

American Scaffolding, Inc.

SWING STAGE RESCUE PLANNING AND JOB HAZARD CHECKLIST FOR SUSPENDED SCAFFOLD

1. Preplanning

Project Name: _____

Project Location: _____

24 Hour Emergency Number: _____

2. Assign Designated Competent Person

Name: _____

Number: _____

3. Power Lines

Utility Company: _____

Name: _____

Phone: _____

Obstructions Identified:

- Explosive Gases
- Confined Space
- Wind Speeds Exceeding 25MPH
- Communication method established
- Onsite rescue equipment (tripod, ropes, rescue winch)
- Plan for quick roof access (door access, keys, elevator, stairs)
- Locate fastest and safest emergency entrance and exit