

USGP Site-Specific Safety Plan (SSSP) Cross Reference Checklist



Project Name: XXXXX	Prime/General Contractor: XXXXX
Project Manager: XXXXXX	Project No.: X.XXXXXX
Reviewer Name: XXXXX	Reviewed on: XXXXX
TCE Accepted: Yes <input type="checkbox"/> No <input type="checkbox"/>	Cost Code: Network – XXXXXXXX Activity – 00XX
	SSSP Revision Number: XX

Contractor shall develop a SSSP that includes the sections listed below. The SSSP must be reviewed and accepted by Company prior to mobilization.

Sect.	SSSP Key Requirements	Requirement Fulfilled			Reference(s)	TCE / Contractor Comments
		Yes	No	N/A		
1.0	Safety Culture Alignment					
1.1	Contractor Safety Policy/Commitment to Safety <i>*Is Policy incorporated into SSSP</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 2.1 of the OHS Standard	
1.2	TCE's Life Saving Rules <i>*Incorporated into SSSP</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 2.4 of the OHS Standard	
1.3	Contractor Accountability for Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 1.2 of the OHS Standard	
2.0	Project Overview					
2.1	Contractor Scope of Work (SOW) Summary <i>*Ensure there is a level of detail (excavation, crane operations, SOW, etc.) and not just high level</i> <i>* Inclusion of overview/site map for Prime Contractor showing area(s) under their control</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections 1.1 & 4.1 of the OHS Standard	
2.2	Organization of Work <i>*Prime Contractor Status, Other Contractors in the area, Any interfaces with TCE Facilities or Operations</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.3	Contractor Project Organization <i>*Key contact list for onsite supervision</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.4	Project Location Details <i>*Physical address/GPS Coordinates</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.5	Contractor Schedule <i>*Mobilization Date, Construction Duration, Demobilization</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.6	Hours of Work <i>*Workdays, i.e., Monday thru Friday/Saturday</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 6 of the OHS Standard	
2.7	Extended Hours Policy <i>*Fatigue Management, PM Approval</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 6 of the OHS Standard	
3.0	Roles & Responsibilities for Health and Safety					
3.1	Contractor's HSE Structure <i>*Link corporate and field</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.2	Acknowledgement of Prime/General Contractor Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 3 of the OHS Standard	
3.3	Health & Safety Roles and Responsibilities <i>*Including specific responsibilities for key project personnel: Project Manager, Construction Manager, Supervisors, Safety Rep., Sub-contractors, and visitors</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 3 of the OHS Standard	

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3.4	Communication/Notification Process <i>*How is this link to TC Energy</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.9 of the OHS Standard	TC Energy PM -
4.0	Safety Policies, Guiding Documents & Referenced Standards					
4.1	Contractor Health and Safety Management System / Program <i>*Is a robust management system in place</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 2.2 of the OHS Standard	
4.2	TCE Project Safety Management Plan (SMP) <i>*Has this been provided to the Prime/General Contractor</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 3 of the OHS Standard	
4.3	OHS Standard for Prime/General Contractors (Rev. 15) <i>*Prime Contractor has latest version and been reviewed</i> <i>*Referenced within SSSP</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.4	Excavation Specification (TES-CT-EXC-GLE) <i>*Referenced within SSSP (if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.3 of the OHS Standard	
4.5	Pipeline Construction and Maintenance in Proximity to Overhead Powerlines Specification (TES-CT-OHP-GL) <i>*Referenced within SSSP (if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.2 of the OHS Standard	
4.6	Steep Slope Work Specification (TES-CT-SLOPE-GL) <i>*Referenced within SSSP (if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.4 of the OHS Standard	
4.7	Temporary Access Roads Specification (TES-CT-TAS-GL) <i>*Referenced within SSSP (if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.5 of the OHS Standard	
4.8	Utility Terrain Vehicle (USGP UTV Standard_v1) <i>*Referenced within SSSP (if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.14 of the OHS Standard	
4.9	Pipeline Construction Specification (TES-CT-GEN-G) <i>*Referenced within SSSP (if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.27 of the OHS Standard	
4.10	Applicable provincial, state, federal, safety regulations or acts, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 1.1 of the OHS Standard	
4.11	Alcohol and Drug Policy <i>*Sufficient details regarding Prime Contractor policy</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.7 of the OHS Standard	
4.12	Smoking Policy <i>*Details incorporated into the SSSP</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.13	Harassment-Free Workplace Policy <i>*Details incorporated into the SSSP</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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4.14	Firearms/Weapons Policy <i>*Details incorporated into the SSSP</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.21 of the OHS Standard	
4.15	Fitness to Work <i>*Details incorporated into the SSSP</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.7 of the OHS Standard	
5.0	Sub-Contractor Management (If applicable)					
5.1	Subcontractor Prequalification/Management Processes <i>*Specific SOW of subcontractor(s) If more than one subcontractor, specific to each</i> <i>*Selection Process</i> <i>*Pre-job preparation</i> <i>*On-site monitoring</i> <i>*Post contract performance feedback, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.8 of the OHS Standard	
6.0	Hazard Identification & Risk Management					
6.1	Contractor Hazard Assessment Processes <i>*Job Safety Analysis (JSA), LMRA, Project Hazard Assessment (PHA), task analyses, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.2 of the OHS Standard	
6.2	Work Permits/General Work Permit Processes – Life Saving Rule #4 <i>*Prime Contractor process(s) specific for project SOW (e.g., hot work, energy isolation, etc.)</i> <i>*Links to TCE's Process, if applicable</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.2 of the OHS Standard	
7.0	Operational Controls					
7.1	Job Attire & Personal Protective Equipment (PPE) – Life Saving Rule #2 <i>*List required and task specific clothing and PPE requirements</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1 of the OHS Standard	
7.1.1	Head Protection <i>*Side Impact Hardhats</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.3 of the OHS Standard	
7.1.2	Hearing Protection <i>*Meets TCE Expectations; >85dB single hearing protection; 105dB double hearing protection</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.2 of the OHS Standard	
7.1.3	Eye Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.1 of the OHS Standard	

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7.1.4	General Work Gear / Clothing <i>*Hoodies allowed? If so, appropriate measures in place to ensure hazards are not present while wearing hood.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.5 of the OHS Standard	
7.1.5	FRC's <i>*FR Outerwear meeting NFPA 2112 Standard</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.8 of the OHS Standard	
7.1.6	Safety Visibility Vest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.10 of the OHS Standard	
7.1.7	Hand Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.9 of the OHS Standard	
7.1.8	Footwear <i>*Safety footwear min 6" tall as measured from top of sole.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.4 of the OHS Standard	
7.1.9	Respiratory Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.7 of the OHS Standard	
7.1.10	Fall Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.6 of the OHS Standard	
7.2	Excavation / Ground Disturbance Procedure – Life Saving Rule #9 <i>*Reference to TCE Excavation Specification TES-CT-EXC-GLE</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.3 of the OHS Standard	
7.2.1	TCE's Online Training Completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.6 of the OHS Standard	
7.2.2	Identify Competent Person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.2.3	One-Call	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.2.4	Stake Out Report / Ground Disturbance Approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.2.5	Line Locating, Marking, and Staking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.2.6	Excavation Checklist (Planning) and Excavation Inspection form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.3	Atmospheric/Portable Gas Detection <i>*What equipment will be utilized, calibrated, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.24 of the OHS Standard	
7.4	Crane/Rigging/Hoisting/Lifting <i>*Critical Lift Definition & Procedure, Critical lift plans, Rigging/Hoisting/Lifting Safe Practices</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections 4.7 & 5.15 of the OHS Standard	
7.5	Hydrogen Sulfide (H2S) Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Sect.	SSSP Key Requirements	Requirement Fulfilled			Reference(s)	TCE / Contractor Comments
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7.6	Hazardous Materials <i>*What specific chemicals will be part of project SOW</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.24 of the OHS Standard	
7.6.1	Product Chemical Approval and Handling Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections 5.24 and 5.26 of the OHS Standard	
7.6.2	SDS Management (Right to Know), HazCom / WHMIS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.7	Lock Out/Tag Out (LOTO) Procedures – Life Saving Rule #6 <i>*What specific equipment will require LOTO</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections 4.7 & 5.8 of the OHS Standard	
7.7.1	Prime Contractor process, Links to TCE's Process (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7.8	Confined Space Procedures – Life Saving Rule #5 <i>*Rescue Team/Plan</i> <i>*Identification of space: Non-permit/Permit required</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections 4.7 & 5.9 of the OHS Standard	
7.9	Working at Heights/Fall Protection – Life Saving Rule #7 <i>*Rescue Plan</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.6 of the OHS Standard	
7.10	Work Platforms / Scaffolds <i>*Identify Competent Person, Type of platform to be utilized</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.16 of the OHS Standard	
7.11	Hand / Power Tools <i>*Care & Management Plan</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.4 of the OHS Standard	
7.12	Jobsite Illumination <i>*Will additional lighting be needed</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.13	Radiography	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.10 of the OHS Standard	
7.14	Machine Guarding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.15	Electrical Work Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.16	Overhead Power Line Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.17	Steep Slope Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.18	Manual Material Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.19	Heat and/or Cold Stress Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20	Heavy Equipment Interface <i>*List equipment specific for project SOW</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections 5.11 & 5.12 of the OHS Standard	

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Sect.	SSSP Key Requirements	Requirement Fulfilled			Reference(s)	TCE / Contractor Comments
		Yes	No	N/A		
7.20.1	Roll Over Protection System <i>*All equipment including pipe layers, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.2	Spill Kits / Fire extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.3	Danger/Safety Zone <i>*Safe work plan around heavy equipment – zones/cones</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.4	Spotters / Swamper / Signalman Requirements, and Signals (start/stop) / Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.5	Daily/Pre-use inspection <i>*Documented</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.6	Documented Operator competency/validation process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.7	Safe Transportation <i>*Securement / permits / planning</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.8	Safety Latch Requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.20.9	Non-Use / Prohibit use of Rope Grabs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.21	Powered Industrial Truck / Forklifts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.22	Welding / Cutting / Grinding <i>*Hot Work Permit, Eye/Face Protection (Prohibit Pancake Style Welding Hoods), Grinder Handles/Guards</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 5.1.11 of the OHS Standard	
7.23	Fire and Safety Equipment Inspections <i>*Fire Extinguishers</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.12 of the OHS Standard	
7.24	Compressed Gas Cylinders <i>*Handling and Storage</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appendix D of the OHS Standard	
7.25	Temporary Bridge Construction <i>*Material selection, Installation, Inspection and Maintenance</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If applicable, plans for air bridge and pipeline crossing must be submitted for review.
7.26	Mats <i>*Material selection, installation, inspection, and maintenance</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.27	Pipe Support (cribbing) <i>*Material Selection Installation and Maintenance, Placement of materials, Distance between stacks / configuration, Reference construction specifications</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.28	Towing / Winching / Vehicle Recovery <i>*Procedures / Plans</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appendix D of the OHS Standard	

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7.29	UTV <i>*Policy (use, transport, training, inspection, PPE, etc. ATV use is prohibited)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.30	Wildlife Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.31	Working on Ice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.32	Blood-borne Pathogens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.33	Camps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.34	Ergonomics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.35	Explosives and Blasting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.36	Hazardous Materials Exposure (Asbestos, Pb, Hg, PCB)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.37	Naturally Occurring Radioactive Materials (NORMS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.38	Sanitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.39	Working Near or Above Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.40	ROW Clearing; Tree Felling, Brush Cutting, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
8.0	Safety Training and Orientation Requirements					
8.1	Training Matrix or List <i>*Details mandatory and optional Prime/General Contractor's safety training for specific personnel/roles</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.6 of the OHS Standard	
8.2	Identification of "Trained" Personnel <i>*e.g., hard hat stickers, Green Hands, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.6 of the OHS Standard	
8.3	Training Records Management <i>*Include retention</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.6 of the OHS Standard	
8.4	Operator Qualification Process <i>*OQ covered Task List (Veriforce), criteria for documentation, tracking, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.6 of the OHS Standard	

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8.5	Site-Specific Orientation <i>*Site-Specific Orientation details that include, but are not limited to: (Contractor employees, Subcontractors, inspection staff/third party representatives, owner representatives, visitors, etc.)</i> Known/potential hazards Appropriate precautionary control measures for such hazards Highlights/links to Prime/General Contractor P/SSSP Mandatory Personal Protection Equipment (PPE) Site-specific safety requirements Emergency/Injury Response Site Security and Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.6 of the OHS Standard	
9.0 Safety Inspections and Audits						
9.1	Define Safety Governance and monitoring program / activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 3 of the OHS Standard	
9.2	Outline Safety Inspection Frequencies and Processes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.10 of the OHS Standard	
10.0 Safety Communication and Consultation						
10.1	On-site Kick-Off / Pre-Job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.9 of the OHS Standard	
10.2	Tailgate Meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.9 of the OHS Standard	
10.3	Daily JSA / Hazard Assessment Meetings – Life Saving Rule #3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
10.4	Planned Safety Meetings <i>*Defined schedule (examples: Safety Committee; All Hands meeting)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.9 of the OHS Standard	
11.0 Incident Management and Investigation						
11.1	Prime Contractor's Incident reporting protocol <i>*Definition of incidents, Link to TC Energy Incident Management Program (IMP), Forms, timelines, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.11 & Appendix E of the OHS Standard	

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11.2	Prime Contractor's Incident Notification Protocol <i>*Internal Reporting Procedures, Project Reporting Notification / Escalation Process, Regulatory Notification / Records, Forms, timelines, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
11.3	Incident Investigation Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
11.4	Corrective Action / Action Item Tracking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.0	Motor Vehicle Operation & Traffic Management Plan					
12.1	Prime Contractor Motor vehicle program shall align with TC Energy's Motor Vehicle Operation Standard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.13 of the OHS Standard	
12.2	Project Mandatory Driving Rules – Life Saving Rule #1 <i>*Seatbelt, Cruise Control, Communication Device / Cell Phone, Railway Crossings</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.1	Parking Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.2	Spotter requirements and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.3	Managing Oversize Loads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.4	Site Access <i>*Busy roads, poor visibility, signage, controlling mud and debris, Pickup trucks, delivery trucks, heavy haul trailers, etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.5	Vehicle / Wildlife Incident Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.6	Circle Check <i>*360 Driver Situational Awareness Program</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.2.7	Vehicle checks, inspection, and maintenance program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13.0	Emergency Response Plan					
13.1	Project Emergency notification / reporting process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.12 of the OHS Standard	
13.2	List of Potential Emergencies <i>*Procedures to deal with those situations (For example: Viruses, Severe Weather, Blockade, Serious Injury, etc.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13.3	Emergency Evacuation process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

USGP Site-Specific Safety Plan (SSSP) Cross Reference Checklist



Project Name: XXXXX	Prime/General Contractor: XXXXX
Project Manager: XXXXXX	Project No.: X.XXXXXX
Reviewer Name: XXXXX	Reviewed on: XXXXX
TCE Accepted: Yes <input type="checkbox"/> No <input type="checkbox"/>	Cost Code: Network – XXXXXXXX Activity – 00XX
	SSSP Revision Number: XX

Contractor shall develop a SSSP that includes the sections listed below. The SSSP must be reviewed and accepted by Company prior to mobilization.

Sect.	SSSP Key Requirements	Requirement Fulfilled			Reference(s)	TCE / Contractor Comments
		Yes	No	N/A		
13.4	Medical Emergency Plan <i>*First Aid Trained Personnel & Equipment (On-Site First Aid Supplies/Equipment)</i> <i>*Local Hospital Location(s) & Information (Includes map, phone numbers, driving directions, etc.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13.5	Fire Response Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13.6	Confined Space Rescue Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13.7	Site Evacuation Plan <i>*Muster Point, Alarms, Mock drills (Designed to check effectiveness of ERP), etc.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14.0	Site Security Plan					
14.1	Work Site Signage <i>*Prime Contractor must place sign at entrance / prominent location to work site which includes: Contractor Name, Contact name, and Contact Phone number</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section 4.13 of the OHS Standard	Please ensure signage is posted
14.2	Roles and Responsibilities <i>*Define who is accountable for communication procedures, security reporting, records management, training etc.;</i> <i>*Who identifies and implements security management during the different phases of construction; and</i> <i>*Who assesses and reviews the adequacy and effectiveness of construction security and the security plan.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14.3	Security Resources <i>*Identify security resources: Corporate, Project Designate (site representative), Security Contractor (On-site watchperson/Third Party Contractor, etc.), and other</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

USGP Site-Specific Safety Plan (SSSP) Cross Reference Checklist



Project Name: XXXXX	Prime/General Contractor: XXXXX
Project Manager: XXXXXX	Project No.: X.XXXXXX
Reviewer Name: XXXXX	Reviewed on: XXXXX
TCE Accepted: Yes <input type="checkbox"/> No <input type="checkbox"/>	Cost Code: Network – XXXXXXXX Activity – 00XX
	SSSP Revision Number: XX

Contractor shall develop a SSSP that includes the sections listed below. The SSSP must be reviewed and accepted by Company prior to mobilization.

Sect.	SSSP Key Requirements	Requirement Fulfilled			Reference(s)	TCE / Contractor Comments
		Yes	No	N/A		
14.4	Security Assessment Process *Need to include asset characterization, vulnerability, threat and risk assessment; *Inventory of security risk equipment, material, buildings, etc.; and *Identify project locations/situations that can pose a safety threat to the public or environment, (e.g. deep excavations, hydrostatic tests, high traffic/public areas, etc.) and develop and implement mitigative control measures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14.5	Physical Security Measures *Access Control (e.g. sign-in, stickers, card key), Barriers, Fence, Gates, Lighting, Lock and Keys, Vehicles/Heavy Equipment, Photographic restrictions, Alarms, Tool/Equipment management, Restricted area signage, Explosives Management, and Firearms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14.6	Security Response Plans *Unusual activity at/near the construction site, Unknown site workers/Trespassing, Evacuation, Theft/Vandalism, Work Stoppages/Disruptions (Strikes, protests, Workplace Violence/ Harassment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14.7	Security Communication Requirements *Equipment, Communication protocol – who/when individuals are contacted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15.0	Key Safety Performance Indicators (KPIs) & Safety Reporting					
15.1	Lagging Indicators *Total Recordable Case Rate (TRCR), Away from Work Case Rate (AWCR), Vehicle Incident Frequency (VIF), and High Potential (HIPO).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15.2	Leading Safety Indicators *Other safety reports (including weekly incident statistics), analyses, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15.3	Leading/Lagging Targets *Targets Documented (= or < than)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

USGP Site-Specific Safety Plan (SSSP) Cross Reference Checklist



Project Name: XXXXX	Prime/General Contractor: XXXXX
Project Manager: XXXXXX	Project No.: X.XXXXXX
Reviewer Name: XXXXX	Reviewed on: XXXXX
TCE Accepted: Yes <input type="checkbox"/> No <input type="checkbox"/>	Cost Code: Network – XXXXXXXX Activity – 00XX
	SSSP Revision Number: XX

Contractor shall develop a SSSP that includes the sections listed below. The SSSP must be reviewed and accepted by Company prior to mobilization.

Sect.	SSSP Key Requirements	Requirement Fulfilled			Reference(s)	TCE / Contractor Comments
		Yes	No	N/A		
15.4	Monthly Safety Performance Report <i>*Prime Contractor requirement to submit report by 5th day of month.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15.5	SHARE Cards <i>*Or Similar reporting program</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
16.0	Safety Documents and Record Management					
16.1	Documentation/Files Process/List	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
16.2	Outline filing structure and retention requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		