

Excavation Safety Checklist

 Date: _____ Time: _____ AM / PM Location: _____ GPS Coord: _____

Work Description: _____ Depth of Excavation: _____

- The top section of this document must be completed before digging.
- The entire checklist must be completed for all excavations 4 or more feet deep that personnel will enter.
- Attach checklist to the applicable permit/job safety analysis and maintain on file in accordance with records retention.

BEFORE EXCAVATING: Contact State One Call – 1 (800) _____ - _____ [811 Info Page]		YES	NO	N/A
1.	Was the state One Call notified and were utility companies or owners contacted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Were precautions taken to avoid equipment contact with overhead electrical lines?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are all underground/surface utility installations/hydrocarbon lines identified, marked, protected, supported, or removed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Are all energy sources properly isolated and locked and tagged out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	If exposure to public vehicular traffic is likely, are personnel wearing warning vests?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are warning systems (hand signals, barricades, stop logs) implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Will the excavation be back-filled as soon as work is completed? If no, will the excavation be barricaded?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8.	Are gas pipeline pressures reduced to 50 PSIG or less?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Are liquid hydrocarbon lines reduced to no more than 25 PSIG above the vapor pressure of the product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BEFORE PERSONNEL ENTRY		YES	NO
If any shaded area is checked a confined space entry permit must be completed.		YES	NO
10.	Does the excavation contain, or have potential to contain a hazardous atmosphere, or any other serious safety hazards?	<input type="checkbox"/>	<input type="checkbox"/>
11.	Is the excavation five feet or deeper with a slope steeper than 1ft vertical:1.5ft horizontal, or does the competent person require non-entry rescue provisions? If no, proceed to next question. <ul style="list-style-type: none"> • If yes, will each entrant wear a full body harness with a properly attached/attended lifeline, and is the excavation configured such that personnel can be safely retrieved without entry of rescue personnel? 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
12.	Is the spoil pile at least two feet from the edge of the excavation?	<input type="checkbox"/>	<input type="checkbox"/>
13.	For excavations four feet or more deep, is a ladder or other safe means of egress (sloped ramp) provided?	<input type="checkbox"/>	<input type="checkbox"/>
14.	If ladders are used, do they extend at least three feet above the surface and are they secured? N/A (ladders not used)	<input type="checkbox"/>	<input type="checkbox"/>
15.	Are exits located so as not to require more than 25 feet of lateral travel by personnel?	<input type="checkbox"/>	<input type="checkbox"/>
16.	If water removal equipment is used, is it monitored by a competent person?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
17.	Is the excavation inspected daily and after every rainstorm or other hazard-increasing occurrence?	<input type="checkbox"/>	<input type="checkbox"/>
18.	If the excavation is five feet or more deep, is it properly sloped, shored, or is a trench box used?	<input type="checkbox"/>	<input type="checkbox"/>
19.	If the excavation has potential to cave in (regardless of depth), is it properly sloped, shored, or is a trench box used?	<input type="checkbox"/>	<input type="checkbox"/>

SOIL CLASSIFICATION
Minimum if manual test and one visual test required for soil classification. Manual test may be omitted if soil is type C.

20.	Manual Test: <input type="checkbox"/> Plasticity <input type="checkbox"/> Dry Strength <input type="checkbox"/> Thumb Penetration <input type="checkbox"/> Instrument Test <input type="checkbox"/> Drying Test	
21.	Visual Test:	
	<input type="checkbox"/> Soil During Excavation	<input type="checkbox"/> Samples of excavated soil and soil in the sides of the excavation.
	<input type="checkbox"/> Side of opened excavation and surface area adjacent to excavation	<input type="checkbox"/> Adjacent area / excavation for evidence of surface water, locate water table
	<input type="checkbox"/> Opened side of excavation to identify layered systems.	<input type="checkbox"/> Adjacent area / excavation for evidence of utility, previously disturbed soil.
Adjacent area/excavation for sources of vibration that may affect the stability of the excavation face.		
22.	Check for indications of: <input type="checkbox"/> Layered systems <input type="checkbox"/> Vibrations <input type="checkbox"/> Water <input type="checkbox"/> Slopes <input type="checkbox"/> Fissures	
23.	Potential for cave-in? <input type="checkbox"/> Yes <input type="checkbox"/> No	
24.	Soil Type: <input type="checkbox"/> Stable Rock <input type="checkbox"/> Type A <input type="checkbox"/> Type B <input type="checkbox"/> Type C	

SLOPING AND BENCHING OR TRENCH BOX
Required for any excavation that has potential to cave-in and all excavations five feet or deeper.

25.	<input type="checkbox"/> Soil type A: ¾ horizontal to 1 vertical	Comments:
	<input type="checkbox"/> Soil type B: 1 horizontal to 1 vertical	
	<input type="checkbox"/> Soil type C: 1 ½ horizontal to 1 vertical	
	<input type="checkbox"/> Trench Box (Approved for service, unaltered)	

COMPETENT PERSON

Must be trained as a competent person as defined by the excavation standard.

Print Name:		Date / Time:	___ / ___ / ___ __:__ <input type="checkbox"/> AM <input type="checkbox"/> PM
Signature:		Mobile #:	



Form number:
ACI-001-EXC-01

Revision date:
March 1, 2023

COMMENTS / DRAW EXCAVATION:

A large, empty rectangular box with a black border, intended for providing comments or drawing an excavation plan.

