## DDW FIELD SAFETY REPORT

This Field Safety Report serves as a tool to document your hazard assessment and communication plan to address the review of required information that was beyond DDW’s ability to inspect individually. This form details the plan and measures taken by staff the PWS to mitigate those hazards but still complete a review of the system’s facility. Use this form to warn other staff of unsafe workplace conditions or site conditions found while conducting a field inspection. Completed forms should be saved in the respective water systems Site Visits folder in edocs.

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| **Site Information** | | |
| **Public Water System (PWS) Facility ID (Matching SDWIS ID) if applicable** | *Detail the SDWIS Facility ID associated with any No Go Scenario experience during the review of a system.* | |
| **DDW Inspection Staff:** | *Names of DDW completing inspection* | |
| **District Engineer and/or County Health Department** | *List contact information of District Engineer and County Health Department whenever applicable.* | |
| **Date(s) of Travel:** | *Start date, duration, expected return to DDW* | |
| **Purpose of Inspection:** | *Type, length, and purpose of activity (e.g. Sanitary Survey, Construction Inspection, etc.)* | |
| **Adverse Site Conditions Encountered**  **(See Safety Hazards page 12-35 of Field Safety manual)** | *e.g. extensive hiking, steep terrain, difficult access, or any potential hazard*  *Make special note if isolated or remote.* | |
| **No Go Scenario**  **(See page 9 Field Safety manual)** | *Confined Space* |  |
| *Unsafe Weather/Road Conditions* |  |
| *Any situation where DDW staff does not feel safe or is unable to proceed* |  |
| Provide details of the specific No Go Scenario encountered or reasoning behind  DDW No Go Scenario being satisfied. | |
| **Resolution** | *Provide details of the resolution and/or instructions given to the PWS to complete the review of the No Go Scenario* | |