

## EXCAVATION PERMIT

INITIAL SWP No. \_\_\_\_\_

TO BE COMPLETED IN INK

<b>SECTION A - DESCRIPTION</b>	MPC Service Group Supervisor
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Unit: _____	Job location: _____
Methods of Excavation: <input type="checkbox"/> Hand Tools <input type="checkbox"/> Hydro <input type="checkbox"/> Mechanical	

<b>Confirmed Excavation Competent Persons (ECP) For This Excavation</b>	MPC Service Group Supervisor
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Total number of confirmed ECP's for this job: \_\_\_\_\_

NAME	COMPANY
_____	_____
_____	_____
_____	_____
_____	_____

MPC Service Group Supervisor: \_\_\_\_\_

Name	Signature	Date
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<b>SECTION B - PRE-EXCAVATION CHECKLIST</b>	Excavation Competent Person
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	Y	N	PRECAUTIONS/RESTRICTIONS
1. Has Texas One-Call system (811) been notified at least 48hr prior to digging? a. Date & Time of One-Call Notification: _____ b. One-Call ticket number: _____	<input type="checkbox"/>	<input type="checkbox"/>	Note: Notification is required prior to digging in a third-party underground facility easement or right-of-way or when digging outside the facility fence line. If in doubt, call 811
2. Has the railroad company been notified for excavation within 10 ft of the edge of a railroad track?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Is or will the excavation remain less than 20 feet deep?	<input type="checkbox"/>	<input type="checkbox"/>	If No, a registered professional engineer must approve excavation.
4. Will the material be excavated below the level of the base or footing of any foundation or retaining wall?	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, a registered professional engineer must approve excavation.
5. Have overhead electric lines, wooden electrical poles, buried electric lines, process lines, firewater lines, and sewer lines been identified and protected?	<input type="checkbox"/>	<input type="checkbox"/>	For excavation work with-in 20' of wooden electrical poles, MPC OSUE shall approve and sign the Excavation permit prior to excavation activity.
6. Have A-4045-12-1, 5050, 5010, 5001, 5002 drawings, clamp list of the area and other applicable data been reviewed? <span style="color: yellow;">See Attachment C for links to drawings, ePlot and eSearch.</span>	<input type="checkbox"/>	<input type="checkbox"/>	
7. For vertical shaft drilling, has probing of the area been conducted and identified hazards have been recorded in the Probe Card (Attachment D)?	<input type="checkbox"/>	<input type="checkbox"/>	
8. Have any pipe supports and/or cable tray/conduit supports directly anchored to pavement within 5ft of area to be excavated been identified? Attach the sketch of adjacent equipment to this permit.	<input type="checkbox"/>	<input type="checkbox"/>	If yes, MPC Civil Structural Engineer must be contacted regarding temporary support requirement (if any)
9. Has Environmental Department been contacted per ENV-29 Soil Excavation policy?	<input type="checkbox"/>	<input type="checkbox"/>	
10. Is plastic sheeting or roll-off boxes for excavated materials in place?	<input type="checkbox"/>	<input type="checkbox"/>	
11. Has surface water been diverted or controlled?	<input type="checkbox"/>	<input type="checkbox"/>	
12. Has area monitoring for exposure to chemicals been conducted during probing?	<input type="checkbox"/>	<input type="checkbox"/>	
13. For excavation other than underground leak repair, has worker protection plan to protect worker from chemical hazards been submitted to the Industrial Hygiene Dept.? Note: For underground leak repair, see PR-4.	<input type="checkbox"/>	<input type="checkbox"/>	
14. Have Fire Dept, OMCC and security been notified in advance of any road closures required for excavation activity?	<input type="checkbox"/>	<input type="checkbox"/>	

Excavation Competent Person: \_\_\_\_\_

Name	Signature	Date
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Registered PE signed (if applicable): \_\_\_\_\_

Name	Signature	Date
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MPC electrical supervisor signed (if applicable): \_\_\_\_\_

Name	Signature	Date
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SECTION C – EXCAVATION CHECKLIST		Excavation Competent Person		
		Y	N	PRECAUTIONS/RESTRICTIONS
15.	For probing that will be performed in conjunction with excavation, have the following requirements been reviewed by Performing Authority? (Probe Card is required for all probing activity)	<input type="checkbox"/>	<input type="checkbox"/>	
a.	Scrape no more than 12 inches of surface prior to probing, using a backhoe with a straight blade. Scraping depth for asphalt or stabilized surfaces may be greater than 12 inches, but no more than 24 inches, provided material is removed with multiple passes and is addressed in the SWP and JSA.			
b.	Scraping and probing shall continue in multiple passes. Scraping shall stop within 12 inches of buried process piping. From that point, other means, such as hydro-excavating or hand digging, shall be used to uncover process piping.			
16.	Are excavation cave-in protection systems in place (e.g. sloping, shoring, trench boxes)? Attach tabulated data or PE approved design to this permit.	<input type="checkbox"/>	<input type="checkbox"/>	
17.	Are shielding boxes and shoring panels backfilled?	<input type="checkbox"/>	<input type="checkbox"/>	
18.	Are excavated materials and equipment located at least two feet from the edge of the excavation?	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Has surge charge (soil + equipment weight) been considered?	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Is 2 ft distance sufficient for surge charge load?	<input type="checkbox"/>	<input type="checkbox"/>	
e.	If not, specify distance: _____ ft.			
19.	Are barricades or guardrail systems in place to prevent vehicles or personnel from falling into the excavation?	<input type="checkbox"/>	<input type="checkbox"/>	
20.	Will the excavation be 4 ft or greater? If yes, personnel within 6 ft of edge must wear fall protection or be protected by guardrail system	<input type="checkbox"/>	<input type="checkbox"/>	
21.	Has surface water been diverted or controlled?	<input type="checkbox"/>	<input type="checkbox"/>	
22.	Have access and egress ramps, ladders, and cross-overs been provided and free of slipping & tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>	
23.	Is plastic sheeting or roll-off boxes for excavated materials in place?	<input type="checkbox"/>	<input type="checkbox"/>	
24.	Has area monitoring for exposure to chemicals been conducted?	<input type="checkbox"/>	<input type="checkbox"/>	
25.	Is there potential for asbestos materials to be exposed during excavation activity?	<input type="checkbox"/>	<input type="checkbox"/>	When potential asbestos material is identified, before performing work that may disturb potential asbestos containing materials (e.g. insulation, pipe coatings, etc.), pause work activity and contact your MPC maintenance supervisor, or MPC construction coordinator. Where questions arise, the MPC maintenance supervisor, or construction coordinator will contact the MPC Site Asbestos coordinator to assist in that determination. Reference the GBR SM-3 policy for additional guidance for working around asbestos materials.

The Excavation Permit shall be submitted to the MPC construction coordinator, or MPC maintenance supervisor once the excavation work is complete.

SECTION D - EXCAVATION COMPETENT PERSON INSPECTION				Excavation Competent Person		
<b>NOTE:</b> Completed excavation checklist AND inspection of the excavation is required to validate the permit. Updated each shift worked						
Excavation Approved Y N	Section C Still Valid? Y N	Reviewed Date/Time	Expires Date/Time	SWP No.	Name of Excavation Competent Person (Print)	ECP Initials
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	/	/			
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	/	/			
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	/	/			
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<input type="checkbox"/>	<input type="checkbox"/>	/	/						
<input type="checkbox"/>	<input type="checkbox"/>	/	/						
<input type="checkbox"/>	<input type="checkbox"/>	/	/						

SECTION E – EXCAVATION ENTRY CHECKLIST		Excavation Competent Person	
Lockbox No (if applicable): _____	Y	N	PRECAUTIONS/RESTRICTIONS
26. Are excavation cave-in protection systems in place (e.g. sloping, shoring, trench boxes)?	<input type="checkbox"/>	<input type="checkbox"/>	
27. Are excavated materials and equipment located at least two feet from the edge of the excavation?	<input type="checkbox"/>	<input type="checkbox"/>	
a. Has surge charge (soil + equipment weight) been considered?	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is 2 ft distance sufficient for surge charge load?	<input type="checkbox"/>	<input type="checkbox"/>	
c. If not, specify distance: _____ ft.			
28. Are barricades or guardrail systems with signs in place to prevent vehicles or personnel from falling into the excavation?	<input type="checkbox"/>	<input type="checkbox"/>	
29. Has surface water been diverted or controlled?	<input type="checkbox"/>	<input type="checkbox"/>	
30. Have access and egress ramps, ladders, and cross-overs been provided and free of slipping & tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>	
31. Is excavation greater than 4 ft?	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, CSE must be addressed on Safe Work Permit.
32. Has area monitoring for exposure to chemicals been conducted?	<input type="checkbox"/>	<input type="checkbox"/>	
33. Is there adequate ventilation for the job?	<input type="checkbox"/>	<input type="checkbox"/>	
34. If pipe dope and/or wrap will be disturbed or removed, has a Potential Asbestos Containing Material (ACM) Removal Permit (SM-3A) been completed?	<input type="checkbox"/>	<input type="checkbox"/>	Note: Completion of SM-3A Form is required prior to disturbing/removal of piping dope or wrap.

SECTION F – EXCAVATION ENTRY COMPETENT PERSON INSPECTION						Excavation Competent Person
<b>NOTE:</b> Completion of the excavation entry checklist AND inspection of the excavation is required to validate the permit.						
Excavation Approved Y N	Section E Still Valid? Y N	Reviewed Date/Time	Expires Date/Time	SWP No.	Name of Excavation Competent Person (Print)	ECP Initials
<input type="checkbox"/>	<input type="checkbox"/>	/	/			
<input type="checkbox"/>	<input type="checkbox"/>	/	/			
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