



EXCAVATION and TRENCHING CHECKLIST

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Effective Date: 08/01/25
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Instructions: All trenches and excavations designed for personnel entry which are four (4) feet in depth or greater require the completion of this checklist by a Competent Person at the location.

Date:	Start Time: <input type="checkbox"/> AM <input type="checkbox"/> PM	Expiration Time: <input type="checkbox"/> AM <input type="checkbox"/> PM
WORK DETAILS		
Office/Area/BU:	Location:	
Description of Work:		
Name of Competent Person:	Phone Number:	
REQUIREMENTS		
Answer all questions by checking the appropriate box. IF "NO", CONDITION MUST BE CORRECTED BEFORE WORK MAY BEGIN		
Have the locations of underground utilities or other installations been identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are all personnel involved equipped with proper PPE?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Have all required permits been obtained? (Hot Work, Municipality)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Has adequate water control/drainage been provided to prevent surface water from entering the excavation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If four (4) feet in depth or greater, has a protective system (shoring, sloping, benching, shielding) been provided?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If traffic hazards are present, are appropriate safety measures in place? (high visibility vests, barricades)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Have materials that could pose a hazard been located at least two (2) feet from the edge of the excavation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
For trenches four (4) feet or deeper, has a means of egress (exit) such as ladders, stairs, or ramps been provided such that lateral travel distance for workers needing to exit the trench does not exceed 25 feet?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the support or shield system used to protect vertical sided lower portions extend at least 18 inches above the top of the vertical side?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If greater than 20 feet deep, has the protective system been designed by a Registered Professional Engineer and is the design information on site?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Has the potential hazardous atmosphere been monitored? (Document air monitoring below.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
SOIL TYPE		
Stable Rock _____	Type A _____	Type B _____
SLOPE RATIO		
1/2:1 _____	3/4:1 _____	1:1 _____
1 1/2:1 _____	Other _____	



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AIR MONITORING					
Initials	Time	Oxygen (19.5-23.5%)	% LEL (<10%)	H2S (<10ppm)	CO (<35ppm)
ACCEPTABLE ATMOSPHERIC CONDITIONS MUST BE PRESENT AND MAINTAINED TO ALLOW ENTRY INTO TRENCHES AND EXCAVATIONS. IF THE ATMOSPHERE BECOMES HAZARDOUS, ALL PERSONNEL MUST EVACUATE THE TRENCH OR EXCAVATION. PRIOR TO RE-ENTRY, ATMOSPHERIC CONDITIONS MUST BE RENDERED SAFE					
APPROVAL AND SIGNATURE					
Competent Person: (Print name) _____ (signature) _____				Date: _____	

Copy to be filed and retained for one (1) year.