

North Carolina Department of Transportation
Transportation Mobility and Safety Division

Safety Orientation Checklist – Greenfield Facility

June 13, 2016

Purpose: To familiarize personnel assigned to the Greenfield facility with safety and security protocols specific to the facility.

Target Individuals: This form shall be completed for new employees, associates, interns, on-site contractors, and any other personnel that are assigned to the Greenfield facility for more than five (5) consecutive business days.

Responsible Individuals: This form shall be completed by supervisors for all new employees and interns, by the Staff Engineer for all individuals on the associate program, or by contract managers for all on-site contractors.

Record: This form shall be filed in the individual's personnel file.

Name of target individual: _____

Name of responsible individual: _____

1. Introduce individual to security staff and location of security desk
2. Inform individual to contact security staff for badge needs, security issues, etc.
3. Activate badge for access to the Greenfield facility (use badge access form)
4. Review use of badge (visible, worn from waist up, no tailgating, etc.)
5. Review use of state vehicles (notebooks, keys, credit cards, 24/7 badges, etc.)
6. Introduce individual to the Division Safety Coordinator
7. Introduce individual to Unit Safety Coordinator (for whatever Unit they are assigned to)
8. Review evacuation zones (colors), evacuation procedures, and meeting places (primary, secondary, etc.)
9. Review severe weather plan and meeting places (primary, secondary, etc.)
10. Review the use of radios, whistles, and air horns
11. Discuss the requirement to attend quarterly safety meetings
12. Discuss the use of safety vests when in the field
13. Discuss ergonomic issues and proper chair and work station configuration and adjustments
14. Identify the closest fire extinguisher, first aid kit, and AED (and eyewash station and lead residue container, if in TEC)

We attest that the above items have been covered and reviewed:

Target individual signature: _____ Date: _____

Responsible individual signature: _____ Date: _____