Trench Excavation Work Plan

This form was developed to assist the employer in complying with Trench Excavation Work Plan requirements under WAC 296-155-655(14) within Chapter 296-155 WAC Construction Work, Part N – Excavation, Trenching, and Shoring.

	ch excavations where a protective system is required. is needed, additional forms can be used)	
1	2.	
3	4.	
5	6.	
7	8.	
2. Identify the o	ssification of soil and rock deposits: Type B Type C	
3. Identify unde	ground installations: Water Sewer Gas Co	ommunication
Remo	nethod of protection underground installations when the trench excavation Support	is open:
Remo	nethod of protection from surface encumbrances: Support None lescribe):	
Suppo	nethod of stabilizing adjacent structures: Brace Underpinning lescribe):	None
Suppo	ial hazardous atmospheres: Gas Landfills Hazardous Substance Storage lescribe):	e 🗌 None

8.	8. Describe the type of protective system to be provided:									
		Slope		Bench			Shoring			Shield
		Other (describe):								
		ribe the procedure cave-ins, structural								
10		cribe the method of ected by shields:	f protection	for employ	ees from (cave-	ins when er	ntering or e	exitir	ng the areas
11	evid	will employees be ence of a situation em, hazardous atm	that could r	esult in a p	ossible ca	ve-in	, indications			
12	start	ection of trench exc of work, as neede urrence.								

13. Describe the method of protecti that could pose a hazard by falli			oil, rock or equipment
14. Describe the method of protection	on from hazards associated	l with water accumu	lation:
15. Describe the safe means of egra	ess from trench excavations	3:	
☐ Stairway	Ladder		amp
Other (describe):	_		•
16. Describe the actions to be taker Of a cave-in. The description me a. Contacting rescue and en b. Removing or rescuing wo c. Providing necessary eme d. Preventing unauthorized	ust include procedures for: nergency services. rkers from excavations. rgency services to rescued	workers.	orkers in the event
Additional pages may be attached a	as needed.		

Excavation Emergency Rescue Plan

Date:	Location/GPS Coordinates:		No. of onsite workers:		
Type of Emergency:					
Individuals Designated a	s Emergency Plan facilitators:				
1.		2.			
3.		4.			
5.		6.			
Emergency Equipmen					
Type:	t, quantity, locations and perso	on(s) responsible for use	Quantity		
		[
Location:		Location:			
Location:		Location:			
Location:		Location:			
Person(s) trained in use:					
1.		2			
3.		4.			
Туре:			Quantity		
Location:		Location:			
Location:		Location:			
Location:		Location:			
Person(s) trained in use:					
1.		2			
3.		4.			
Type:			Quantity		
Location:		Location:	<u> </u>		
Location:		Location:			
Location:		Location:			

Person(s) trained in use:	
1.	2
3.	4.
First Aid	
List type(s) of First Aid kits, quantity, locations and per-	son(s) responsible for use.
Type:	Quantity
Location:	Location:
Person(s) trained in use:	
1.	2
3.	4.
Type:	Quantity
Location:	Location:
Person(s) trained in use:	
1.	2
3.	4.
Means of Transport:	
means of Transport.	
Procedures for Rescue and Evacuation:	
Designated Rescue Personnel:	
1.	2
3.	4.
5	6
	-
Printed Name	Signature Date