER: |
| ☐ FIRE EXTINGUISHER | ☐ PINCH POINTS | ☐ OTHER: | - EMERGENCY CONTACT LIST: |
| ☐ EVACUATION ROUTE | SNAGGING | HELICOPTED SET- | |
| ☐ REPORTING AREA | ☐ HEAT STRESS | HELICOPTER SET: ☐ SITE INSPECTED | 911 – POLICE, FIRE, MEDIC |
| ☐ FIRST AID KIT | ☐ ERGONOMICS☐ SIGNS | ☐ COMMUNICATIONS | LINE INSPECTOR: |
| OTHER: | ☐ HOLE COVERS | ☐ MANUAL LIFTING EQUIPMENT | |
| | ☐ SLIPS / TRIP HAZARDS | | PROJECT MANAGER: |



JOB HAZARD ANALYSIS (JHA)

STEP 2: VISITOR / CREW SIGN-IN (ATTACH [BLANK] PAGE FOR ADDITIONAL SPACE)

| VISIT | OR(S) | CREW | | INITIAL (SCOPE / |
|--|--|--|--|--------------------------|
| PRINT NAME | SIGNATURE | PRINT NAME | SIGNATURE | CHANGE ONLY) |
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| CONDITION / SCOPE | CHANGE: YES | □ N/A (EACH CREW MEMBER N | IUST INITIAL ABOVE AFTER CHANGE HAS BE | EN DISCUSSED) |
| CONDITION / SCOPE | CHANGE DESCRIPTIO | N [SUPERVISOR / FOREMAN]: | | |
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| STEP 3: PERSON IN | CHARGE [SUPERVI | SOR / FOREMANI | | |
| THAT EXIST, AND I H ALL PPE REQUIRED & | AVE CLEARLY DEFINE & EQUIPMENT REQUI | D THE ROLES AND RESPONSIBILI | GHLY BRIEFED ON ALL SITE CONDITIONS, S TIES OF ALL PERSON(S) ON MY SITE. I HAV SPECTS OF THIS PROJECT. ALSO, I AGREE T HAT ARISE. | E ADEQUATELY PROVIDE |
| | PRINT NAM | E | SIGNATURE | |
| | | | | |
| | | | | |
| TFP 4: POST IOB F | BRIFF – COMPLETFI | AT FND OF FACH WORKDAY | [SUPERVISOR / FOREMAN] | |
| | | O AT END OF EACH WORKDAY | [SUPERVISOR / FOREMAN] | |
| STEP 4: POST JOB E | | O AT END OF EACH WORKDAY | [SUPERVISOR / FOREMAN] | |
| PROJECT COMPLETE | D: □ YES □ NO | O AT END OF EACH WORKDAY | | |
| PROJECT COMPLETE | D: □ YES □ NO | | | |
| PROJECT COMPLETE | D: □ YES □ NO | | | |
| PROJECT COMPLETE | D: □ YES □ NO | | | |
| PROJECT COMPLETEI | D: | | | |
| PROJECT COMPLETEI GENERAL COMMENT | D: | IPLETED: | | |
| PROJECT COMPLETED GENERAL COMMENT HIGH FIRE THREAT D HFTD 3 – EXTREME RISH SERVICE ARE | D: YES NO S / TASKS TO BE CON ISTRICT (HFTD) DESCI | IPLETED: RIPTION: (FOR GREATER DETAIL C | | N PROSSER HILL & TRUCKEE |
| PROJECT COMPLETEI GENERAL COMMENT HIGH FIRE THREAT D | D: YES NO S / TASKS TO BE CON ISTRICT (HFTD) DESCI | IPLETED: RIPTION: (FOR GREATER DETAIL C | PUC HFTD HYPERLINK) SUBSTATION [ALONG PIONEER TRAIL] & BETWEEN | N PROSSER HILL & TRUCKEE |
| PROJECT COMPLETED GENERAL COMMENT HIGH FIRE THREAT D HFTD 3 – EXTREME RISK SERVICE ARE HFTD 2 – ELEVATED RISK | D: YES NO S / TASKS TO BE CON ISTRICT (HFTD) DESCI | IPLETED: RIPTION: (FOR GREATER DETAIL C | PUC HFTD HYPERLINK) SUBSTATION [ALONG PIONEER TRAIL] & BETWEEN | N PROSSER HILL & TRUCKEE |



G.O. 95 CHECKLIST

| JOB ORDER NUMBER: | POLE NUMBER [REMOVED]: |
|--|--|
| CIRCUIT / LINE NAME: | POLE NUMBER [INSTALLED]: |
| PRIMARY V: SECONDARY V: | POLE HEIGHT / CLASS [INSTALLED]: |
| INSTALLATION DATE: | INSPECTION DATE: |
| ADDRESS: | LAT. / LONG.: |
| SUPERVISOR / FOREMAN: | LINE INSPECTOR: |
| WORK TYPE: EMERGENCY MAINTENANCE CAPITAL | FIRE THREAT TIER: 2 3 SEE PAGE 2 FOR DETAIL |
| (SELECT ALL THAT APPLY) | WEATHER CONDITIONS: |
| , | |
| CREW: LIBERTY CONTRACTOR: CO | EMERGENCY CONTACT: |
| SWITCHING / ORDER NUMBER: | SOURCE SIDE DEVICE (SSD): |
| DETAILED JOB DESCRIPTION (REFERENCE DESIGN PACKAGE): | |
| | |
| | |
| | |
| THE G.O. 95 CHECKLIST SHALL BE REQUIRED OF THE INSPECTOR AND QA/QC SPUNCHECKED BOXES SHALL BE CONSIDERED "NOT APPLICABLE". | ECIALIST. PLEASE CHECK ALL THAT APPLY & CIRCLE OPTIONS AS APPROPRIATE; |
| | |
| WORKMANSHIP: □ EXCESS MATERIAL & LITTER REMOVED (CIRCLE ONE): YES NO | ☐ CLEARANCES MAINTAINED BETWEEN CONDUCTORS & OTHER EQUIPMENT ☐ VIBRATION DAMPERS INSTALLED [AS REQUIRED] |
| *EXCESS SPOIL & FILL MUST BE PROPERLY DISPOSED – NON-COMPLIANCE WILL RESULT IN | ☐ CLEARANCES MAINTAINED TO CENTERLINE OR POLE |
| FINE. | ☐ TIE RODS INSTALLED [AS REQUIRED] |
| □ PROPERTY DAMAGE REPAIRS (CIRCLE ALL THAT APPLY): | ☐ CONDUCTORS TIED/CLAMPED SECURELY TO INSULATORS |
| RESEED SOD FENCE LANDSCAPE OTHER | COMMENTS: |
| COMMENTS: | - |
| | _ EQUIPMENT RACKS - □ ALL APPARATUS SECURELY ATTACHED |
| HICH VOLTACE SIGNACE. | ☐ GROUNDING CONDUCTORS ROUTED & ATTACHED SECURELY |
| HIGH VOLTAGE SIGNAGE: MARKED WITHIN 40" OF PRIMARY OR RISER | ☐ LEADS MAINTAIN PROPER CLEARANCES |
| ☐ SIGN TYPE (CIRCLE ONE): POLE WRAP SIGN | ☐ 24" OF VERTICAL CLEARANCE TO TANGENT PRIMARY |
| ☐ CROSSARM(S) MARKED FRONT & BACK [OUTSIDE ON DOUBLE-ARMS] | COMMENTS: |
| COMMENTS: | - |
| | |
| FRAMING DETAILS: | □ NO CASE GROUND ON 3-WIRE SYSTEMS □ TIGHT HARDWARE |
| ☐ LIST APPLICABLE STANDARDS: | |
| | □ STANDOFF PINS & INSULATORS INSTALLED [AS NEEDED] |
| CROSSARM(S) □ HARDWARE TIGHT | □ BOLTS COVERS |
| ☐ BRACES – PROPER CLEARANCE TO ADJACENT HARDWARE (1.5" MIN.) | □ BUSHING COVERS |
| ☐ THROUGH BOLTS CLEAR OF PINS AND DEADENDS (1.5" MIN.) | □ PROPER CLEARANCE FROM PRIMARY □ PROPER CLEARANCE FROM SECONDARY |
| ☐ PROPER SEPARATION BETWEEN CIRCUITS | COMMENTS: |
| COMMENTS: | |
| | SECONDARY |
| BONDING CIFADANCE TO HARDWARE (4 5" MIN.) | ☐ SECONDARY TYPE (CIRCLE ONE): |
| ☐ CLEARANCE TO HARDWARE (1.5" MIN.) ☐ PRIMARY CONNECTIONS PROPERLY BONDED | DUPLEX TRIPLEX OPEN WIRE GRAY WIRE |
| ☐ SECONDARY CONNECTIONS PROPERLY BONDED | ☐ PROPER GROUNDING OF NEUTRAL CONDUCTOR ☐ PROPER TENSIONING |
| ☐ STIRRUPS, HOTLINE CLAMPS, AND LEADS SECURELY FASTENED | ☐ DOUBLE DEADENDED TO POLE |
| COMMENTS: | □ ALL CONNECTORS / SPLICES COMPLETE & COVERED APPROPRIATELY |
| | PROPER CLEARANCES MAINTAINED PER G.O. 95 |
| PRIMARY | COMMENTS: |
| ☐ CLEARANCES MAINTAINED TO CENTERLINE OR POLE | |
| CLEARANCES MAINTAINED ABOVE GROUND / NEUTRAL | |



G.0. 95 CHECKLIST

| CUSTOMER SERVICE (SECONDARY) | VEGETATION MANAGEMENT: | |
|---|--|--|
| □ NUMBER OF SERVICES (FROM POLE): | ☐ 15' CLEARANCE OF TREES FROM | / PRIMARY |
| ☐ SERVICE TYPE (CIRCLE ALL THAT APPLY): | ☐ CHECKED AND REMOVED SECO | ONDARY DAMAGE FROM ABRASION |
| OVERHEAD UNDERGROUND BOTH | □ VINES / FOLIAGE REMOVED FR | OM POLE |
| TREE ATTACHMENT(S) (CIRCLE ONE): YES NO | | DE RIGHT-OF-WAY POSING EMINENT THREAT TO POLE / |
| CUSTOMER TYPE (CIRCLE ALL THAT APPLY): | LINE HAVE BEEN IDENTIFIED & REM | MOVED |
| INDUSTRIAL COMMERCIAL RESIDENTIAL METER NUMBERS: | *PLEASE NOTIFY VEGETATION MAN POSE EMINENT THREAT TO POLE / | NAGEMENT IF TREES OUTSIDE RIGHT-OF-WAY APPEAR TO LINE. |
| COMMENTS: | | |
| | | |
| GROUNDING | LAND MANAGEMENT: | The MEC NO |
| ☐ GROUND WIRE SECURELY STAPLED TO POLE | ☐ GUY(S) REQUIRED (CIRCLE ONE LEAD DIRECTION (DEG | |
| GROUND ROD MINIMUM 12" DEEP | LEAD LENGTH(S): | |
| ☐ 2 ND GROUND ROD (DELTA SYSTEMS): YES NO | | HT-OF-WAY (CIRCLE ONE): YES NO |
| GROUND ROD MINIMUM 24" FROM POLE | ☐ ENCROACHMENT APPROVAL D | ATE: |
| PARALLEL RODS SEPARATED MINIMUM 6' APART | □ APPROVING LAND AGENT (LIBE | |
| ☐ GROUND ROD FOR ARRESTERS SEPARATED FROM TRANSFORMER SECONDARY GROUND ROD BY MINIMUM 20" (WYE SYSTEMS) | ☐ GUY(S) INSTALLED PER DESIGN | PACKAGE (CIRCLE ONE): YES NO |
| ☐ IF USED, BARE #4 PARALLEL TO THE GROUND BURIED AT MINIMUM OF 18" | *IF NO, PLEASE CONTACT RANDY M | 1EYER (LAND SURVEYOR) (530) 546-3213 |
| COMMENTS: | ☐ WORK PERFORMED OUTSIDE R | |
| | IF YES, PLEASE DESCRIBE: | |
| GUYING | ☐ EQUIPMENT INSTALLED OUTS | DE RIGHT-OF-WAY (CIRCLE ONE): YES NO |
| ☐ GUY MARKER INSTALLED ON OUTERMOST GUY ☐ PROPER TENSION [DOWN & SPAN GUYS] | IF YES, PLEASE DESCRIBE: | |
| ☐ PROPER TENSION [DOWN & SPAN GUYS] ☐ SECTIONALIZING LINK INSTALLED BETWEEN 6' & 9' OF POLE ATTACHMENT | | |
| ☐ SLACK SPAN (CIRCLE ONE): YES NO | COMMENTS: | |
| □ PROPER CLEARANCE MAINTAINED UNDER SPAN GUYS | | |
| ☐ ABANDONED ANCHORS CUT-OFF BELOW GRADE | CLOSEOUT CHECKLIST [ALL AR | E REQUIRED]: |
| ☐ EXISTING ANCHOR REUSED (CIRCLE ONE): YES NO | ☐ AS-BUILT ATTACHED | |
| □ NEW ANCHOR(S) INSTALLED MINIMUM 2' FROM EXISTING / REMOVED | - CONSTRUCTION SKETC | CH |
| COMMENTS: | - BOM | ON 9 WORK ZONE |
| | □ PHOTOS OF NEW CONSTRUCTI □ COPY OF JHA ATTACHED | ON & WORK ZONE |
| RISERS | ☐ PROJECT DOCUMENTATION AT | TACHED |
| PROPER RISER EQUIPMENT ARM INSTALLED | - PROJECT DOCOMENTATION AT | TACTED |
| ☐ CONCENTRIC GROUNDS WOUND & TIED TO POLE GROUND | *QA | A/QC SPECIALIST - ONLY* |
| $\ \square$ "HIGH VOLTAGE" SIGN WITHIN 40" OF TERMINATIONS FOR PRIMARY | DOES THIS PROJECT REQUIRE CORF | RECTIVE ACTION? YES NO |
| ☐ ARRESTERS INSTALLED & GROUNDED | IF YES, PLEASE DESCRIBE INFRACTION | |
| ☐ RISER CONDUIT SECURED TO POLE ADEQUATELY | , | |
| ☐ METAL SWEEP WITH PROPER FITTING TO RISER AT BOTTOM OF POLE | | |
| □ PRIMARY RISER TAG INDICATES VOLTAGE & FIRST SECTIONALIZING POINT | | |
| ☐ SECONDARY RISER TAG INDICATES DISTANCE & DIRECTION TO FIRST SPLICE BOX COMMENTS: | | |
| | | TOURS NO. |
| COMMUNICATIONS | IF YES, IS NEW G.O. 95 CHECKLIST R IF YES, IS QA/QC REQUIRED AGAIN | |
| COMMS TRANSFERRED TO POLE (CIRCLE ONE): YES NO | II 1E3, I3 QA, QC REQUIRED AGAIN | : 115 110 |
| ☐ CLEARANCE TO ENERGIZED LINES (MINIMUM 40") | SIGNATURES: | |
| SPACING BETWEEN COMMS MINIMUM 12" | INSPECTOR: | |
| □ NUMBER OF COMMS ATTACHMENTS: COMMENTS: | | |
| | QA/QC SPECIALIST: | |
| MISCELLANEOUS | ay you or Loralion. | |
| $\ \square$ CLIMBING: NO OBSTRUCTIONS [OTHER THAN THOSE ALLOWABLE BY G.O. 95] | | |
| ☐ RAPTOR GUARDS INSTALLED CORRECTLY | HIGH FIRE THREAT DISTRICT (HI | FTD) DESCRIPTION: (FOR GREATER DETAIL CPUC HFTD |
| SWITCH HANDLES MINIMUM 15" ABOVE GRADE | HYPERLINK) | , |
| OVERHEAD EQUIPMENT SECURED AND LOCKED | HFTD 3 – EXTREME RISK | |
| ☐ ANTI-SPLIT BOLT INSTALLED WITH SQUARE WASHERS | SERVICE AREAS: | SOUTH LAKE TAHOE BETWEEN MEYERS - STATELINE |
| ☐ JUMPER COVERS | | SUBSTATION [ALONG PIONEER TRAIL] & BETWEEN |
| CUTOUT COVERS | | PROSSER HILL & TRUCKEE |
| FAULT TAMERS COMMENTS: | HFTD 2 – ELEVATED RISK | |
| COMMENTS: | SERVICE AREAS: | ALL AREAS NOT LISTED ABOVE SHOULD BE CONSIDERED |
| | | ELEVATED RISK (HFTD 2) |



Pole/Structure Inspection Sheet

| JOB NAME: | JOB# : | |
|-----------------------------|-------------|--|
| CONTRACTOR PERFORMING WORK: | SUPERVISOR: | |
| INSPECTOR: | | |

| POLE/ STRUCTURE ID# | EXCAVATION DEPTH/ COMPACTION | POLE/STRUCTURE FRAMING | ANCHORAGE/ SUPPORT | STRAPPING/STAPLING OF CONDUCTORS OR RACEWAYS | ACCEPTANCE DATE | INSPECTOR APPROVAL |
|---------------------------|------------------------------------|---------------------------|-----------------------|--|--------------------|-----------------------|
| (1) | (2) | (3) | (4) | (5) | (6) | (7) |
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⁽¹⁾The field ID number from drawings.

⁽²⁾IOR to mark approved with "X" or check mark

⁽³⁾ IOR to mark approved with "X" or check mark

⁽⁴⁾ IOR to mark approved with "X" or check mark (5) IOR to mark approved with "X" or check mark

⁽⁶⁾ IOR to list date of final acceptance all work is acceptable and no

Correction notices are outstanding.