

 **SAFETY WORKS**

SAFE ACCESS ALTERNATIVE APPROVAL

DATE	TIME	CONTRACTOR	
LADDER TYPE(S) _____			
DESCRIPTION OF WORK TASK, EQUIPMENT TO BE USED, AND LOCATION(S): _____ _____			
EXPLANATION OF WHY LADDERS ARE BEING USED IN LIEU OF ALTERNATIVE OPTIONS: _____ _____			
PRE-WORK TASK EVALUATIONS AND VERIFICATIONS			
	YES	NO	N/A
Submittal of competent person(s) verification.			
Submittal of user training for exposed employees.			
Ladder(s) being used are properly inspected and free of defects.			
Extension ladder extends 3' above the floor and is properly secured.			
Extension ladder is set up at a 4:1 ratio.			
Ladder is level, stable and on solid ground.			
Work task will require the use of a personal fall arrest system.			
APPROVAL SIGNATURES AND DATES			
CONTRACTOR COMPETENT PERSON	COMPANY	DATE	
MCCARTHY APPROVAL (NAME)		DATE	