How to get a Raise

- No one in any position is ever considered "above" any task. Everyone is expected to help with any/all duties.
- You do not get rewarded (raises, promotions and "atta boys") for simply meeting expectations. You get rewarded for exceeding expectations.
- You do not get paid for your time or your effort. You get paid for what you produce. If you wish to get a raise, find a way get more done.
- An employee of a private for profit business (the majority of society) has two jobs, no matter what industry you are in.
  - 0 1 make your employer as much money as possible
  - 0 2- make your supervisor look good

You will be a better employee and move further in the company if you focus on these two things. If you focus on yourself, how much money you make, or making yourself look good, you will do things differently than if you focus on your employer/supervisor. You will be a better employee, impress your employer, get more raises, promotions and make more money if you do these two things.

The trick to making sure you are taken care of by your employer is becoming the best employee you can. This way, even if you have a poor employer that refuses to take care of you, you can leverage your skills and quality work ethic to obtain a job with a better employer who cares about and takes care of you. If your employer is someone who does not recognize your value and does not take care of you, simply do you're your best until you find a new job. Trying to "milk it out of them" will only cause tension in the relationship, make them treat you worse, build bad habits and make it harder to get your next job.

- Employers are concerned with production. Produce more!
  - The first step to producing more is to work harder so you can get more done. This has limits, you can only do so much.
  - O Be efficient, examine the task, and examine the process to find a way to get your work done faster. Always be working on the system / process to improve efficiency.
  - Find ways to reduce. I.e. time or materials. Do this both in your personal work as well as in the company as a whole
  - O Be a leader encourage others to step up. If you do 20% more work, you are worth 20% more. If you inspire and encourage 5 people to work 20% harder, you are worth 100% more.
  - O Have a positive attitude
  - Be company minded IE make decisions based on the good of the company, not by what you feel like.
- In order to get promoted, you must learn the job of your superior and train someone to replace you. You cannot move up until you do these two things.
- Take responsibility for your actions and learn from your mistakes. You will not be punished for making a mistake. It will be expected that you recognize/identify a mistake and do not repeat it.
- Turn your Brain on and Pay attention to:
  - O The task at hand
  - O The system as a whole
  - o The job on hand
  - O The environment you are working in

### Mission Statement -

DLC takes PRIDE in SAFELY maximizing both VALUE for the customer and PROFITABILITY for the company by providing the highest QUALITY of roofs through SUPERIOR WORKMANSHIP and EXCEPTIONAL SERVICE in the most EFFICIENT means possible.

\*"Equal Share" of work load is the amount that each member of the crew would perform if everyone performed an equal amount. Ie on a crew of 5 people, each person would perform 20% of the work.

### Laborer – General labor tasks

Approximate pay scale (\*not absolute, exceptions made either direction based on specific performance) - \$15-18/hr

# Roofer –

Approximate pay scale (\*not absolute, exceptions made either direction based on specific performance) - \$16-20/hr

Has served 160 hours as Laborer with DLC Inc. **AND/OR equivalent experience as determined by management**, AND: meets the following duties, responsibilities and expectations.

Duties	Is Responsible For:	Expectations
<ul> <li>Duties</li> <li>Tear-off old roofs</li> <li>Install new roofing systems : insulation, membrane, skirts and details</li> <li>Complete basic details</li> <li>Maintain a clean and organized job site</li> <li>Manage materials in an orderly and efficient manner</li> </ul>	Is Responsible For: • Maintaining quality of work completed by individual • Gaining knowledge in doing details • Using safety systems to maintain personal safety • Secure tools and materials from damage, wind, and theft	<ul> <li>Can weld proficiently</li> <li>Is familiar with completing details</li> <li>Familiar with DLC metal shop and warehouse</li> <li>Can operate most equipment (telehandler, dump truck/trailer)</li> <li>Has a basic understanding of common roofing systems</li> <li>Performs an "equal share" of work load</li> <li>On time and prepared for work every day</li> <li>Identifies, prioritizes and takes on tasks without being directed</li> <li>Knows company mission statement and understands quality control expectations</li> </ul>
		<ul> <li>takes on tasks without</li> <li>being directed</li> <li>Knows company mission</li> <li>statement and</li> <li>understands quality</li> </ul>
		Contractors, Customers, and others

Task Forman – Utilizes a team of 1-3 people to perform any ordinary task without direct supervision or direction. Approximate pay scale (\*not absolute, exceptions made either direction based on specific performance) - \$18-20/hr

Has served minimum 320 hours with DLC Inc. **AND/OR equivalent experience as determined by management**, AND: meets the following duties, responsibilities and expectations.

Should be able to; Oversee the operations of a Task

Duties	Is Responsible For:	Expectations
<ul> <li>Duties</li> <li>Tear-off old roofs</li> <li>Install new roofing systems: insulation, membrane, skirts and details</li> <li>Regularly complete details of all kinds</li> <li>Motivate team members to work more effectively</li> <li>Utilize 1-2 helpers to complete any typical task without direct supervision</li> <li>Assist Forman in their duties</li> <li>Train and oversee roofers and laborers</li> <li>Identifies, prioritizes and assigns tasks to team members</li> <li>Fill out service and leak call forms</li> </ul>	<ul> <li>Is Responsible For:</li> <li>Maintaining quality of work completed by individual and team</li> <li>Maintain and implement safety systems for individual and team</li> <li>Organize 1-2 helpers to complete a task and keep them on task and productive</li> <li>Completing specific tasks without direction or supervision</li> <li>Fill out and email in service and leak call forms</li> </ul>	<ul> <li>Expectations</li> <li>Can weld proficiently</li> <li>Can perform complex details</li> <li>Have knowledge of practical and OSHA safety systems</li> <li>Is familiar with completing complex details</li> <li>Implements and contributes ideas and systems to increase efficiency</li> <li>Familiar with DLC metal shop and warehouse</li> <li>Can operate all DLC equipment</li> <li>Has in-depth understanding of most roofing systems</li> <li>Performs more than an "equal share" of work load</li> <li>Identifies, prioritizes and takes on new tasks without being directed</li> <li>Enforces quality control</li> <li>Maintain absolute professionalism when interacting with architects, General Contractors,</li> </ul>

#### Forman – Completely manages any single jobsite

Approximate pay scale (\*not absolute, exceptions made either direction based on specific performance) - \$18-22+/hr PLUS: access to, or assigned company vehicle, expense account, performance based bonus and other benefits

Qualifications; Has served minimum 1000 hours with DLC Inc. **AND/OR equivalent experience as determined by management**, AND: meets the following duties, responsibilities and expectations.

Duties	Is Responsible For:	Expectations
Duties•Tear-off old roofs•Install new roofing systems :insulation, membrane, skirtsand details•Formulate safe goals that willallow us to meet projectbudget and schedule•Regularly complete details ofall kinds•Motivate crew members towork more effectively•Maximize efficiency of thecrew•Assign tasks to crew membersthat will result in meetinggoals•Oversee Day to day fieldoperations of a jobsite•Decisions about weather•Minimize risk of: waterintrusion, wind damage,damage to customer or DLCproperty•Train and oversee Taskforeman, roofers, andlaborers•Identifies, prioritizes andassigns tasks to crewmembers•See a job through from startto finish•Fill out service and Leak callforms•Final inspection of jobsite•Final inspection of jobsite•Final inspection of jobsite•Final inspection of jobsite•Final inspection of jobsite•Fire employees when	Is Responsible For: Maintaining quality of work completed by individual and crew as a whole Maintain and implement safety systems for individual and crew Organizing crew to complete all tasks for the day and keep them on task and productive Ensuring that effective night seals are in place every day Securing all materials and tools on the jobsite Maintaining a watertight jobsite Mitigating risk Keeping every project on schedule and under budget Fill our service and Leak call forms Filling out daily foreman logs Efficiency of entire crew	<ul> <li>Expectations</li> <li>Can weld proficiently</li> <li>Can perform complex details</li> <li>Have knowledge of practical and OSHA safety systems</li> <li>Is familiar with completing complex details</li> <li>Implements and contributes ideas and systems to increase efficiency</li> <li>Familiar with DLC metal shop and warehouse</li> <li>Can operate all DLC equipment</li> <li>Has in-depth understanding of most roofing systems</li> <li>Performs an "equal share" of work load</li> <li>Has basic knowledge of management strategy of DLC and general business practices</li> <li>Enforces quality control</li> <li>Maintain absolute professionalism when interacting with architects, General Contractors, Customers, and others</li> </ul>

Superintendent – Manages multiple jobsites

Approximate pay scale (\*not absolute, exceptions made either direction based on specific performance) - \$20-25/hr PLUS: assigned company vehicle available for personal use, expense account, large performance based bonus

Ideal Organizational Chart





# **Dave Loden Construction**

# **Vested Benefits Schedule**

- 2 Months Eligible for Profit Sharing Plan
  - 1
- 3 Months Eligible to sign up for Aflac Supplemental Insurance at 50% discounted rate
- 1 Year Start Accruing Paid Time Off
- 1 Year Eligible for 401K RETIREMENT PLAN
- 3 years Paid Time Off Doubles



# **Dave Loden Construction INC**

# **Employee Handbook**

#### **TREATMENT OF CUSTOMERS:**

Owners, Owner's representatives, architects, occupants and etc. will be treated with the utmost courtesy and respect at all times.

#### **DISCRIMINATION:**

Dave Loden Construction does not and will not tolerate discrimination based on: age, sex, race, sexual orientation, political affiliation, or discrimination of any kind. Any discrimination against co-workers or subordinates will not be tolerated. Discrimination will result in appropriate disciplinary action up-to and possibly including termination as determined by management. Any discrimination should be reported in writing to DLC management. You can email: eloden@davelodenconst.com

#### SEXUAL HARASSMENT:

Dave Loden Construction has a zero tolerance sexual harassment policy. Any sexual harassment against co-workers, subordinates, customer, or the general public will not be tolerated. Sexual harassment will result in disciplinary action as determined by management up-to and possibly including termination. Any sexual harassment should be reported in writing to DLC management. You can email: eloden@davelodenconst.com

#### **COMMUNITY RELATION:**

It is expected that all employees represent the company within our community and in the job site community in a professional manner at all times regardless of whether on or off the job. This includes but is not limited to the content and context of your speech, your dress, and your conduct.

#### SMOKING:

-There will be no smoking inside any of the job site buildings unless it is designated as a smoking area by the owner.

-There will be no smoking over newly installed roofing materials or in the proximity of flammable chemicals.

-There will be no smoking in company vehicles or in the office.

-Employees will respect the smoking policy of any owner, building or establishment where they are performing work.

#### **PHYSICAL CONDITION:**

Employees are to report to work physically capable of doing their specific job to the best of their ability. (Unacceptable Examples: intoxicated - hangovers - excessive tiredness - etc.) Any employee that arrives to work unable to perform their job may be sent home without pay. Repeated offense is cause for termination.

#### PUNCTUALITY AND MISSED DAYS:

Tardiness and no shows are not acceptable and repeated offense is cause for termination. One minute late is still considered late. You are expected to be on the roof ready to start work at 6:00 or the start time set by your supervisor. If you must leave work or miss work for some reason it must be approved by your supervisor. Inform your supervisor of your situation as soon as possible to get approval. If you absence is approved, remind your supervisor 24 hours prior to leaving/missing work.

#### ALCOHOL:

There will be no consumption and/or storage of alcoholic beverage on the job site or company vehicles.

#### **ILLEGAL DRUGS:**

Any use of, or involvement with illegal drugs on or off the job will result in immediate termination.

#### **MOONLIGHTING:**

After hours work is allowed so long as your work at Dave Loden Construction, Inc. is in no way affected. After hours work must also be out of the realm of work performed by Dave Loden Construction, Inc. Furthermore, company tools, equipment or vehicles are not to be used without prior permission.

#### **RATE OF PAY:**

Employees will be paid overtime of 1.5 times the normal rate of pay for any time worked over 40 hours in a week.

Employee's hourly rate of pay will be continuously assessed and adjusted according to your attitude, production, quality of work, knowledge, reliability and longevity with the company. Employees wishing to move up in pay and responsibility should:

- Have a positive company minded attitude
- Have a positive effect on the attitudes and production of others
- Increase production through both hard work and time/labor saving ideas
- Maintain a top quality of work
- Take initiative to perform any and all tasks at hand in an efficient manner
- Show up reliably, and on time
- Display trustworthy character
- Gain knowledge and skills both with the various systems we install and the tools/vehicles we use

A \$0.50 per hour raise MAY be assessed for each of the following:

- Official Dave Loden Construction training on use of both our dump trailer and dump truck
- Obtaining a forklift operator certification
- Obtaining a Commercial Class A driver's license
- Recieving a certification card for and OSHA 10 hour Construction Safety class within the first 6 months

#### TRANSPORTATION:

Employees are responsible for their own transportation to and from the job site at their own expense. Employees are welcome to any space available in the company trucks to and from the job site, but are subject to any inconvenience that may arise.

#### **SCHEDULING & BREAKS:**

-A "regular work day" is defined as approximately 10 working hours starting at 6:00 a.m. and working until 5:00 p.m. with one unpaid hour for lunch. Lunch time is to be determined by the Forman/supervisor. Start and end times may be altered or adapted by the Forman/supervisor. Employees may take short (less than 5 minute) water breaks as needed throughout the day. If break- times become excessive in length or frequency, this will be addressed by the foreman/supervisor on site. Employees are not to leave the job site to purchase "break items," they are to be brought in the morning or from lunch. The supervisor can make an occasional exception to this rule if he/she feels the crew is well ahead of schedule and will easily meet the expected goal for the day.

-During peak season all employees will be scheduled for five regular work days per week. Each employees days off may differ. If one of your work days is missed for any reason (personal, weather, material delays, etc.) you must get permission to make up the day, it is not automatic.

-During off peak season the schedule will commonly be a 5 day Monday- Friday schedule. There will be frequent alterations of this schedule. If work is missed on a normal work day, and/or the project is behind schedule, the foreman/supervisor may decide to work Saturday and/or Sunday to make up for lost time.

#### TOOLS:

Employees are to provide the following basic hand tools:

- Tool belt
- Chalk line
- Scissors
- Tape measure
- Straight and Phillips screwdriver
- Razor knife
- Hammer
- Jab Saw (sheetrock saw)

All other tools, equipment and incidentals (blades, chalk, etc.) will be supplied.

#### **CHARGE ACCOUNTS:**

-All employees can charge job materials where ever the company has an account when authorized by their supervisor. You must sign the ticket and list the name of the job the purchase is for.

-When charging gas, please list which vehicle the gas was for.

#### PERSONAL VEHICLE USE:

If you are ever asked, and you agree (not mandatory) to use your personal vehicle for company use (not simply getting yourself to or from the work-site) you are entitled to charge an appropriate amount of gas to the company. Write on the ticket that the gas was for your vehicle and list the reason you were using your vehicle for company use. In addition to the gas you may document the distance traveled and be compensated at a rate of \$0.25/mile for the use of a personal vehicle. This does not include transportation to and from work (see Transportation above).

#### **TERMINATION:**

Dave Loden Construction, Inc. reserves the right to terminate any employee at any time with or without cause. Employment at Dave Loden Construction, Inc. is AT WILL as defined by Wyoming Statute.

#### TIME CARDS & PAYDAYS:

-DLC uses TSheets phone app to track time. Please ask your supervisor for an invitation to the app. It is the employee's responsibility to keep track of their own time on the app.

-You are required to check in and out every time you begin or leave work (including lunch hour). It is not acceptable to try to reconstruct your time cards every few days or at the end of the week. It simply is not accurate.

- You must clock in and out to the exact minute, do not round up or down, even to the nearest 5 minutes.

-If you are owed any out of pocket expenses, please make note of it on the appropriate receipt and turn it in to the office or your direct supervisor.

-The pay period is from 12:01 a.m. Monday to 11:59 p.m. Sunday.

-Payday is every Wednesday. Employees may pick checks up in Buffalo at the office (400 Hemlock).

- An employee may elect to have DLC Inc deposit your paycheck directly into any bank account held with a bank that operates a branch in Buffalo, WY. To do so, simply provide DLC with a deposit slip.

#### **COMPANY VEHICLE POLICY:**

-Seat belts will be used by all employees while in company vehicles as required by law.

-There will be no smoking in company vehicles.

-Company vehicles are not to be used for personal use without prior consent.

-If you use a company vehicle for any reason, you are responsible for removing any personal items and garbage after its use. Company trucks should be returned with clean and empty interiors. This includes dump trucks.

-Each employee is responsible for removing their personal belongings and any debris on a daily basis. Dave Loden Construction takes no responsibility for personal items left in company vehicles.

-Alcoholic beverages will not be consumed or stored in a company vehicle.

- If permission is given for you to use a company vehicle for personal use, you must provide DLC with an insurance certificate showing that you are covered by a personal auto policy or a named non-owner policy.

#### **BENEFIT SUBSISTENCE:**

Whenever we are working at a job site where it is not feasible to return home each evening, Dave Loden Construction will provide lodging for the night prior to each day you are scheduled to work.

#### **SAFETY COURSES:**

The tuition will be paid for any employee wishing to take a safety/first aid course. Other incentives may apply for extensive classes (BEC & EMT).

#### **Retirement:**

Each full-time employee is eligible to participate in our Safe Harbor 401K retirement plan after 1 year of service. This plan also includes a company match contribution. Please see the attached documentation for further information.

#### Insurance:

All employees are eligible, after 3 months of employment, to partake in the group discounted rate for Aflac supplemental insurance. The employee is responsible for all premiums. Premiums will be deducted from paychecks on a weekly basis and paid monthly. Upon termination, the employee is able to retain the insurance policy at the established group rate by simply taking responsibility for payment of the premiums. This insurance, procedure and policy is dictated by the insurance company and is subject to change at any time without the consent of employee or DLC Inc.

QSEHRA Health Insurance Reimbursement Program - After 3 month employment, employees are eligible (subject to plan requirements) to receive reimbursement for health insurance costs. Please see attached document for further information.

#### Paid Vacation:

Upon 1 full year continuous employment with Dave Loden Construction employees will start accruing paid vacation time at a rate of 0.02 hours paid vacation for each hour worked.

This rate will be increased to 0.04 upon 3 years continuous employment with Dave Loden Construction.

Vacation time must be used in increments of full days (8 hours). Vacation time will always be added on to the end of the hours worked for that pay period and paid vacation time will always be paid at regular time rate.

The use of paid vacation time must be approved in advance; it is not to be used when missing work without notice.

Paid vacation time will be re-set as of January 1 each year. Up to 40 hours paid vacation time may be carried over into the next year at employee's discretion. All other accumulated vacation pay will be paid out in the form of a bonus at the end of the year.



# **SAFETY & LOSS CONTROL POLICY**

#### **GENERAL:**

It is the policy of Dave Loden Construction, Inc. to provide a healthy and safe place of employment for all of our employees and for the public in all of this corporation's operations, and to abide by all safety regulations as they pertain to our industry. Safety shall take precedence over more expedient unsafe operations. Every attempt shall be made to provide equipment and create conditions that shall make for a safe work place. We shall provide safety education for our employees. Any employee who willfully disregards known safety practices as established could be subject to discipline and/or dismissal. Subcontractors shall be expected to abide by the provisions of this policy. All employees are expected to read and understand the Rules of Safety that apply to their trade and job site.

#### **RESPONSIBILITIES:**

A. Corporation: The Corporation recognizes the need for development of safe working practices for every job. It promotes the advancement of safety in all equipment, tools and a safe environment at all job site locations, as well as the warehouse, yard and office. The responsibility for the promotion and implementation of the Safety Program throughout all operations lies with Corporate Management. Specific responsibilities are shown on page 2.

B. Safety Committee: The Safety Committee, composed of Corporate Management, all Superintendents, and the Safety Officer is responsible for the development and implementation of the Safely Program. Specific responsibilities are shown on page 3.

C. Superintendents: All Superintendents shall consider it an essential part of their job to administer the Safety Program. In the absence of an appointed Safety Officer it will be the responsibility of the Superintendent to appoint or perform the Safety Officers duties. Specific responsibilities are shown on page 3.

D. Employee: All employees are required as a condition of employment to follow all established safety practices. Failure to comply shall be just cause for disciplinary action. Specific responsibilities are shown on page. All employees will thoroughly read the entire safety policy before starting work; they will also participate in all weekly safety meetings. Every single employee is responsible for contributing to a safe and healthful work environment.

E. Safety Officer: The safety officer is responsible for the implementation of the Safety and Loss Control policy. Specific responsibilities are shown on page 3.

#### **TRAINING:**

A continuous training program shall be a vital part of the Dave Loden Construction, Inc. Safety program. The objective of the training program is to insure that all employees recognize dangerous conditions and that hazards and exposure to illness or injury are eliminated insofar as possible. The training program shall include:

A. An initial indoctrination of each employee on the company Safety program and the specific safety rules applicable to his specific trade. This is to include a quiz on general safety practices covered in this document to ensure the employee read it thoroughly.

B. Weekly safety meetings will be held and will include training on hazard identification.

C. First aid training for selected employees.

D. Instruction on proper use of issued safety equipment.

E. Instruction on safe handling of hazardous materials.

F. The safety officer/Foreman will give a safety meeting specific to the job before commencing any work on the job. This will include training on the use of any Scaffolding, Ladders, Fall Protection, Power Tools, PPE or rigging that will be used for that job. This will include training on recognition and mitigation of hazards. Special hazards, such as electrical lines, roof openings, unsafe decking, radiation, flammable vapors, etc. shall be discussed with all crew members by the Superintendent prior to exposure to the hazards. These hazards will be identified and marked/protected during the job start-up safety training. If a special hazard is discovered, an appropriate certified person shall do an assessment prior to commencing work.

G. record of safety meeting will be kept in the safety binder for a period of no less than 3 years.

H. Record of employee's initial training will be kept in employee files for no less than 20 years.

I. Employees are highly encouraged to get their 10 hour OSHA Safety certification. If this is done within the first 6 months of employment, DLC Inc will reimburse the cost of the certification and give a \$0.50/hr raise. This is a requirement to be promoted to a Foreman or Task Foreman position.

J. Employees will be trained specifically on fall protection on or before their first day of work and annually after that date. Record of this training will be kept in the employee file.

#### **INSPECTIONS:**

A. The Safety Officer and Superintendents are charged with making frequent inspections of job sites and facilities to insure compliance with the Safety and Loss Control Policy. Violations shall be corrected promptly before work resumes. Serious violations or repeated violations shall be cause for disciplinary action against the responsible employee.

B. Safety Officers or Superintendents shall make regular inspections of company equipment to insure it is in safe operating condition. A report of the inspection shall be placed in the safety binder.

C. All job sites manned for more than two days shall have a job specific safety meeting at the start of the job and weekly thereafter.

#### **ACCIDENT REPORTING:**

A. All work related accidents or illness shall be reported immediately to the Corporate office. The office shall post the required information on OSHA Form 300. Serious accidents resulting in death or hospitalization shall be reported to the corporate office, Superintendents, and the President. All accident reports shall be reviewed by the Safety Committee at its regular meeting.

B. Any accident or near miss will be investigated by the safety committee to identify and eliminate the cause of the incident.

#### WORKERS COMPENSATION:

In order for an accident or illness to be covered by workers compensation, it must occur during the scope of employment. All pertinent details regarding the accident must be reported immediately to the corporate office. The company, at its discretion may use the Safety Officer, the insurance carrier and/or the company physician to investigate the eligibility of questionable claims and obtain additional medical opinions when necessary.

#### **ANNUAL REVIEW:**

An annual review of the company Safety program shall be conducted by the Safety Committee each year, a report shall be filed. All reported incidents and close calls and their following investigations will be presented. Any safety observation reports from the year will also be presented and reviewed. The committee will review any incidents or close calls and disseminate any lessons learned to all employees in the next weekly safety meeting.

#### DISCIPLINE:

Commission of unsafe acts or violations of the company Safety policy whether intentional or not, shall be just cause for disciplinary action. Steps in the disciplinary procedure are as follows:

A. First Offense = Verbal warning

B. Second Offense = Written warning

C. Third Offense = Suspension for 3 to 5 work days depending on the gravity of the offense. Notice to be in writing

D. Fourth Offense = Termination of employment. Notice to be in writing *SAMPLE*:

# SAFETY CITATION

DATE JOB VIOLATION DATE CORRECTED (INITIALS) SAFETY OFFICER FOREMAN ALL VIOLATIONS ARE TO BE CORRECTED IMMEDIATELY UNLESS OTHERWISE INSTRUCTED

#### SPECIFIC DUTIES

# **CORPORATE MANAGEMENT RESPONSIBILITIES:**

The prevention of accidents is one of the prime responsibilities of management. In general, the following list of activities makes it possible to discharge this responsibility effectively.

1. Establish, publish and carry out a stated company Safety and Loss Control policy

2. Provide an efficient safety organization having an effective accident prevention program

3. Administer the Safety and Loss Control program

4. Review accident reports to keep informed of the accident experience trend in operations in order to judge the effectiveness of the safety effort and to indicate when additional accident prevention measures are necessary

5. Attend Safety Committee meetings periodically to aid in the formulation of overall safety policy and give direction to the Safety and Loss Control program

6. Periodically review the work of the safety organization to see that it is functioning effectively

7. Periodically perform safety inspections

8. Work with the insurance carrier's loss prevention personnel in matters relating to safety and accidents

9. Maintain accident records, making necessary records available for the Safety Committee meetings. In addition, insure that records are properly maintained for OSHA and insurance carrier

10. Promote safety through the dissemination of safety bulletins and other safety promotions

11. Make unannounced job site inspections on a regular basis

12. Make necessary coordination with government and industry officials

13. Provide safety equipment during job site inspections and when requested by company personnel

14. Provide personal safety indoctrination training to all new personnel hired

15. At least once annually, management will perform a documented observation of the crew's activities and write a report outlining safety procedures followed, any discrepancies and potential hazards observed.

### SAFETY COMMITTEE RESPONSIBILITIES:

The Safety Committee shall be composed of Corporate Management, all Superintendents and the Safety Officer. The fullest measure of effective safety work in any operation can be accomplished only when the

Safety Committee cooperates wholeheartedly in the Safety program. The following is the list of Safety Committee obligations:

1. Familiarize themselves with the company Safety and Loss Control policy and their responsibilities in that connection

2. Assist in the development of departmental safety procedures, and assist the Safety officer in carrying out an effective Safety and Loss Control program

3. Review and discuss all accident reports having occurred since the last meeting. The committee should determine whether or not effective corrective action has been taken to prevent a reoccurrence

4. Make periodic inspections of the company facilities and make recommendations necessary to curb unsafe acts or unsafe conditions to the safety officer for implementation

5. Develop and implement an effective and continuous safety indoctrination and training program. Emphasis should be placed on those areas brought to light through the inspection program or prompted by OSHA rule changes

6. Make an annual review of the Safety program and file a report

7. Review annually the motor vehicle records for all approved drivers.

#### SUPERINTENDENTS RESPONSIBILITIES:

In order for the safety program to operate effectively all Superintendents shall be responsible for the following:

1. In the absence of an appointed Safety Officer it is the responsibility of the Superintendent to appoint the Safety Officers duties to the Field Supervisor or perform them himself.

2. Safety inspect all new job sites and periodically inspect ongoing jobs to determine safety policy compliance

3. Provide each job site with all necessary safety equipment

4. Be familiar with and follow the company Safety and Loss Control policy

5. Serve as a member of the Safety Committee

6. Report all accidents immediately to the Corporate Office including all pertinent details

7. Account for all employees who do not show up for work

8. Indoctrinate newly hired employees to the Safety and Loss Control policy

9. Take prompt corrective action whenever an unsafe condition arises. Warn crew members when unsafe work practices are performed

10. "Sell" safety to all crew members through tool box safety talks and personal example

11. Notify corporate office of all OSHA inspections immediately

12. Be familiar with and follow the practical guidelines to control water damage

13. Be aware of and follow the theft prevention policy

# SAFETY OFFICERS RESPONSIBILITIES:

In order for the safety program to be effective the safety officer will be responsible for the following:

1. Be sure the Superintendent has safety inspected all new job sites and has filled out the job specific safety meeting form

2. Be sure the Superintendent has provided each job site with all necessary safety equipment

3. Be familiar with and follow the company Safety and Loss Control policy

4. Serve as a member of the safety committee

5. Keep minutes of all items discussed at all of the safety meetings and file them in the safety policy book

6. Take prompt corrective action whenever an unsafe condition arises. Warn all crew members when unsafe work practices are performed

7. Be sure all new employees have had their indoctrination to the Safety and Loss Control policy

8. Replenish and replace first aid kits as proscribed in First Aid section

9. Receive minimum training of 10 hour OSHA safety course.

10. Visually check all fire extinguishers once every month and have them re-filled annually.

# **EMPLOYEE RESPONSIBILITIES:**

Good safety practice and accident prevention is the responsibility of every employee. Each employee is responsible for knowing and following the general provisions of the company Safety policy.

All employees shall abide by the following rules:

1. Report unsafe conditions to your Superintendent

2. Report ALL injuries IMMEDIATELY to your Superintendent and call the Corporate office

3. Wear hard hats when working below the roof line

4. Use eye and face protection where there is danger from flying objects or particles, such as when grinding, chipping, burning and welding, etc.

5. Dress properly: Wear appropriate work clothes, gloves and shoes or boots. Loose clothing and jewelry should not be worn

6. Never operate a machine unless all guards and safety devices are in place and in proper operating condition

7. Keep all tools in safe working condition. Never use defective tools or equipment. Report any defective tools or equipment to your Superintendent

8. Properly care for, and be responsible for all personal protection equipment

9. Keep out from under overhead loads

10. Do not operate machinery if you are not trained to do so

11. Do not leave material in aisles, walkways, stairways, roads, or other paths of travel

12. Practice good housekeeping at all times

13. Riding any moving equipment is prohibited except on seats provided

14. Place ladders on a substantial base. Do not use ladders with broken, split or missing rungs or rails. All ladders are to extend at least three feet above the landing platform and be securely fastened. Proper ladder placement is: one quarter total height equals base length

15. All flammable liquids must be stored in a safety container. Engines must be shut off when refueling

16. Smoking is prohibited anywhere near flammable liquids

17. Compressed gas cylinders (propane, oxygen, acetylene, etc.) must be secured in an upright position. When not in use, caps must be securely in place

18. When burning or welding is being done, a fire extinguisher must be close at hand at all times

19. The use or possession of, or being under the influence of alcohol or drugs while on the job is prohibited and subject to immediate dismissal

20. All safety rules must be obeyed

21. Comply at all times with all know federal, state and local safety laws, employer regulations and policies

22. Horseplay causes accidents and will not be tolerated

23. Wear seat belts at all times in company owned vehicles

Violations of any of these rules may be cause for immediate disciplinary action as described on page 2.

## SAFETY EQUIPMENT AVAILABLE:

The following safety equipment is available to all company personnel. Additional equipment shall be made available as the need arises.

1. SAFETY HARNESSES AND FALL ARREST SYSTEMS

2. RESPIRATORS

3. EYE GOGGLES

- 4. BACK BRACES
- 5. HARD HATS
- 6. SAFETY ROPES
- 7. EARPLUGS
- 8. PARAPET FENCE
- 9. SAFETY GATE FOR SHOOT
- 10. CONES
- 11. FIRST AID KITS
- 12. FIRE EXTINGUISHERS

#### **13. WARNING LINES**

### 14. RAPELLING GEAR OR POSITIONSING EQUIPMENT

# WAREHOUSE AND YARD SAFETY:

Liquid Propane Storage:

1. No smoking or open flames shall be permitted within 50 feet of the LP gas storage

2. An ABC rated fire extinguisher shall be available in the LP gas storage area at all times. Check the

extinguisher on a quarterly basis and initial the inspection tag

3. Filled LP gas cylinders shall be stored in an upright position and chained

4. Safety gates shall be open while anyone is inside the LP gas fence

5. All LP gas cylinders shall have a safety collar and be in sound condition

6. Defective LP gas cylinders shall not be filled and should be tagged for repair

#### **MAINTENANCE SHOP SAFETY:**

Power Operated Hand Tools

1. Electrical power operated tools shall either be of the approved double insulated type or grounded by use of a 3 wire plug

2. Pneumatic power tools shall be secured to the house by a positive means to prevent the tools from becoming accidentally disconnected. Safety clips or retainers shall be securely installed and maintained on pneumatic impact tools to prevent attachments from being accidentally expelled

3. Safety glasses shall be used during all chipping and grinding operations and when using compressed air for cleaning purposes

Batteries

1. Batteries shall be stored in a ventilated area to prevent explosions

2. Any acid spills in the shop area shall be flushed and neutralized

3. Charging:

A. Battery charging shall be done in a well-ventilated area

B. Battery fill caps shall be removed during charging

C. On sealed batteries, the charger shall be set on low charge. Charging shall continue until the charging

voltage drops below 14 volts and the amperage drops below 4 AMPS or until 30 minutes has elapsed

D. An emergency eye wash station shall be located and maintained in the vicinity of the battery charging area

#### Gasoline

1. No more than 10 gallons of gasoline shall be temporarily stored in the shop area and shall be stored in approved safety cans

2. Gasoline shall not be used as a cleaning solvent in the maintenance shop

3. No smoking shall be permitted during fueling operations and engines shall be shut down

Prior to dispatch to job sites, equipment shall be inspected to insure that it is in operational order and all required safety devices are in place and functional. Equipment that is inoperable or unsafe shall be red tagged to prevent dispatch to job sites.

When vehicle engines are running, the overhead shop doors shall remain open or the exhaust vented to the outside.

Kettles that are fired for cleaning shall net be left unattended. An ABC rated fire extinguisher shall be immediately available at the cleaning site. Employees engaged in kettle cleaning shall be suitably attired to include long sleeve shirt, work gloves and safety goggles.

#### **Tag-Outs**

If at any time any tool or piece of equipment is found to be unsafe it must be immediately "Tagged-Out" and removed from the active work area. This is to include:

- Missing, broken or defective safety equipment ie guard
- Cracked or exposed electrical cord
- Load supporting member that is bent, cracked, broken or otherwise damaged
- Frays or tears
- Any other damage that would negatively affect the safe use or operation

"tag-Out" will be defined as marking the item with red tape in a conspicuous manner and attaching a note regarding its reason for being "tagged-out." Any person may tag-out any piece of equipment at any time. No one is to remove the red tape unless they have personally talked to the person who tagged it out and have remedied all issues. A ladder, or fall protection device should not be tagged out, but simply destroyed or rendered unusable by cutting it in half.

#### Blood borne Pathogens-GENERAL POLICY:

- No person should ever clean up, or physically encounter blood or other bodily fluid without proper protective gloves.
- No person should administer First Aid care without proper protective gloves.
- DLC Inc recommends that all employees have an annual physical check-up including blood work to maintain good health and monitor possible blood borne diseases.
- All employees must inform the employer of any health conditions that could be spread to other employees including blood borne pathogens that could be transmitted through bodily fluids.
- In the event of blood or bodily fluid contamination of a jobsite, all work must cease in that area until it has been thoroughly cleaned with appropriate cleaners.
- A hepatitis B vaccine will be available to any employee who requests one at no cost to the employee.
- Lavatory facilities including hand washing/sanitizing station will be made available on every job site.
- A copy of the Safety and Loss control policy including the Blood Bourne Pathogens Exposure Plan will be store in the safety binder on the jobsite and will be available to all employees at any time.
- If you are exposed to blood or other bodily fluids, wash the area immediately and then have a blood test performed by a medical professional. This test will be provided at no cost to the employee.
- Any record of vaccine, exposure, or other medical record will be kept in the employee file for 30 years after end of employment.
- Safety goggles are available in the job box and rubber gloves will be available to all employees in the first aid kits store in all company vehicles and job boxes. All other appropriate PPE will be available on site. If it is not, it will be provided immediately on request.

#### **VEHICLE SAFETY-GENERAL POLICY:**

The following specific rules apply to the operation of all company vehicles owned or leased.

- 1. All drivers shall follow the rules established by the state in which they are operating
- 2. All employees shall drive in a courteous manner and employ defensive driving techniques
- 3. Posted speed limits shall be followed. In the yard and at construction sites speed shall be limited to 10 mph 4. Vehicles shall not be operated while under the influence of alcohol or drugs. Violation will be just cause for dismissal

5. In the event of an accident involving bodily injury or property damage the driver shall:

- A. Stop immediately
- B. Take all necessary precautions to prevent further accidents at the scene
- C. Render reasonable assistance to injured persons

D. Provide on demand your name and address, the name and address of the company, the vehicle tag number and if requested exhibit your license

E. As soon as possible report all details of the accident to the corporate office

F. If involved in an accident with an unattended vehicle and the owner cannot be located, the operator

shall leave in or on the vehicle his name and address and the name and address of the company G. Obtain names and addresses of any witnesses

6. Towed loads shall be attached to the vehicle using an approved hitch. In addition, two safety chains or cables shall be attached between the vehicle and towed load. Trailers must have operating lights, brake lights, turn signals and when necessary, brakes

7. All cargo carried in open truck beds shall be secured to prevent shifting or falling from the vehicle. Any material or equipment whose centerline falls above the side boards or tailgate of the vehicle shall be secured by use of tie downs

A. On long hauls the driver shall inspect the load after the first 25 miles to insure the load is still properly secured

B. LP gas cylinders shall be secured in the vehicle in an upright position

8. Trucks with a restricted view to the rear shall be equipped with a backup alarm or the vehicle operator shall use an observer to indicate when it is safe to back up

9. All vehicles shall be inspected daily for oil level and tire pressure and wear. All vehicles shall be inspected weekly for: oil level, tire pressure and wear, brakes, all lights and turn signals, steering mechanism, cleanliness of bed and cab. All serious problems shall be reported immediately to the maintenance department

10. All employees driving company owned or leased vehicles shall wear the safety belts provided in their vehicle at all times

11. All operators shall inspect their crane at the start of each day to insure proper operating condition

#### VEHICLE SAFETY-FORKLIFT AND FRONT END LOADER:

1. The forklifts, front end loaders and all similar rental equipment are to be operated only by company approved and trained personnel

Forklift and front end loader vehicles on job sites are not to have the keys left in them unattended
 Wear safety belt at all times especially during loading and unloading from trailers and when lifting heavy loads

4. Exceeding the operating limitations may cause damage to the vehicle and/or cause it to overturn resulting in serious injury or death

5. Except for the operator, no one else is allowed on the vehicle when it is in motion

6. Avoid lifting in the vicinity of electrical power lines. When this is impractical, use extreme caution and an observer is necessary

7. Always keep lifted loads clear of overhead obstructions

8. Loads shall not be lifted on un-level or shifting surfaces

9. Avoid high speed operation especially in vehicles which steer with the rear wheels

10. The operator shall use an observer whenever his vision is obstructed from the loads being lifted

11. All forklift and front end loader vehicles are to be inspected daily to insure proper operating condition

# **RIGGING SAFETY-GENERAL POLICY:**

- All rigging (chains, straps, platforms and hoist material) must be thoroughly inspected before each use and after any snag or hang-up during use.
- If damaged, rigging material should be immediate rendered incapable of use by cutting them in half and disposing of them.
- Riggins hold never be used to lift a load greater than its printed rated capacity.
- Rigging should be stored in a designate location either on-site or in the shop. It should not be left in a place where it can be trod upon or otherwise damaged.
- Rigging must not be used for anything other than its intended purpose.
- All loads must have a tag line attached and attended while suspended
- Only hooks with an automatically engaging latch may be used in rigging.
- No person should ever walk under a suspended load, nor should any load ever be hoisted over a place where people are located. All people must be evacuated from underneath the suspended loads path of travel before beginning lift.
- The loads path of travel must be marked off to keep people out during entire lift operation.

#### **RECORDS AND COMMUNICATION – GENERAL POLICY:**

- Safety records, medical history, and training records will be maintained and kept in the employee file for no less than 30 years.
- An employee may request and be granted access or copies of their personal records at any time.
- Any employee may request and will be granted a copy of the current OSHA 300 form or any previous OSHA 300a form from the past 3 years.
- OSHA 300a form from the previous year shall be conspicuously posted in the shop

### **HAZARDOUS MATERIALS - GENERAL POLICY:**

It is the policy of Dave Loden Construction, Inc. to train its employees in the safe and proper handling of all hazardous materials. This training shall be accomplished by initial indoctrination training for all new employees and annual recurrence training for all current employees. This training shall include: an inventory of all hazardous materials used, the physical and health hazards associated with these materials, the availability and use of protective equipment, the required labeling of hazardous materials and content and availability of material safety data sheets.

1. Hazardous Material Inventory, Physical and Health Hazards and Personal Protection Equipment

A. There are many materials used in roofing operations that can be hazardous to your health if used improperly. These hazards can be physical hazards such as fire, reactivity or explosion and health hazards meaning potential damage to your body

B. Flammables and Solvents - Solvents such as xylene, mineral spirits, methyl ethyl ketone. Fuels such as gasoline and diesel and the adhesives, primers, cleaners and caulks used in single ply roofing are flammable with a flashpoint of less than 100F: Physical hazards are fire and explosion. These materials shall be stored and transported in an approved safety can or if the material is very thick and hard to pour it may be kept in its original container provided that it is properly labeled. No smoking or open flames shall be allowed in the vicinity of flammable materials. Breathing the fumes of these materials can cause nausea, headaches, dizziness, weakness and in extreme cases unconsciousness, brain damage, lung and other forms of cancer and death. Work up wind and in well-ventilated area whenever possible. Wear a vapor type respirator in poorly ventilated areas or whenever vapors are noticeably present. Skin or eye contact can cause irritation, redness, inflammation and increased sensitivity. Skin surfaces should be washed with soap and water and eyes should be flushed with water or eye solution for 15 minutes. Call for medical help if necessary. Wash contaminated clothing before reuse. Wear safety glasses, rubber gloves and long sleeve shirt when handling these materials. Swallowing these materials can cause nausea, vomiting and death. Do not induce vomiting. Keep person calm, warm and lying down. Call for medical help immediately.

C. Corrosives - Strong alkali or acid base cleaners are used to clean masonry and other surfaces. Avoid all personal contact with these materials. Wear safety goggles, appropriate rubber clothing, gloves and boots to cover all exposed areas. Skin or eye contact can cause irritation and severe burns. Skin surfaces should be washed with soap and water and eyes should be flushed with water for 15 minutes. Call for medical help if necessary. Wash all contaminated clothing before reuse. Breathing the fumes of these materials can cause irritation and inflammation. Work upwind and in a well-ventilated area whenever possible. Wear a vapor type respirator in poorly ventilated areas or whenever vapors are noticeably present. Swallowing these materials can cause irritation and severe burns. Drink large amounts of water. Do not induce vomiting. Keep person calm, warm and lying down. Call for medical help immediately. Physical hazards are reactivity with some organic materials, oxidizers, metals and other acids and alkalis. Consult the specific material safety data sheet for more information.

# Hazardous material Communications-GENERAL POLICY

- SDS for all hazardous material used will be kept both on site in the safety binder and in the office. A copy of SDS sheets will be provided for any employee or customer who requests one.
- On sites with multiple employers or multiple trades, SDS sheets will be provided to the principle or prime contractor to be distributed to all other companies.
- The superintendent must keep written record of all hazardous materials on any particular site and be prepared to provide this to customers or management upon request.

- All hazardous materials must be stored in containers retaining the hazardous material markings and warning. No label or warning should be removed from any container containing hazardous material.
- Any container used to transport or administer chemicals must also have appropriate warning and marking labels.
- Any hazardous chemical waste must be stored in an appropriately labeled sealed container and properly disposed of at an approved facility. Burning, throwing away, pouring out or any other method of disposal is specifically prohibited.

# JOB SITE SAFETY-GENERAL POLICY:

1. Each job site is to be inspected weekly by the Superintendent. An inspection report shall be filed in the job file

2. Special hazards, such as electrical lines, roof openings, unsafe decking, radiation, flammable vapors, etc. shall be discussed with all crew members by the Superintendent prior to exposure to the hazards. These hazards will be identified and marked/protected during the job start-up safety training.

3. All field personnel shall wear personal protective equipment when necessary such as long sleeve shirts, gloves, safety glasses, ear plugs, etc.

4. All mechanical equipment shall be inspected daily by the Superintendent to insure that it is in proper working order and that all required safety devices are in place and working. Inoperable or unsafe equipment shall be removed from the job site as soon as practical and turned in for repair 5. An ABC rated fire extinguisher shall be readily available for each operation using hot bitumens, open flames, mechanical equipment, power tools or flammable liquids

6. All personnel working below the roof line shall wear a hard hat

7. All personnel shall leave the roof when electrical storms or high winds are present, except for emergency repairs 8. An adequately stocked first aid kit shall be kept on the roof whenever two or more persons are on a job site for two or more days. Refills are available from the corporate office

9. All flammable liquids shall be stored in an approved safety can

10. All job sites lasting two or more days shall have the emergency telephone numbers posted in a prominent location

11. Unusual job conditions that could endanger the life of any employee or bystander or cause property damage shall be reported to the Safety Officer immediately. Specific safety orders covering the unusual condition shall be written and provided to the crew

12. Heavy objects of approximately 100 pounds and over shall be lifted by more than one person. Lift heavy objects by keeping your back erect and lifting with your legs

13. A safety citation shall be issued to the job site Superintendent if the Safety Officer finds any safety violations during his inspection. All violations shall be corrected immediately unless otherwise instructed

14. Sanitary drinking water shall be available on all job sites at all times

15. Rope used to support personnel or as a lifeline shall be synthetic such as nylon, Dacron or polypropylene and of 5000LBS rating or greater.

16. All operators of spray equipment shall warn building owners and other of the possibility of over spray. They shall be aware of wind speed and direction before starting to spray. Spray operations shall not be done during moderate or high winds

17. No employee is ever allowed to perform any task or operate any tool or equipment that they have not specifically been trained on. If you need to do something you have not been trained on, immediately inform your supervisor to receive training or have someone who has been trained do the task.

18. No material, tool, or other object shall ever be place on top of a parapet wall or within 2' of an open edge.

#### **JOB SITE SAFETY- FIRE PREVENTION:**

1. An ABC rated fire extinguisher shall be readily available for each:

- A. Open flame torching operation
- B. Kettle in operation
- C. Job site using mechanical equipment, power tools, flammable liquids or hot bitumens

2. All flammable liquids shall be stored in approved safety cans. Hard to pour liquids may be stored in their original containers provided that they are properly labeled

3. All flammable materials and containers shall be stored in a manner to prevent fire and/or explosion

4. Engines shall be shut down before refueling. Spilled fuel shall be cleaned up prior to restarting

5. Specific fire prevention policies regarding torch applied systems, kettles, mechanical equipment. LP gas, and hazardous materials can be found in their safety section

6. No smoking or open flames shall be allowed in the vicinity of flammable materials

7. All fire extinguishers should be checked on the first work day of each month and must be re-certified/filled on the first work day of the year.

# **JOB SITE SAFETY - FIRE EXTINGUISHER USE:**

1. Pull out discharge pin to arm fire extinguisher

2. Stand back the recommended number of feet, approximately 3-6 feet depending on the size and type of the extinguisher

3. Discharge extinguisher in a slow sweeping motion at the base of the fire until extinguished

4. Maintain fire watch for minimum of one hour to insure that the fire is out

5. All fire extinguishers are to be replaced or recharged before resuming operation

### JOB SITE SAFETY - LP GAS CYLINDER SAFETY:

1. Specific LP gas cylinders policies regarding torch applied systems, kettles and the LP gas yard facility can be found in their safety sections

2. Cylinders shall be stored and transported firmly secured in an upright position with the valve closed and a safety collar in place around the valve

3. Cylinders shall not be dropped or allowed to strike each other

4. Cylinders shall be moved while secured to a hand truck or rolled on the bottom edge. They shall not be laid down and rolled or dragged

5. All cylinders, hoses, burners and regulators shall be inspected daily prior to use for proper functioning

6. No smoking or open flames shall be permitted within ten feet of any cylinder

7. Cylinders shall not be hoisted to the roof by the safety collar unless it is welded to the bottle. Cylinders with screw on type collars shall be hoisted by means of a two position choker while upright or in an approved container 8. Cylinders shall not be defrosted by application of heat in any way

#### **JOB SITE SAFETY - FALL PROTECTION:**

- A fall protection system is to be used any time any person is working on a surface that has an unprotected edge that is at a height at or greater than 6 feet. This fall protection system must meet all criteria for OSHA 29 CFR subpart M.
- Every employee will complete a fall protection training certification on or before their first day of work and annually after that date. A copy of the fall protection training is attached at the end of this document.
- Fall protection systems will be assessed and designed on a site to site basis by the superintendent and the safety officer but, shall generally consist of the following:

1. Low Slope Roofs (Over 6 feet high)

A. During the performance of roofing operations on low slope roofs greater than 50 feet in width, with a parapet of less than 42", a warning line system, railing system, personal fall arrest systems, or combination of the three will be used.

- A warning line shall be erected and maintained. The warning line .system shall be erected on all sides of the work area not less than six feet from the roof edge. When mechanical equipment is being used the warning line shall be a minimum of ten feet from the edge on the sides perpendicular to the direction of travel of the mechanical equipment
- The railing system shall have a top rail height of at least 42" +-3" above the work surface and will have intermediate rails spaced no more than 19" apart.
- Personal fall arrest systems shall consist of an anchor capable of supporting 5000LBS, Life-line, rope grab, shock absorbing lanyard and full body harness.

B. On roofs less than 50 feet in width, a safety monitoring system can be used instead of a warning line. One member of the crew, who is in a position to observe, shall be designated to warn other crew members when they are in danger of falling

C. Mechanical equipment shall not be operated or stored within six feet of the roof edge

D. Materials shall not be stored within six feet of the roof edge

E. Hoisting areas and bitumen pipe outlet areas shall be guarded by four feet of guardrail on each side F. All roof openings shall be guarded by a standard railing or a cover that is secured against accidental displacement and capable of supporting a minimum of 200 pounds

G. All unsafe decking shall be guarded by a standard railing or covered in such a way as to make the appropriate human, material and equipment travel safe

2. High Slope Roofs (Over 6 feet high)

A. Personnel working on high slope roofs shall be protected by:

1. A safety harness, lanyard and lifeline secured to an anchorage or structural member capable of supporting a dead load of 5400 pounds. Lifelines and lanyards shall be minimum of 3/4 inch synthetic rope and secured in a manner that prevents a fall of more than six feet from the roof edge or:

2. A standard railing along all open sides of work area or:

3. A scaffold or work platform that conforms to the standards described under scaffold safety 4. A parapet wall no less than 42 inches high

B. All roof openings shall have a cover that is secured against accidental displacement and is capable of supporting a minimum of 200 pounds

C. All unsafe decking shall be covered in such a way as to make the appropriate human and material travel safe

D. Mechanical equipment shall not be used on high slope roofs

\*In the event someone should fall and be caught by a fall arrest harness system, every effort must be made to evacuate them as soon as possible.

- Emergency services should be notified immediately and informed that the situation is very time sensitive.
- If an individual who is certified in high angle rescue is present they should immediately begin rescue procedures such as their training instructed.
- No one who has not been trained and certified in high angle rescue should ever attempt to rescue someone hanging from a harness.

#### **DEFINITIONS:**

1. Low slope roof: A roof with a slope of less than 3 inches in 12 inches

2. High slope roof: A roof with a slope 3 inches in 12 inches or greater

3. Warning lines: Rope, wire or chain, flagged with visible material every six feet and supported by

stanchions in such a manner that the low point is approximately three feet above the roof surface

4. Open side roof: Any roof edge where there is no parapet three feet or more in height

5. Mechanical equipment: All motor and human propelled wheelbarrows and mop carts

6. Standard railing: A railing capable of supporting a load of 200 pounds and consisting of a top rail, and intermediate rail and toe board. The top rail shall be 42 inches high and the toe board shall have a height of 4 inches

# **JOB SITE SAFETY - ELECTRICAL PROTECTION:**

1. All 110 volt electrical power used during company operations, including portable generators, shall have a functioning ground fault circuit interrupter in use to prevent electrocution. This unit shall be placed at the source of the electrical power

2. All ground fault circuit interceptors shall be checked daily with the integral test switch to insure proper functioning. Return faulty units to the shop for repair

3. All extension cords used during company operations shall be a minimum of 12 gauge and have three operating prongs at the outlet

4. All electric hand tools shall have three operating prongs at the plug outlet unless specifically marked as being double insulated

5. All electric hand tools and extension cords shall be inspected daily before use to determine that the cords are in good shape and that all three prongs are in place and operating. Return faulty equipment to the shop for repair6. All guidelines including safe working distance from powerlines included in the attached electrical safety pamphlet must be adhered to.

#### JOB SITE SAFETY - TEAR OFF SAFETY:

1. A tear off chute shall be used whenever the distance to be dropped is greater than 20 feet

2. Whenever tear off is being dropped without a chute, that landing area shall be roped off

3. Clean-up of the landing area will only be permitted when dropping of tear off debris is stopped

4. All exposed decking shall be inspected by the foreman to determine its ability to withstand roofing traffic.

Unsafe decking will be covered or protected in such a way as to safely allow for necessary roofing traffic

5. Safety glasses or goggles shall be worn by all members of the crew during tear off operations

6. Crew members exposed to pitch, dust or fumes are encouraged to cover as much exposed flesh as possible

7. Dust masks shall be worn by all crew members exposed to dusty conditions

#### **JOB SITE SAFETY - LADDER SAFETY:**

1. All ladders used by company personnel shall:

- A. Be placed on a firm base 1/4 of the building height away from the building
- B. Have safety feet at the base to prevent slippage
- C. Be firmly secured to the edge to prevent sliding
- D. Extend a minimum of three feet above the roof edge
- E. be rated class 3 or have a weight rating of no less than 300lbs.
- F. Meet all OSHA requirements for weight rating and rung spacing.

2. All ladders shall be inspected daily for loose or broken rungs, split side rails, etc. Faulty ladders shall be returned to the yard for repair or destroyed

3. Avoid using aluminum ladders in the vicinity of electrical power lines. When this is impractical, use with extreme caution

4. Wooden ladders shall be coated with linseed oil when new and periodically when dried out

5. Ladders shall be taken down at the end of the day to prevent access to the roof

6. All ladders must only be used for their intended use. I.E. Never use a step ladder for access, only as a work platform.

#### JOB SITE SAFETY - CONVEYOR AND HOIST SAFETY:

1. All hoists shall be counter balanced with a mechanically attached metal pan and iron or concrete weights only. The amount of counter balance shall be no less than one half the amount being hoisted

2. The weight hoisted by a motorized or hand hoist shall not exceed the manufacturer's recommended limit

3. Hoist support frames shall be placed on plywood or planking to spread the load and prevent damage to the roof

4. All hoists and conveyors shall be inspected daily before use for frayed cables, broken welds, bent struts, etc.

Faulty hoists or conveyors shall be removed from service immediately

5. Hoists shall be positioned so that loads are lifted straight up and not pulled at an angle

6. Ground personnel involved in hoisting and conveying operations shall wear hard hats and remain clear of suspended loads. Use a tag line when necessary to control hoisted loads

7. Engine fuel level shall be checked frequently on motorized hoists and conveyors to prevent engine stoppage during lifting operations

8. Loads shall not be lifted unless roof personnel are positioned to receive them

9. Hoist lines shall be secured at the end of the day

- 10. Hoist and conveyor operators shall be completely familiar with proper operation before operating
- 11. Hoisting or conveying or personnel is forbidden

12. Ground areas around hoists and conveyors shall be roped off to keep out pedestrians

#### JOB SITE SAFETY - SCAFFOLD SAFETY:

In addition to those procedures contained in the general policy, the following rules apply to the use of scaffolding: Only scaffolding erected under the standards described in this enclosure are authorized for use. Other work platforms required by unusual job conditions shall be cleared by the company Safety Officer and erected under the supervision of the field Superintendent

- A. All scaffolding will be inspected prior to use by the safety officer to ensure all precautions are taken to ensure proper weight bearing rating as well as protection from falling objects, falls, and other hazards such as electrical lines.
- B. Before working on or off of scaffolding, every employee will partake in a job specific safety training that includes scaffold load capacity, fall hazards, electrical hazards, falling objects, and the proper use of personal fall arrest systems.

#### 1. Tubular Welding Frame Scaffold:

\*NO SCAFFOLD WILL EVER BE ASSEMBLED, DISASSEMBLED, OR ALTERED EXCEPT UNDER THE SUPERVISION OF A CEMPETANT PERSON TRAINED IN SCAFFOLD ERECTION. A. A metal tubular scaffold, including all accessories sulci as braces, screw jack, leveling shoes and ladders shall be constructed to safely support four times the minimum load

B. Tubular frames shall be spaced no more than seven feet apart in width

C. Diagonal braces shall be used to connect all tubular frames, front and rear. Braces shall be attached to the frames so that the scaffold remains square, plumb and rigid

D. The scaffold shall be square to the ground and to the building. On un-level ground use screw jack leveling shoes to level the scaffold. On soft or shifting ground use two inch by ten inch planks below the leveling shoes for stability

E. Tubular frames shall be placed on top of each other by using collar type coupling pins

F. Where there is danger of uplift, tubular frames shall be locked together vertically by use of number 12 hanger wire

G. Scaffolds over 26 feet in height or 30 feet in length shall be secured to the building. Securement intervals shall be every 26 feet for height and 30 feet for length

H. All planks shall be minimum two inch by ten inch scaffold grade lumber

I. All planks shall extend a minimum of six inches and a maximum of 12 inches past the frame or overlap a minimum of 12 inches with both planks supported by the frame

J. All scaffold work platform shall be protected by a standard railing

K. Use a ladder or interior access whenever possible to gain access to the roof. When this is not possible, a scaffold tower may be used for access only if it is built in the following manner:

1. Ladder rungs are continuous on one side of the scaffold tower

2. The work platform is built with one complete frame section above it to allow for an easier transition from climbing to stepping onto the platform. If this is done with only one scaffold tower, then this tower shall be designated as the tower to be climbed for access to the roof

### 2. Manually Propelled Mobile Scaffold

A. A manually propelled mobile scaffold is a tubular welded frame scaffold constructed as outlined in paragraph two above, but with the following additional requirements.

B. The height of the scaffold shall not exceed four times the minimum base dimension of the scaffold. If the scaffold is to be moved with workmen on the work platform, the height shall not exceed Vi the minimum base dimension

C. Casters must be strong enough to support four times the minimum base dimension of the scaffold. All casters shall be provided with a positive locking device to hold the scaffold in position

D. The work platform shall be tightly planked the entire width of the scaffold except for an entrance opening

E. A ladder or stairway shall be built into the scaffold and located in such a manner that its use shall not cause the scaffold to tip

F. No employee shall ride a moving scaffold unless:

- 1. The surface is level, smooth and free of obstructions
- 2. The casters are equipped with rubber or resilient tires

3. All tools and materials are secured or moved from the work platform

G. Force to move the scaffold shall be applied as close to the base as practical

4. Roof (chicken) Ladder

A. A roof ladder is a plank with evenly spaced cleats used for movement of workmen but not materials

B. The crawl board plank shall be a minimum of ten inches wide and one inch thick

C. Cleats shall be a minimum of one inch by  $1 \ iA$  inch and equal in length to the width of the crawl board. Cleats shall be equally spaced and not more than two feet apart

D. Nails shall be driven through the cleats and clinched on the underside of the crawl board

E. The crawl board shall be secured to the roof by a ridge hook or other effective means

F. A firmly fastened lifeline of 3/4 inch rope shall be strung beside the crawl board for use as a hand hold

G. The roof edge shall be protected by a 42 inch parapet standard guardrail, scaffold platform or employees shall use personal fall arrest systems

### 5. Roofing Brackets

A. Roofing brackets shall be adjusted to fit the pitch of the roof and spaced a maximum of ten feet

B. Brackets shall be secured in place by multiple nails capable of supporting twice the maximum load anticipated

C. All planks shall be a minimum two inch by ten inch scaffold grade lumber

D. All planks shall extend a minimum of six inches and a maximum of 12 inches past the brackets or overlap a minimum of 12 inches with both planks supported by the brackets

E. The roof edge shall be protected by a 42 inch parapet standard guardrail, scaffold platform or employees shall use personal fall arrest systems

6. Inspections

A. Scaffolding or any work platform shall be inspected by the competent person trained in scaffold erection each day before use to insure that it is safe

### JOB SITE SAFETY - MECHANICAL EQUIPMENT SAFETY:

1. All mechanical equipment shall be inspected daily before use to insure proper functioning

2. All motorized equipment shall have the oil lever checked daily and changed at recommended intervals and fuel level checked frequently to prevent engine stoppage. Other daily maintenance items include: grease moving parts and clean cooling fins

3. Engines shall be shut down prior to refueling. All spilled fuel shall be cleaned up prior to restarting 4. Safety glasses or goggles and over the ankle boots shall be worn by the operator and all crew members in the vicinity of: roof cutters, roof sweepers, power spudders, power tear off, circular and chain saws and any other equipment capable of throwing debris

5. All operators of motorized equipment shall make themselves familiar with the proper operation of the equipment before operating

6. Mechanical equipment shall not be used or stored within six feet of any open roof edge

7. Operators of power riding or power driven equipment shall not operate their vehicles in a manner which could cause loss of control or overturn

8. Power riding equipment shall not be operated on a slope which could easily cause overturn. One way to determine this is to park the vehicle with the direction of travel perpendicular to the slope and have the operator, while remaining seated, begin to lean as far down slope as he can. If any of the wheels leave the ground, the slope is too great for safe operation

9. An ABC rated fire extinguisher shall be readily available any time motorized equipment is in use 10. All exposed moving parts shall be properly guarded

11. Mechanical equipment shall not be repaired while it is in operation. Replace all guards after maintenance is finished

# JOB SITE SAFETY – First Aid:

- Any person who carries a certificate from a nationally recognized program ie red cross is considered to be a first responder and may administer aid according to their training.
- DLC Inc will pay for any employee who wishes to receive first aid or medical training up to and including the BEC test. It is the responsibility of the employee to find and register for the course. First aid kits that meet the basic OSHA requirements for a construction site first aid kit will be kept in all company vehicles as well as the "job box" and the "safety box."

- The Safety Officer is responsible for restocking the first aid kit after every use.
- First Aid kits will be entirely replaced once yearly following the annual safety committee meeting.
- In the event a person is injured and requiring care beyond that available on the jobsite, the safety officer is responsible for escorting that person to the nearest emergency care or assigning another uninjured competent and licensed driver to do so.
- In the event of severe injury, emergency services should be summoned to the scene immediately.
- Water will be kept on site at all times to be used for flushing of eyes or drenching of the body in the event of contact with hazardous substance or irritant.

# JOB SITE SAFETY - POWDER ACTUATED TOOLS:

1. Only employees who have been trained shall be allowed to operate powder actuated tools

2. Powder actuated tools shall be tested each day before loading to insure that the safety devices are in proper working condition

3. Tools shall not be pointed at any employees. Hands shall be kept clear of the open barrel end

4. Fasteners shall not be driven into cast iron, glazed tile, surface hardened steel, glass block, live rock, face brick, or hollow tile

5. Easily penetrated surfaces shall be backed by a substance that will prevent the pin or fastener from becoming a flying missile

6. Tools will not be used in an explosive or flammable atmosphere

### JOB SITE SAFETY -HAND AND/OR POWER TOOLS:

- · Safety glasses must be worn at all times while operating hand or power tools
- No safety device or guard should ever be removed or disabled from a power or hand tool
- Hand and/or power tolls should be inspected before each use to insure that all guards are in place, the cord is not damaged and the tool is in proper working order.
- If a tool is deemed unsafe or found to have had a safety device or guard removed or tampered with, it should be tagged out and removed from the work area immediately.

# JOB SITE SAFETY - PPE - Personal Protective Equipment:

- All personal protective equipment is to be maintained in clean working order free from accumulated dirt, grease or damage
- DLC Inc will provide required PPE for all employees. All employees will be provided with safety glasses, high-visibility vest and a hard hat. Face shields and ear protection will be made available for any activity requiring them. If you have not already been provided with the PPE you feel is necessary, immediately request it from a supervisor and it will be provided.
- Personally owned PPE may be used. DLC Inc takes no responsibility for any damage to personally owned PPE.
- DLC Inc is responsible for ensuring that personally owned PPE is adequate for the task and meets all ANSI and OSHA requirements, as such the foreman or superintendent may inspect personal PPE at any time and will determine if it will be allowed in substitution of Company supplied PPE.
- All PPE must be properly fitting, snug but not tight.
- Damaged PPE should be disposed of and replaced immediately.

# JOB SITE SAFETY - SPECIAL HAZARDS:

The following is a list of some of the special hazards that you may encounter on your job site. The foreman shall be responsible to make all crew members aware of all special hazards. Additional special hazards requiring special safety precautions shall be brought to attention of the Safety Officer.

1. Electrical power lines or conduits on or near roof or near material access areas shall be shut off, protected with a warning line, or insulated by a qualified electrician.

2. All roof openings shall be securely covered or protected with a standard railing

3. All unsafe decking shall be properly covered to support the necessary traffic

4. See the building owner or manager if you suspect radiation or flammable vapor hazards on the roof These hazards shall be neutralized before beginning work

# JOB SITE SAFETY - THEFT PREVENTION:

Theft prevention is everyone's responsibility. Here are some guidelines to help you prevent theft at your job site:

1. Keep all valuable materials, tools, and equipment in locked area whenever possible or; on the roof or, in a well-lit area that is difficult to conceal activity

2. Have materials delivered to the job site in a manner to allow for their ready installation

3. Report all suspected thefts immediately to the corporate office

#### **General Rules for** Construction **Electrical Safety**

#### MAJOR PROTECTIVE METHODS FROM ELECTRICAL HAZARDS

Protection from electrical hazards generally includes the following methods:

- 1. DISTANCE: Commonly used with regard to ower lines
- 2. ISOLATION AND GUARDING: Restricting access, commonly used with high voltage power distribution equipment.
- 3. ENCLOSURE OF ELECTRICAL PARTS: A major concept of electrical wiring in general, e.g., all connections are made in a box.
- 4. GROUNDING: Required for all non-current carrying exposed metal parts, unless isolated or guarded as above. (However, corded tools may be either grounded OR be double-insulated.)
- 5. INSULATION: Intact insulation allows safe handling of everyday electrical equipment, including corded tools. Category also includes insulated mats and sleeves
- 6. DE-ENERGIZING AND GROUNDING: Protective method used by electrical unlines and also in conjunction with electrical lockout tagour
- 7. PERSONAL PROTECTIVE EQUIPMENT (PPE): Using insulated gloves and other apparel to work on energized equipment, limited to qual-fied and trained personnel working under very limited circumstances.



#### **Electrical Safety Overview**

1. CORD AND PLUG OPERATED electric tools with exposed metal parts must have a three-prong grounding plug -AND be grounded - or else be double-insulated.

2. EQUIPMENT GROUNDING only works when there in a permanent and continuous electrical e metal shell of a tool and the earth.

#### 3. PROPER POLARITY IN ELECTRICAL WIR-

a a BOFER FULARITY IN ELECTRICAL WIR-ING IS IMPORTANT: has to hat, neural to neural, equipment ground to equipment ground Polarized plays have a water neural black to mannain correct polarity. Reversed polarity can kill.

4. CIRCUITS MUST BE EQUIPPED WITH FUSES OR CIRCUIT BREAKERS in proceed against diagoneau methods. Fuser meth while creates threakers app in two method current like a neukly. Overaerrent protocian devices protect wing and equipment from workheating and first. They may erroup one protect you.

5. MOST 120 VOLT CIRCUITS are wired to deliver up to 15 or 20 ampt of current. Currents of 50 – 100 milliamperes can kill you, (1 mA = 1/1,000 of 1 Amp.)

#### 6. WET CONDITIONS LOWER SKIN RESIS-

WE1 CONDITIONS LOWER ORDER COMPARING TANCE, allowing more current to flow through your help. Current above 75 milliamps can cause venericalar flerillation, which may be fatal. Seventy of a thock depends one pair of current anound of current duration of current, voltage level, motivas and your general bashfti.

7. A GROUND FAULT CIRCUIT INTERRUPTER (GCCI) protect from a ground-but the most common elec-trical hand. GFCI detect differences in current flow between bet and extern). They try when hences is current flow between as through a person – of shour 5 milliamperes and they act within 140 df as second. Text a GFCI every time you use it It must "Trip" and it must "Keset."

8. EXTENSION CORD WIRES MUST BE HEAVY ENOUGH for the amount of current they will carry. For construction, they must be UL approved, have strain relief and a 3-prong grounding plug, be durable, and be rated for hard or attra-hard usage.

9. OVERHEAD POWER LINES CAN KILL. The three major methods of protection are: maintaining a sufe de-tance, de-corregance AND grounding lower, having the power company install invaluting sleeves. Have a power company re on the site.

10. UNDERGROUND POWER LINES CAN KILL. Call before you dig to locate all underground cables. Hand dig within three feet of cable location!

#### **Effects of Electric Current** in the Human Body

#### Current / Reaction

(1,000 milliamperes = 1 amp; therefore, 15,000 milliamperes = 15 amp circuit) Below 1 milliampere Generally not perceptible

#### 1 milliampere Faint tingle

- 5 milliampere Slight shock felt; not painful but disturbing
- Average individual can let go. Strong involun-tary reactions can lead to other injuries.
- 6-25 milliamperes (women) Painful shock, loss of muscular control
- 9-30 milliamperes (men) The freezing current or " let-go" range. Individual cannot let go, but can be thrown away from the circuit if extensor muscles are sumulated.
- 50 150 mlliamperes Extreme pain, respiratory arrest, severe muscu-lar contractions. Death is possible
- 1,000 4,300 milliamperes Rhythmic pumping action of the heart ceases. Muscular contraction and nerve damage occur; death likely

10,000 milliamperes Cardiac arrest, severe burus: death probable



#### Construction Focus Four: Electrocution Directorate of Training and Education 2020 S. Arlington Heights Rd. Arlington Heights, IL 60005

Some content adapted from: Central New York COSH, 2007. Construction Safety & Health Electrocution hazards Grantee module, Grant Number 5H-16386-07-06-F-36 from OSH4.

#### **General Rules for Electrical Work**

- Non-conductive PPE is essential for electricians. NO Non-conductore PEE is essential for electricians. NO MEIAL PPEI Class B hard hats provide the highest level of protection against electrical hazards, with high-roltage sheek and burn protection (up to 20,000 volts). Electrical hazard, tafety-toe shoes are noncon-ductive and will prevent the wearts' feet from com-pleting an electrical circuit to the ground.
- Be alert to electrical hazards, especially when working with ladders, scaffolds and other platforms.
- Never bypass electrical protective systems or devices.
- Disconnect cord tools when not in use and when changing blades, bits or other accessories.
- Inspect all tools before use.
- Use only grounded extension cords.
- Remove damaged tools and damaged extension cords
- Keep working spaces and walkways clear of electrical

# RULES FOR TEMPORARY WIRING AND LIGHTING

- Use Ground Fault Circuit Interrupters (GFCIs) on all 15-Amp and 20-Amp temporary wiring circuits.
- · Protect temporary lights from contact and damage
- Don't suspend temporary lights by cords, unless the temporary light is so designed.







# Construction Focus Four: Electrocution Safety Tips for Workers

#### Contents:

- Electrical Safety Overview
- General Rules for Electrical Work
- Condensed Electrical Glossary
- General Rules for Construction **Electrical Safety**
- · Effects of Electric Current in the Human Body

#### **Condensed Electrical Glossary**

AMPERE OR AMP: The unit of electrical current (flow of electrons). • One with any (w.4) = 1/1,000 of 1 Amp. CONDUCTORS: Materials, such as metals, in which electri-

at can fire ELECTRICAL HAZARDS can result in various effects on

the body, including: • SHOCK - The physical effects caused by electric current flowing in the body. • ELECTROCUTION - Electrical shock or related electrical effects resulting in death. •

- Internal labor or realise sectors effects resulting in death. BURNS - Other occurring on the hands, thermal damps to tissue can be caused by the flow of current in the body. by over-heating of improper or damaged electrical components, or by an explait of FLALS - A common effect, compliance, entrad by the body's reaction to an electrical current. A non-final shock may sometimes result in a first full when a person is working on a elevated article.

an excited number. EXPOSED LIVE PARTS: Energized electrical components not properly suchowed in a low or otherwise isolated, such that worker, can touch them and be shocked or killed. Some of the common hannels includes missing indoceters, musited openings in columns or tasket bases. Any missing covers must be regoined from with approved covers.

INSULATORS: Materials with high electrical resistance, so electrical current can't flow.

LOCKOUT/TAGOUT: The common name for an OSHA LOURDULTIAGOUTT: The common name for an OSHA transford, "The control of fatanchou caregy (lockous agout)," Lockous is a main of controling energy during prays and maintenance of equipment, whereby energy tourses are de-covergined, and then locked out to prevent manife star-up of equipment which would endinger workers. Lockous in-cludes - but is not limited to - the control of electrical amergy. Taylow means the placking of warning tags to also to the workers to the province of equipment the last base locked out. Tags alson DO NOT LOCK OUT equipment. Tagsout's most effective when dens in addition to lockout.

OHM or Ω: The unit of electrical remanance (oppo current flow)

Current 1000). OHM'S LAW: A mathematical expression of the relationship material strength of the strength of the strength of the second strength material strength of the strength of the

in unicentreutant, is can seen not utility (MMC) VOLT: The unit of electronismic force (single caused by a dif-forence in electronic charge or electrical presental between the point and autoher point. The presence of voltage is interesting before current can flow in a objectif (in which current flows from a nonzero to load - the equipment using the electricity – and then back to in source).

WET CONDITIONS: Rain, sweet, standing in a puddle - all will decrease the skin's electrical resistance and increase current flow through the body in the event of a thock. Have a qualified electrician inspect any electrical equipment that has gotten wet before epervining it.

# **Dave Loden Construction Fall Protection Training Certification**

Name of Person Conducting the training \_\_\_\_\_

Name of Person Receiving Training \_\_\_\_\_

The above named individual, as an employee of Dave Loden Construction, has completed instruction and training on the following items:

- Review of OSHA regulation 1926.500, 1926.501, 1926.502, 1926.503:
  - https://www.osha.gov/pls/oshaweb/owasrch.search\_form?p\_doc\_type=STANDARDS&p\_toc\_lev el=1&p\_keyvalue=1926
- The danger of fall hazards
- Identification of fall hazards
- Identification of when fall protection is necessary
  - Any height or potential fall of 6 feet or greater not protected by a rail of at least 42" in height.
- Proper erection, inspection and maintenance of fall protection devices used by Dave Loden Construction
  - o Fall Arrest Systems
  - Positioning Systems
  - o Guardrail System
  - o Warning Line System
- Proper use and limitations of fall protection devices/methods used by Dave Loden Construction
  - o Fall Arrest Systems
    - Anchor
    - Life-Line
    - Rope Grab / Positioning Device
    - Shock absorbing lanyard
    - Harness
  - Positioning Systems
  - o Guardrail System
  - o Warning Line System
  - o Safety Monitoring System
  - o Controlled Access Areas
- The safety monitoring system including the responsibilities and duties of both the safety monitor and workers
- Procedures for protecting those below from overhead dangers
  - Correct procedures for setting up fall protection at height
  - Correct procedures for handling, securement, and storage of materials, tools, equipment at height

Signature of Owner, Safety Officer or Foreman Conducting Training

Signature of Employee\_\_\_\_\_

Date \_\_\_\_\_



Substance Abuse Policy

# Purpose

**Dave Loden Construction Inc., henceforth referred to as DLC,** values its employees and recognizes their need for a safe and healthy work environment. Employees abusing drugs and/or alcohol are less productive and are often a critical risk to the safety, security and productivity of our Company. The establishment of a Drug-Free Workplace Policy is consistent with our desired culture and is in the best interest of our company.

# Policy

It is the policy of DLC to maintain a workplace free from the use and abuse of drugs and alcohol. Compliance with this policy is a condition of continued employment. It supersedes any other Company policy or practice on this subject. At any time, DLC may unilaterally, at its discretion, amend, supplement, modify, or change any part of this policy. The policy does not represent an expressed or implied contract, and it does not affect your status as an at-will employee. If you have any questions about this policy, please direct them to Erick Loden or Dave Loden.

To maintain a Drug and Alcohol-Free Workplace, DLC has established the following policy effective 6/11/12 with regard to the use, possession, and sale of drugs and/or alcohol. Testing of current employees will begin as appropriate. The policy covers all employees of DLC. Drug and alcohol testing practices will be adopted to identify employees or applicants using drugs and/or alcohol.

# **Drug and Alcohol Prohibitions**

"Illegal Drug" means: any drug (1) that is not legally obtainable, or (2) that is legally obtainable but has not been legally obtained, or (3) that is a controlled substance. The term includes prescribed drugs not legally obtained, prescribed drugs not being used for prescribed purposes, or prescribed drugs exceeding the recommended prescribed dosage.

- 1. Any employee engaged in any of the activities listed below is in violation of Company policy and subject to disciplinary action:
  - b.) bringing illegal drugs onto Company premises or property, including Company owned or leased vehicles, or a DLC customer's premises;
  - c.) having possession of, being under the influence of, or having in one's system illegal drugs;
  - d.) using, consuming, transporting, distributing or attempting to distribute, manufacturing or dispensing illegal drug;
  - e.) Switching, tampering with, altering or adulterating any specimen or sample collected under this policy or attempting to do so.
  - f.) Operating a company vehicle, rental vehicle (under the company name), or personal vehicle used for company purposes under the influence of alcohol at any time while representing DLC.
- 2. The Company strictly prohibits the abuse of prescription drugs. (See "Illegal Drugs" previously mentioned.)
- 3. The company prohibits the use of alcohol on the job or use of alcohol prior to the start of the work day. No employee shall perform any work tasks for DLC while under the influence of alcohol.
- 4. Any employee refusing to cooperate with or submit to questioning, medical or physical tests or examinations, when requested or conducted by the Company or its designee, is in violation of Company policy and subject to disciplinary action.

# **Drug and Alcohol Testing**

DLC asserts its legal right and prerogative to test any employee for drug and/or alcohol abuse. Employees may be asked to submit to a medical examination and/or submit to urine, saliva, breath, sweat, and/or hair testing for drugs and/or alcohol. Any information obtained through such examinations may be retained by DLC and is the property of DLC.

In particular, DLC reserves the right, in its discretion and within the limits of federal and state laws, to examine and test for the presence of drugs and alcohol in situations such as, but not limited to, the following:

- Pre-Employment: All offers of employment will be made subject to the results of a drug test. Applicants will be required to voluntarily submit to a test and sign an acknowledgment form that will release DLC from liability. The Company will not discriminate against applicants for employment because of past drug abuse. It is the current abuse of drugs which prevents employees from properly performing their jobs.
- <u>Post-Accident</u>: A drug and/or alcohol test will be conducted on all employees involved in accidents occurring during work time or while on company property. Covered accidents include, but are not limited to, accidents that the employee caused or contributed to that involve:
  - a. personal injury to employees or others which necessitates medical attention (beyond first aid) or results in lost work time; and/or
  - b. damage to company property.

Employees are expected to make themselves available for post-accident testing. If circumstances require an employee to leave the scene of an accident, the employee must make a good-faith attempt to be tested and to notify the company of his/her location.

Failure to report any accident that meets the post-accident testing criteria is in violation of Company policy and subject to disciplinary action. Employees testing positive may be ineligible for workers' compensation and unemployment compensation benefits.

3. <u>Random</u> - All employees are subject to random, periodic, unannounced drug tests at any time the company deems necessary to maintain a Drug-Free Workplace. This testing is done to ensure public and employee safety; and to protect the company profitability, image, and reputation as a drug-free organization. The rate of random selection will be a percentage of the annual average employee or consortium base. Every employee has an equal chance of being chosen every time a random selection is made.
- 4. **<u>Reasonable Suspicion</u>**: Any employee may be asked to submit to a drug and/or alcohol test if reasonable cause exists to suggest that the employee's health, safety, or ability to perform expected job duties is currently impaired.
- 5. **Follow-Up:** Any employee who has been removed voluntarily or otherwise from his/her job duties on the basis of a verified positive drug test, and is later re-hired after passing the Pre-Employment test, will be subject to unannounced drug testing to determine whether he/she is under the influence of drugs. The testing can continue for up to 24 months from the return-to-work date.

#### Procedures

The drug test will be performed from specimens collected at a qualified collection site or at a company facility using an on-site testing kit. A breath or saliva test will be performed for all post-accident and reasonable-cause situations to determine alcohol levels.

The collection site will take necessary steps to avoid any dilution or alteration of specimens. However, the test shall be conducted in a professional and sanitary manner with due regard for the individual's privacy, dignity, and confidentiality. Proper handling of the specimens will be maintained so that the specimen results can be traced to the proper individual.

The specimen will be tested by Big Horn Urgent Care in Sheridan, WY. They will be tested with a 5 panel rapid test. This test covers the following controlled substances:

\* Cannabinoids (marijuana) \* Cocaine \* Phencyclidine (PCP)

\* Opiates (heroin, morphine, codine)
 \* Amphetamines (stimulants such as Benzedrine & Dridex)

If the rapid test is positive for drug use, the test will be confirmed by a certified, professional laboratory. Any positive results from this test will be reviewed by a Medical Review Officer (MRO). The MRO will give the employee the opportunity to rebut a positive test result and provide evidence of the proper use of prescription drugs. This will ensure that positive results are not due to legally obtained prescription drugs or other factors which the MRO feels justify the presence of controlled substances.

Any employee who is tested will have the right, upon request, to see the results of his/her test. The employee may also request a retest of the original specimen at a different certified laboratory. The arrangements of this retest will be the employee's responsibility and the test will be performed at the employee's expense. The re-test must occur within 10 business days of being notified of a positive test result. All drug and alcohol information regarding the test results or failure to complete rehabilitation will remain confidential and will only be given out on a strict need-to-know basis. The company's workers' compensation carrier will be notified of results from post-accident tests that may affect compensability under DLC insurance program.

### **Disciplinary Actions**

The Company reserves the right to use disciplinary actions, up to and including termination of employment, depending upon the seriousness of the violation, the employee's present job assignment, the employee's record with the Company, and other factors, including the impact of the violation upon the conduct of Company business.

DLC maintains a strict zero tolerance drug policy. A positive test result for the use of any illicit drug will result in termination of employment.

Positive test results confirming the use of prescribed drugs will initiate an investigation. The employee will be given an opportunity to provide an explanation and prescription for the drug's use. If it is found that the prescribed drugs are not prescribed to the individual in question, are being used for a purpose other than prescribed or in a dose greater than is prescribed employment will be terminated.

An individual who's employment has been terminated for substance abuse may later re-apply to be re-hired at a time when they can pass the pre-employment drug screening. Such an individual will then be subject to Follow-up testing as described above.

### Acknowledgment

As a condition of continued employment, employees must sign the attached acknowledgment form.



#### To: ALL Dave Loden Construction Employees

RE; New Punctuality and Attendance Policy

As a result of recent punctuality and attendance issues, DLC management is instituting a new policy to take effect 6/23/2020.

Any tardiness of more than 5 minutes or absence from work without prior arrangement will result in a demotion and reduction of pay in accordance with Wyoming state labor laws regarding demotion for cause. This policy will be enforced universally without regard to position, time served, race, sex, sexual orientation, or any other distinction. Each occurrence will result in a reduction of pay by \$1.00/hr for the subsequent pay period from which the offence occurred and all subsequent pay periods until such time as the employee in question has demonstrated a full week of perfect punctuality and attendance. After a full week of perfect punctuality and attendance, pay will be restored for subsequent pay periods.

An employee may receive "stacked" or subsequent demotions and reductions in pay for subsequent infractions down to the state mandated minimum wage. Each occurrence will require a separate demonstration of 1 full week's perfect attendance before being reinstated.

For the purpose of the policy, prior arrangement will be constituted by notification AND APPROVAL of tardiness or absence by your immediate supervisor more than 24 hours in advance. In the event of emergency circumstances that do not allow 24 hours' notice. It will be expected that you notify your immediate supervisor immediately after becoming aware of the situation. Determination of whether or not those circumstances constitute an emergency will be made by your immediate supervisor at the time of notification.

In addition to the demotion and reduction in rate of pay, any employee who has 2 or more infractions in a single profit sharing period will be considered ineligible to participate in the company profit sharing program for that period. Their share of the profit sharing will be surrendered to the profit sharing pool and will be distributed to those with perfect attendance for that period.

Best Regards,

Erick E Loden, President Dave Loden Construction

## Special Notice to Eligible Participants of the Dave Loden Construction, Inc. 401(k) Plan

This Special Notice provides important information relating to your participation in the Dave Loden Construction, Inc. 401(k) Plan for the plan year that begins 01-01-2019 (called the "2019 plan year" in this notice).

**Making or changing your deferral election:** As a Participant in your Employer's 401(k) Plan, you may elect to defer to the Plan a portion of your compensation. Your Employer will contribute this amount (your "deferral contributions") to the Plan. If you have not previously made an election to defer a portion of your compensation, you must complete and return the salary reduction agreement provided by the Plan Administrator. Any existing deferral election will continue until you modify that election. You may start or change a deferral election at any time during the next 30 days and during each deferral election period thereafter as described in the Summary Plan Description or per your Employer's administrative guidelines. You may make an initial deferral election or modify an existing deferral election by accessing your plan's website at www.eplanservices401k.com.

You may make Regular 401(k) deferrals (pre-tax) and/or Roth 401(k) deferrals (after-tax). Your election regarding the amount and type of deferrals is irrevocable with respect to any deferrals already withheld from your compensation. If you make Regular 401(k) deferrals, your deferrals are not subject to income tax until distributed from the Plan. If you make Roth 401(k) deferrals, your deferrals are subject to income tax at the time of deferral. However, if you satisfy certain distribution requirements (see Part V below), your Roth 401(k) deferrals and earnings on the deferrals will not be subject to income tax when distributed from the Plan. Both types of deferrals are subject to Social Security taxes at the time of deferral. Your Employer will deduct the Social Security taxes, and in the case of Roth 401(k) deferrals will deduct income taxes, from your remaining compensation.

**Type and amount of compensation you may defer:** You may defer any amount of your compensation for the Plan Year, not exceeding the annual deferral limit of \$19,000.00 for 2019. For purposes of your deferral election, "compensation" (available for deferral) means your W-2 wages earned for the year (or Earned Income for a Sole-Proprietor or a Partner in a Partnership).

**Auto Enrollment Safe Harbor matching contribution:** A matching contribution equal to 100.00% of your deferral contributions which do not exceed 1.00% of your compensation, plus 50.00% of your deferral contributions which exceed 1.00% but do not exceed 6.00% of your compensation. For example, assume you earn compensation of \$30,000 for the Plan Year and you defer \$1,800 of your compensation (6%). You would receive a total matching contribution of \$1,050.00. Your matching contribution would consist of a 100.00% match on your first \$300.00 (1.00% x \$30,000) of deferral contributions and a 50.00% matching contribution on your next \$1,500.00 (5.00% x \$30,000) of deferral contributions. You would not receive a matching contribution on the remaining \$750.00 of your deferral contributions, the amount of your deferral contribution which exceeds 6.00% of your compensation.

*Note:* If you are eligible to make salary deferrals into the Plan, you also are eligible for the special matching contribution. The Employer will consider the salary deferrals you make for each payroll period in determining your matching contribution.

**Auto Enrollment Deferral Schedule:** If you do not make an affirmative deferral election (including an election to not defer into the Plan) then your Employer will automatically defer into the Plan a portion of your compensation based upon the following schedule: a 5% deferral during your first year of participation, a 6% deferral during your second year of participation, a 7% deferral during your third year of participation and a 8% deferral during your fourth year of participation. You may "opt-out" of this schedule at any time by making your own affirmative deferral election. Any deferral contribution you make whether by your own affirmative election or by the automatic deferral election will entitle you to receive the matching contribution based upon the formula described above.

Modification of contribution: If your Employer decides to increase, decrease or cancel the Safe Harbor

contribution, your Employer will notify you of this decision at least 30 days before the effective date of the change.

**Other Employer contributions:** Your Employer, in its sole discretion, may make additional contributions as described on page 3 ("Plan Highlights").

**Distribution and vesting provisions:** You generally may not withdraw your deferral contributions, the Safe Harbor contributions or other Employer contributions except when one of the following events occurs: severance from employment with your Employer, death, disability or attainment of age 59 1/2. You are always 100% vested in your deferral contributions and in the Safe Harbor contributions your Employer makes on your behalf. Employer contributions vest per the applicable vesting schedules as described on page 3 (Plan Highlights).

In addition to the distribution events listed in the previous paragraph, if you make Roth 401(k) deferrals, you may take a qualified distribution of your Roth 401(k) deferrals only if you satisfy two requirements. First, the distribution must be on account of attainment of age 59 ½, death or disability. Second, the distribution must not occur prior to the end of the 5-year participation period that begins with the first taxable year for which you made a Roth 401(k) deferral to the Plan, or if earlier, the first taxable year for which you made a Roth 401(k) deferral to the Plan, or if earlier, the first taxable year for which you made a Roth 401(k) deferral to another Roth 401(k) plan or Roth 403(b) plan that you rolled over to this Plan. If you take a qualified distribution to the Roth 401(k) deferrals, you will receive tax-free the earnings on the Roth 401(k) deferral, in addition to the Roth 401(k) deferrals. If you take a distribution of your Roth 401(k) deferrals. If you take a distribution of your Roth 401(k) deferrals will be taxable to you.

**Default Investment of Plan Contributions:** You are permitted to select the investment option(s) for the contributions made to the Plan on your behalf. However, if you fail to provide investment direction (that is, you do not provide a valid instruction as to how the contributions should be invested), then the contributions will be invested in the Plan's Default Fund.

The Default Fund may be a Qualified Default Investment Alternative (QDIA). A QDIA is an investment option under the Plan which is intended to promote the long term capital growth of your account balance in order to achieve meaningful retirement savings. If a plan contribution is invested in the QDIA, you still have the right to transfer the contribution from the QDIA to any other investment option available under the Plan. Prior to requesting any movement of funds, please review the fund prospectus for policies regarding frequent trading and market timing, if any.

You may contact the Plan Administrator to obtain information regarding the specific investment(s) that will serve as the Default Fund/QDIA, fees and expenses that may be associated with the Default Fund/QDIA, and alternative investments available under the Plan. You may also refer to the Investment Performance Information and Disclosure for more information.

**Employer's right to terminate:** Pursuant to the terms of the Plan, your Employer has the right, at any time, to terminate the Plan. Termination of the Plan will result in the discontinuance of all contributions to the Plan (including the Safe Harbor 401(k) contribution) with respect to any compensation you receive after the effective date of termination. Termination of the Plan will not affect your right to receive any contributions you have accrued as of the effective date of the termination.

**For further information:** Please refer to the Summary Plan Description for a complete explanation of the Plan features. Please ask the Plan Administrator if you have any question regarding your rights or obligations under the Plan or if you would like to obtain an additional copy of the Summary Plan Description. Please see page 3 ("Plan Highlights") for your Plan Administrator's contact information.

## PLAN HIGHLIGHTS ATTACHMENT

## Dave Loden Construction, Inc.

Employer: TIN: Plan Number:	Dave Loden C 83-0315284 001	onstruction, Inc.	<i>Plan Year End: Plan Effective Date: Amendment Date:</i>	December 31 January 1, 2019					
Who Can Part	ticipate?	If you are an employee age 19 or over who has completed one year of service with the employer then you have met the plan's eligibility requirements. To complete "one year of service" you must work at least 1,000 hours during the twelve (12) consecutive month period following the date of hire. You will join the plan on the first day of the next month after meeting the eligibility requirements. See information below regarding your initial login and access to your account to complete the plan enrollment process.							
How Do I Con the Plan?	itribute to	maximum of \$19, during the year the							
		Roth contribution words, the money	s. Roth contributions are made with	r part of your elective deferrals as th post-tax payroll dollars. In other money you withdraw at retirement					
		If you do not enro	ll, your deductions will be as follo	OWS:					
			Automatic Deferral Election						
		3	5% of compensation 6% of compensation 7% of compensation 8% of compensation						
Does My Emp Contribute to		<ul> <li>Yes. Your Employer makes the following contributions to the Plan on your behalf</li> <li>A Safe Harbor matching contribution of 100% of your elective deferral contributions up to 1% of compensation plus 50% of your elective deferra contributions over 1% up to 6% of compensation.</li> <li>A new comparability non-elective or "profit-sharing" contribution. To receive these contributions you must: <ul> <li>Be employed on the last day of the Plan year; and</li> <li>Work more than 1000 hours during the Plan year.</li> </ul> </li> </ul>							
How Do I Bec "Vested" In M			wnership in your account balance. ount balance and rollover account l						
Account?	-	The account balar	nce from employer contributions v	vest according to the schedule below:					
			Years	s of Vesting Service					

	Contribution Type	0	1	2	3	4	5	6		
	Profit Sharing	0%	0%	20%	40%	60%	80%	100%		
	AE Safe Harbor Match	0%	0%	100%	100%	100%	100%	100%		
	Regular Deferral	100%	100%	100%	100%	100%	100%	100%		
	Roth Deferral Regular Rollover	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100%		
	Roth Rollover	100%	100%	100%	100%	100%	100%	100%		
	Note: You earn a Year of V 1,000 hours.	esting Se	ervice foi	• any Pla	n year th	at you w				
Can I Borrow Money From My Account?	No. Your Employer does n	ot allow	loans fro	m the Pla	an.					
When Can Money be       Money may be withdrawn from your Plan account in these events:         Nithdrawn From My       • Retirement at age 65.0         • Termination of employment, disability or death         • After reaching age 59.5 while still employed										
	Upon certain immediate and heavy financial needs									
	See the Summary Plan Deso any withdrawal from your a		for more	details re	garding	the tax ir	nplicatio	ns of		
How Do I Obtain Information About My	You may access your account 24/7 using either of the following methods:									
Account?	Internet: www.eplanservice	s401k.co	m							
	<ul> <li>Initial Username: Social Security Number (no dashes)</li> <li>Initial Password: Last 4 Digits of SSN</li> </ul>									
	<b>Note:</b> You will be prompte immediately upon log-in. U 16 letters and/or n umbers a	ser name	s and pa	sswords				D		
	Voice Response System (ava	ailable in	e English	and Spa	nish): (8	66) 797-4	4015			
	In addition, you may contact <i>Customer Service</i> at 888-827-4749 Monday through Friday between the hours of 7:00 am and 5:00 pm Mountain Time.									
Who Do I Contact At My	Employer		Truste	17						
Company To Obtain	Dave Loden Construction,			Loden						
Additional Information About The Plan?	Inc. 400 Hemlock St.		Cind	y Loden						
	Buffalo, WY 82834									
		זמ			1	1				
	Contact Name	<u>Phone</u>	e Number	<u>e</u> e	Mail Ada	ress				

Trustee Address(es) are the same as Employer Address referenced above.

**NOTE:** This Plan Highlights Attachment Is Not Meant To Be A Substitute For A Thorough Reading Of The Summary Plan Description. The Provisions Of The 401(K) Plan Are Very Complex And Cannot Be Fully Explained Through This Plan Highlights

Attachment. You Should Use The Plan Highlights Attachment As A Reference While Reading The Summary Plan Description. You Should Always Consult The Summary Plan Description If You Have Any Questions About The Plan. If You Still Have Questions After Reading The Summary Plan Description, You Should Consult The Plan Administrator.

#### Investment Performance Information and Disclosure<sup>1</sup> (AS OF 03-31-2019)

## Dave Loden Construction, Inc. 401k Plan

Fund Information	Ticker	Category	Total Return			Average Annual Total Return				Expense(%) <sup>2,3</sup>	Concession(%) <sup>6</sup>
			YTD	3 mos.	1	3	5	10	ITD		
BANC Master Deposit Account B <sup>4</sup>	BMBXO	Cash Account	0.18	0.18	0.67	1.27	-	-	1.47	-	0.00
www.bancofcal.com										\$0.00	
Crane Taxable Money fund Indexes (benchmark)					1.73	0.88	0.54	0.30	0.00		
DFA Intermediate Govt Fixed-Income I <sup>\$</sup>	DFIGX	Intermediate Government	2.53	2.53	4.97	1.04	2.40	3.04	-	0.13	0.00
www.dfaus.com	_									\$1.30	
-					-	-	-	-	-		
Franklin Convertible Securities Adv	FCSZX	Convertibles	14.02	14.02	13.45	15.13	9.28	14.24	-	0.60	-
www.franklintempleton.com	_									\$6.00	
-					-	-	-	-	-		
MFS Massachusetts Investors Gr Stk R4 <sup>\$</sup>	MIGKX	Large Growth	17.69	17.69	16.59	16.40	12.61	16.84	-	0.48	0.14
www.mfs.com										\$4.80	
-					-	-	-	-	-		
T Rowe Price InstitutionalBlue Chip Growth Fund	TBCIX	Large Growth	16.20	16.20	12.24	20.18	15.04	18.96	16.26	0.57	-
www.troweprice.com		C								\$5.70	
-					-	-	-	-	-		
John Hancock US Global Leaders Growth I <sup>\$</sup>	USLIX	Large Growth	16.83	16.83	20.34	16.90	12.85	16.70	-	0.91	0.09
www.jhfunds.com										\$9.10	
-					-	-	-	-	-		
Harbor Cap App Inst <sup>\$</sup>	HACAX	Large Growth	17.54	17.54	11.52	18.49	13.94	17.21	-	0.66	0.09
www.harborfund.com										\$6.60	
-					-	-	-	-	-		
Franklin Rising Dividends Fund <sup>\$</sup>	FRDAX	Large Blend	15.08	15.08	12.12	12.98	9.66	14.81	-	0.63	0.14
www.franklintempleton.com		20.90 2.0.0	10100	10.00			0.00			\$6.30	0
					-	-	-	-	-		
Parnassus Core Equity Investor <sup>\$</sup>	PRBLX	Large Blend	13.32	13.32	13.41	12.37	10.46	15.33	_	0.87	0.23
www.parnassusfunds.com	TREEK	Laigo Diona	10.02	10.02	10.11	12.07	10.10	10.00		\$8.70	0.20
-					-	-	-	-	-	ţ	
Vanguard Equity-Income Adm <sup>\$</sup>	VEIRX	Large Value	11.11	11.11	7.58	11.26	9.38	15.42	-	0.18	0.00
www.vanguard.com					1.00	11.20	0.00	10.42		\$1.80	0.00
-					-	-	-	-	-	¢1.00	
BlackRock Mid-Cap Growth Equity Instl <sup>\$</sup>	CMGIX	Mid-Cap Growth	20.76	20.76	16.80	21.91	14.00	18.58		0.80	0.23
www.blackrock.com	CINIGIX	Mid-Cap Glowin	20.70	20.70	10.00	21.91	14.00	10.50	-	\$8.00	0.25
-					-	-	_	-	-	φ0.00	
Vanguard Mid-Cap Index Fund Admiral <sup>\$</sup>	VIMAX	Mid-Cap Blend	16.77	16.77	5.98	11.59	8.85	16.67	-	0.05	0.00
www.vanguard.com			10.77	10.77	5.50	11.59	0.00	10.07	-	\$0.50	0.00
					-	-	-	-	-	φ0.30	
Vanguard Mid-Cap Value Index Admiral <sup>\$</sup>	VMVAX	Mid Can Value	10.04	12.04						0.07	0.00
vanguaru ivilu-Cap value inuex Autilität	VIVIVAX	Mid-Cap Value	13.81	13.81	1.05	9.77	7.70	16.57	13.73	0.07	0.00

www.vanguard.com	_									\$0.70	
-					-	-	-	-	-		
AB Small Cap Growth Portfolio Class I <sup>\$</sup>	QUAIX	Small Growth	21.84	21.84	15.03	23.72	10.96	19.76	-	0.91	0.09
www.alliancecapital.com	_									\$9.10	
-					-	-	-	-	-		
Vanguard Small Cap Growth Index Adm <sup>\$</sup>	VSGAX	Small Growth	19.50	19.50	10.40	15.77	8.72	17.53	14.20	0.07	0.00
www.vanguard.com	_									\$0.70	
-					-	-	-	-	-		
Dreyfus Sm Cap Stk Index <sup>\$</sup>	DISSX	Small Blend	11.48	11.48	1.12	11.89	7.95	16.54	-	0.50	0.09
www.dreyfus.com	_									\$5.00	
-					-	-	-	-	-		
Goldman Sachs Small Cap Value I <sup>\$</sup>	GSSIX	Small Blend	12.49	12.49	-1.26	10.51	6.15	15.35	-	0.94	0.00
www.gs.com	_									\$9.40	
-					-	-	-	-	-		
Oppenheimer International Diversified I <sup>\$</sup>	OIDIX	Foreign Large Growth	11.75	11.75	-5.17	8.52	4.30	11.77	8.39	0.88	0.00
www.oppenheimerfunds.com	_									\$8.80	
-					-	-	-	-	-		
Oppenheimer Develop Mkt A <sup>\$</sup>	ODMAX	Diversified Emerging Mkts	12.31	12.31	-4.14	11.34	3.44	11.19	-	1.29	0.46
www.oppenheimerfunds.com	_									\$12.90	
-					-	-	-	-	-		
Vanguard Global Equity <sup>\$</sup>	VHGEX	World Stock	12.92	12.92	2.19	11.88	7.33	13.62	-	0.48	0.00
www.vanguard.com										\$4.80	
-					-	-	-	-	-		

#### Footnotes

<sup>1</sup>The Employee Retirement Income Security Act of 1974, as amended, ("ERISA") requires service providers like ePlan Services, Inc. to provide disclosure of investment information as well as disclosure of fees earned from providing services to a qualified retirement plan. This disclosure provides a portion of that required information.

<sup>2</sup>The Net Expense Ratio displayed reflects any fee waivers or reimbursements that may be in effect. The fund may discontinue the waivers at any time. Please see the prospectus for more details.

<sup>3</sup>The Expense dollar amount reflects the cost impact of the Net Expense Ratio upon a \$1,000.00 investment over a one year period.

<sup>4</sup>The Employer hereby agrees and directs this investment option will be the investment vehicle into which Plan contributions made on behalf of Participants who have not made affirmative investment elections will be invested (the "Default Fund").

<sup>6</sup>The Concession rates indicate a shareholder service fee that the custodian of the plan assets makes available as revenue to ePlan Services, Inc. ePlan Services, Inc. does not retain this amount as fee revenue but rather reallocates these amounts into plan participant accounts.

<sup>\$</sup>The following funds indicate a possible redemption fee as described. Please see the fund prospectus for more information.

DFA Intermediate Govt Fixed-Income I: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. MFS Massachusetts Investors Gr Stk R4: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. John Hancock US Global Leaders Growth I: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Harbor Cap App Inst: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Franklin Rising Dividends Fund: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Parnassus Core Equity Investor: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Vanguard Equity-Income Adm: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. BlackRock Mid-Cap Growth Equity Instl: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Vanguard Mid-Cap Index Fund Admiral: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Vanguard Mid-Cap Value Index Admiral: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. AB Small Cap Growth Portfolio Class I: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Vanguard Small Cap Growth Index Adm: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Dreyfus Sm Cap Stk Index: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Goldman Sachs Small Cap Value I: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Oppenheimer International Diversified I: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Oppenheimer Develop Mkt A: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase. Vanguard Global Equity: 0% deferred sales charge subtracted from amounts withdrawn within null of purchase.

#### Legal Disclosure

The performance numbers shown reflect SEC "standardized performance" for each applicable investment vehicle. Thus, these figures are total return numbers and reflect performance net of all investment management and related fees and expenses. These returns do not reflect any asset based fees, which may be assessed to each client's account. These fees would have reduced the performance shown.

The above performance data represents past performance and past performance does not guarantee future results. Investment returns and principal value will fluctuate so that an investor's shares, when redeemed, may be worth more or less than their original cost. There are specific risks associated with different asset classes and investment strategies including but not necessarily limited to the special risks associated with foreign stocks, small-cap stocks, sector funds and high yield bonds.

Information contained herein that has been provided by Morningstar: (1) is proprietary to Morningstar and/or its content providers; (2) may not be copied or distributed; and (3) is not warranted to be accurate, complete or timely. Neither Morningstar nor its content providers are responsible for any damages or losses arising from any use of this information. Past performance is no guarantee of future results.

An investor should carefully consider the investment objectives, risks, charges and expenses of each investment before investing. More information is provided on the product website including Fund Fact Sheets, fund prospectus and the value of a share of each fund. Please read this information before investing.

ePlan Advisors, LLC shall not be responsible for investment decisions, damages or other losses resulting from the use of this information.

This document includes important information to help you compare the investment options under your retirement plan. If you want additional information about your investment options, you can go to the specific Internet Web site address shown above or use the contact information shown on the "Fee and Investment Disclosure" document. If necessary, use that same contact information to obtain a free paper copy of the information available on the Web site[s].

The cumulative effect of fees and expenses can substantially reduce the growth of your retirement savings. Visit the Department of Labor's Web site for an example showing the long-term effect of fees and expenses at http://www.dol.gov/ebsa/publications/401k\_employee.html. Fees and expenses are only one of many factors to consider when you decide to invest in an option. You may also want to think about whether an investment in a particular option, along with your other investments, will help you achieve your financial goals.



## **Introduction to QSEHRA**

Great news! Your employer is offering you a health benefit called a QSEHRA, which stands for Qualified Small Employer Health Reimbursement Arrangement. It is a special kind of HRA designed specifically for small employers like yours. It is fully funded by your employer (you do not need to add money to your account), and it is designed to reimburse employees for eligible health insurance premiums tax-free in most cases!

The way it works is you purchase an individual health insurance plan that best fits your health needs, you pay for your healthcare costs out-of-pocket, and your employer will reimburse you up to a certain amount each month!

## **Eligibility Requirements**

To receive reimbursements through the QSEHRA, you must have health insurance that qualifies as Minimum Essential Coverage (MEC). Most plans today meet MEC requirements, such as plans purchased from Healthcare.gov, employer group plans, COBRA, TRICARE, Medicare (A or C), Medicaid, and more.

Plans that do not qualify as MEC include: critical illness, indemnity, short-term plans, vision or dental only, and plans that only offer discounts on medical services. If you need to shop for your individual health insurance plan, Take Command Health can point you in the right direction!

## Reimbursements

Each month Take Command Health will send your employer a report telling them how much you claimed for reimbursement. After your employer has reviewed the report, they will reimburse you directly or through your payroll. Please note: reimbursements do not come from Take Command Health.

## Have Questions?

Want to learn more about your small business HRA plan? We have a variety of articles on <u>our blog</u> and <u>help center</u> to help answer many of your questions! You can also contact support anytime via chat directly on our website or via e-mail at <u>support@takecommandhealth.com</u>.



## How to Get Started with Take Command Health

Your company has set up a Qualified Small Employer Health Reimbursement Arrangement (QSEHRA) with Take Command Health. You can now get reimbursed for healthcare costs. Getting set up with Take Command Health is easy!

## Eligibility

In order to be eligible for reimbursements through your company's QSEHRA, you must be covered by a health insurance plan that provides Minimum Essential Coverage (MEC). When you access the Take Command Health member portal, we will ask for proof of your coverage to verify eligibility.

#### 1. Activate Your Account

Follow the instructions in the welcome email from Take Command Health. If you don't see that email, let your employer know, or <u>reset your password</u>, and then log into the <u>Member Portal</u> with the email address your employer used.

#### 2. Purchase Insurance

You'll be responsible for purchasing your own health insurance that qualifies as **Minimum Essential Coverage**. If you don't have health insurance yet, Take Command Health can point you in the right direction to find a plan. If you're already on a plan, you can use that, too!

3. Provide Proof of Coverage

Whether you're already covered by a plan or purchasing a new one, you must <u>provide proof of</u> <u>coverage</u> to get started. Take Command Health will check that your plan qualifies as Minimum Essential Coverage, which is required to receive reimbursements through the QSEHRA.

## Reimbursements

Once we verify your eligibility, then you can begin submitting claims for reimbursement!

1. Set Up Your Premium as an Automatic Recurring Premium

You can <u>submit your monthly premium as a recurring expense</u> on the Member Portal instead of submitting a separate claim each month. By doing that, we'll automatically create a claim for you each month during the calendar year. Don't forget to update this if your premium or coverage changes.

2. Get Reimbursed!

Take Command Health will track and report your reimbursements to your employer each month, and your employer will reimburse you. You can always <u>see the status of your claims</u> on the Member Portal.



# What Premiums Can Be Reimbursed Through QSEHRA?

Through your company's QSEHRA, your employer will reimburse you for your monthly insurance premiums. **You must be covered by a Minimum Essential Coverage (MEC) health insurance plan in order to receive QSEHRA reimbursements.** As long as you are covered by a Minimum Essential Coverage (MEC) health insurance plan, you are eligible to receive reimbursements through QSEHRA for certain types of insurance premiums. However, there are a few types of plans to be aware of that cannot be reimbursed through your company's QSEHRA, even if you have a MEC Plan. Below is an outline of which plans are and are not eligible for reimbursement through QSEHRA.

## **Eligible Premiums**

### **Major Medical Plans**

Major Medical plans are those compliant with the Affordable Care Act (ACA) and qualify as Minimum Essential Coverage. If you purchased your plan through Healthcare.gov or your state's public marketplace, your plan is a Major Medical plan, and your reimbursement through QSEHRA will be tax-free.

### Spouse's Employer Group Plan

If you're covered by your spouse's group plan there are some nuances to know regarding premium reimbursement. First, only the portion of the group premium that is not paid for by your spouse's company is eligible for reimbursement. Second, most group plans are already paid on a pre-tax basis from your spouse's paycheck. This is great! However, the IRS doesn't want you to "double dip" by also getting a pre-tax QSEHRA reimbursement, so your QSEHRA claim for your premium will be paid on a taxable basis. If you can verify that your premium is paid post-tax by your spouse (very rare), then you can still be reimbursed tax-free through QSEHRA!

#### **Government Plans**

Medicare, Medicaid, Tricare, and VA Care are all eligible healthcare plans and qualify as Minimum Essential Coverage. If you are on one of these plans and pay a monthly premium out of pocket, those can be reimbursed through QSEHRA tax-free.

### **Dental Insurance & Vision Insurance Plans**

Monthly premiums paid for individual and dental insurance plans can be reimbursed tax-free through QSEHRA. If you have dental and vision benefits through your spouse's employer, only the portion of the group premium that is not paid for by your spouse's company is eligible for

reimbursement. In addition, if your spouse pays the premiums for your dental and insurance plans pre-tax, you can only be reimbursed for these premiums on a taxable basis.

## **Limited Benefit Plans**

Limited Benefit Plans are usually significantly cheaper than Major Medical plans but only provide a fixed amount of benefits (vs. unlimited benefits). These plans include short-term plans, fixed indemnity plans, accident plans, and any other plan that pays a medical benefit. As long as you also have a Minimum Essential Coverage health plan, and the limited benefit plan pays a medical benefit to the provider (not a cash benefit to you), the premiums on these plans can be reimbursed tax-free through QSEHRA.

## **Health Sharing Plans**

Health Sharing Plans are not technically insurance under the Affordable Care Act, and the "premiums" you pay to be a member of a Sharing Plan, typically referred to as a "monthly share" amount or similar, are not recognized by the IRS as being actual insurance premiums under IRS Section 213(D). For that reason, even though they cannot be reimbursed tax-free through QSEHRA, they can be reimbursed outside of QSEHRA on a taxable basis (included in income). You'll submit reimbursement claims just like everyone else through the Take Command Health platform to get a taxable reimbursement for your monthly share.

## **Ineligible Premiums**

## **Cash Benefit Plans**

Cash Benefit Plans pay you cash if you're sick or injured. These plans are sometimes called Critical Illness, Gap, or Out-of-Pocket plans. The premiums on Cash Benefit Plans are not eligible for reimbursement because these plans by definition do not provide a medical benefit. If you have a policy that provides payments for other than medical care, you can include the premiums for the medical care part of the policy if the charge for the medical part is reasonable. The cost of the medical part must be separately stated in the insurance contract or given to you in a separate statement.

## Other Types of Insurance Plans

Additional insurance policies that do not pay a medical benefit and therefore cannot be reimbursed through QSEHRA include:

- Life insurance policies
- Policies providing payment for loss of earnings
- Policies for loss of life, limb, sight, etc.
- Auto insurance



# What happens to Premium Tax Credits with QSEHRA?

## What is a Premium Tax Credit?

Premium tax credit is a subsidy which is available to those purchasing health insurance from the health insurance marketplace (exchange). The credit provides financial assistance to pay the premiums for the qualified health plan offered through a Marketplace.

## How will my QSEHRA affect my tax credit?

If you are receiving a tax credit from the government to subsidize your monthly premium, in general, the QSEHRA will reduce your eligible tax credit amount dollar for dollar. Basically, you will be exchanging the tax credit from the government with the QSEHRA tax-free reimbursement from your employer. You may still access their tax credits if the benefit is less than the premium tax credit (PTC) available to you, or if you are already not accepting your full benefit.

It's important to note that you can't opt-out of the QSEHRA and still receive your full tax credit. Your eligibility for tax credits is based on the reimbursement amount offered to you, not on the amount you actually receive.

For example, if you are eligible for a \$400 premium tax credit but receives \$300 allowance from their small business HRA, they would be able to use only \$100 of the tax credit. The tax credit can be reduced to zero, but it can't go below zero.

You may or may not already be using your entire tax credit, but the QSEHRA allowance will offset your eligible tax credit amount.

## What should I do?

When you purchase your policy, you should request an adjusted tax credit from the exchange. If you've already purchased your plan, you can contact the exchange to let them know you want to reduce the tax credit that you are receiving.

We can help you understand the numbers and answer your questions about tax credits & QSEHRA. Reach out to <u>support@takecommandhealth.com</u> with your questions!

A friendly reminder: Please note that we at Take Command Health are not licensed tax professionals.

# Why AFLAC?



## "HOW LONG CAN YOU GO WITHOUT A PAYCHECK?"

# AFLAC Advantages...

## <u>CASH</u> benefits are paid directly to YOU

Pays in addition to other insurance

Rate Stability

Affordable - you pick what want and can afford

Can pre-tax the premiums = saving you money

Take the policies with you at the same payroll rates

# Aflac Accident Advantage

**ACCIDENT-ONLY INSURANCE – OPTION 4** 

We've been dedicated to helping provide peace of mind and financial security for 60 years.





## AFLAC ACCIDENT ADVANTAGE

ACCIDENT-ONLY INSURANCE - OPTION 4

Policy Series A36000



## **Be Prepared for Life's Unexpected Mishaps**

Accidents can happen at any time. You could suffer an accidental injury while you are working around the house or walking into work. Or your child may get injured at basketball practice. When an accident happens, it can be costly. Even with major medical insurance, there may be out-of-pocket expenses that you'll have to pay.

In the event of an unexpected injury, Aflac can help protect your personal finances. We provide individuals and families affordable insurance that helps with expenses that may not be covered by major medical insurance. Aflac pays cash benefits directly to you (unless you specify otherwise), so you can use the cash for anything you want. Which means uncovered medical expenses won't break the bank if you are injured.

And since we can process your claim quickly, Aflac helps give you the peace of mind knowing you can spend more time recovering and less time worrying about bills.

#### The facts say you need the protection of the Aflac Accident Advantage insurance policy:



FACT NO. 2

\$5,500

THE AVERAGE MEDICAL EXPENSES FOR AN ACCIDENTAL INJURY.<sup>1</sup>

1 Injury Facts, 2014 Edition, National Safety Council.

#### Understand the difference Aflac can make in your financial security.

Aflac pays cash benefits for covered accidental injuries directly to you, unless assigned. Your own peace of mind and the assurance that your family will have help financially are powerful reasons to consider Aflac.

The financial impact of an accident is often surprising. Most people have expenses after an accident they never thought of before. From out-of-pocket medical costs to a temporary loss of income, your finances may be strained. If you or a family member suffered an accidental injury, can your finances handle it?

#### What does the Aflac Accident Advantage policy include?

- A wellness benefit payable for routine medical exams to encourage early detection and prevention.
- Benefits payable for fractures, dislocations, lacerations, concussions, burns, emergency dental work, eye injuries, and surgical procedures.
- Benefits payable for initial treatment, X-rays, major diagnostic exams, and follow-up treatments.
- Benefits payable for physical, speech, and occupational therapy.
- Daily hospitalization benefits payable for hospital stays, and additional daily benefits paid for stays in a hospital intensive care unit.

#### Why Aflac Accident Advantage may be the right choice for you:

- No underwriting questions to answer<sup>2</sup>
- No coordination of benefits—we pay regardless of any other insurance you may have
- No network restrictions—you choose your own health care provider
- Portable—take the plan with you if you change jobs or retire
- 24-hour accident insurance

#### How it works



The above example is based on a scenario for the Aflac Accident Advantage – Option 4 that includes the following benefit conditions: Ambulance Benefit of \$250 (ground ambulance transportation); Accident Treatment Benefit of \$200 (hospital emergency room treatment with X-rays); Accident Specific-Sum Injuries Benefit of \$2,000 (fractured leg {femur}–open reduction under anesthesia); Initial Accident Hospitalization Benefit of \$1,500; Accident Hospital Confinement Benefit of \$300 (hospitalized for 1 day); Major Diagnostic and Imaging Exams Benefit of \$250 (CT scan); Appliances Benefit of \$350 (wheelchair); Therapy Benefit of \$360 (9 physical therapy treatments); Accident Follow-Up Treatment Benefit of \$240 (6 follow-up treatments); Family Support Benefit of \$20 (hospitalized for 1 day); Family Lodging Benefit of \$150 (hospital and motel/hotel more than 50 miles from residence); and Organized Sporting Activity Benefit of \$1,000.

The policy has limitations and exclusions that may affect benefits payable. For costs and complete details of the coverage, contact your Aflac insurance agent/producer. This brochure is for illustrative purposes only. Refer to the policy for complete benefit details, definitions, limitations, and exclusions.

<sup>2</sup>Association and associate-only accounts have one underwriting question.

## AFLAC ACCIDENT ADVANTAGE - OPTION 4 BENEFIT OVERVIEW

BENEFIT NAME	BENEFIT AMOUNT						
INITIAL ACCIDENT HOSPITALIZATION BENEFIT	\$1,500 when admitted for a hospital confinemen directly to an intensive care unit of a hospital for covered person	t of at least 18 hours or \$2,500 when admitted a covered accident, per calendar year, per					
ACCIDENT HOSPITAL CONFINEMENT BENEFIT	\$300 per day, up to 365 days per covered accid	lent, per covered person					
INTENSIVE CARE UNIT CONFINEMENT BENEFIT	Additional \$500 per day for up to 15 days, per ca	overed accident, per covered person					
ACCIDENT TREATMENT BENEFIT	Payable once per 24-hour period and only once Hospital emergency room with X-ray: \$200 Hospital emergency room without X-ray: \$ Office or facility (other than a hospital emergency Office or facility (other than a hospital emergency)	) 170 gency room) with X-ray: \$150					
AMBULANCE BENEFIT	\$250 ground ambulance transportation or \$1,87	5 air ambulance transportation					
BLOOD/PLASMA/PLATELETS BENEFIT	\$300 once per covered accident, per covered person						
MAJOR DIAGNOSTIC AND IMAGING EXAMS BENEFIT	\$250 per calendar year, per covered person						
ACCIDENT FOLLOW-UP TREATMENT BENEFIT	\$40 for one treatment per day (up to a max of 6 tr	reatments), per covered accident, per covered person					
THERAPY BENEFIT	\$40 for one treatment per day (up to a max of 10	treatments), per covered accident, per covered person					
	Benefits are payable for the medical appliances I	isted below:					
APPLIANCES BENEFIT	Back brace:\$350Wheelchair:\$3Body jacket:\$350Leg brace:\$1Knee scooter:\$350Crutches:\$12	350         Walker: \$120           50         Walking boot: \$120           0         Cane: \$25					
	Payable once per covered accident, per covered	and the second					
PROSTHESIS BENEFIT	\$1,000 once per covered accident, per covered	person					
PROSTHESIS REPAIR OR REPLACEMENT BENEFIT	\$1,000 once per covered person, per lifetime						
REHABILITATION FACILITY BENEFIT	\$200 per day						
HOME MODIFICATION BENEFIT	\$4,000 once per covered accident, per covered person						
ACCIDENT SPECIFIC-SUM INJURIES BENEFITS	DISLOCATIONS.\$120-\$4,500BURNS\$135-\$13,000SKIN GRAFTS.50% of the burns benefit amount paid for the burn involvedFYE INJURIESSurgical repair.\$350Removal of foreign body by a physician \$75LACERATIONSNot requiring sutures\$40Less than 5 centimeters\$90At least 5 cm but not more than 15 cm .\$300Over 15 centimeters\$600FRACTURES\$150-\$4,000CONCUSSION (brain)\$150	EMERGENCY DENTAL WORKBroken tooth repaired with crownBroken tooth resulting in extraction\$160COMACOMA\$12,500PARALYSISQuadriplegiaQuadriplegia\$12,500Paraplegia\$6,250Hemiplegia\$4,750SURGICAL PROCEDURES\$250-\$1,500MISCELLANEOUS SURGICALPROCEDURES\$140-\$350PAIN MANAGEMENT (NON-SURGICAL)Epidural.\$100					
ACCIDENTAL-DEATH BENEFIT INSURED SPOUSE CHILD	\$200,000 \$ \$200,000 \$	Accident         Hazardous Activity Accident           50,000         \$10,000           50,000         \$10,000           15,000         \$5,000					
ACCIDENTAL-DISMEMBERMENT BENEFIT		15,000 \$5,000					
WELLNESS BENEFIT	\$300-\$50,000						
	\$60 once per calendar year						
FAMILY SUPPORT BENEFIT	\$20 per day (up to 30 days), per covered accide						
ORGANIZED SPORTING ACTIVITY BENEFIT	Additional 25% of the benefits payable, limited to	\$1,000 per policy, per calendar year					
CONTINUATION OF COVERAGE BENEFIT	Waives all monthly premiums for up to two mont	hs, if conditions are met					
	Waives all monthly premiums for up to two mont Yes	hs, if conditions are met					
CONTINUATION OF COVERAGE BENEFIT							

REFER TO THE POLICY FOR COMPLETE BENEFIT DETAILS, DEFINITIONS, LIMITATIONS, AND EXCLUSIONS.

## **ACKNOWLEDGMENT OF RECEIPT**

I understand that all items covered in the DLC Employee Handbook, as well as compliance with the Safety and Loss control policy is what is expected of me as part of my job.

I understand that as long as I perform my duties with a good work ethic and follow the company policies I may be eligible for the items listed as benefits. I understand that these items are above and beyond the pay that I earn and they are subject to change.

I have reviewed and was given a copy of the Dave Loden Construction, Inc. Employee Handbook. I understand the contents of the handbook as it is presented. I understand that the document is not all inclusive and is subject to change. I understand that any changes will be given to me in writing. I understand that the contents of this handbook do not constitute an express or implied contract of employment. Dave Loden Construction, Inc. is an AT WILL employer, as defined by Wyoming Statute.

Employee name (Please Print)

Employee Signature\_\_\_\_\_

Date \_\_\_\_\_

## Acknowledgment of Receipt, Understanding, and adherence to Dave Loden Constructions Safety and Loss Control Policy.

I hereby acknowledge receipt of Dave Loden Construction's Safety and Loss control Policy. I have read and understand the policy. I understand that refusal to submit to any portion of this policy may result in disciplinary action up to and including termination.

Initial\_\_\_\_\_

I have reviewed and was given a copy of the Dave Loden Construction, Inc. Substance Abuse Policy. I understand the contents of the policy as it is presented. I understand that the document is not all inclusive and is subject to change. I understand that refusal to submit to any portion of this policy may result in disciplinary action up to and including termination.

Initial\_\_\_\_\_

I recognize that the Company's policy for Safety and Loss Control does not constitute an expressed or implied contract of employment.

EMPLOYEE NAME

(Printed)

EMPLOYEE SIGNATURE

DATE\_\_\_\_\_

# Safety Policy Quiz

This quiz is not all-inclusive or designed to cover all you need to know to be safe. Its purpose is to test that you have thoroughly ready the above safety policy and are informed of the safe practices it establishes.

Name:	Date:

- 1) Who is responsible for maintaining a safe work environment?
  - a. Upper management staff
  - b. Foreman on site
  - c. Laborers and Roofers
  - d. Every employee in the company
- 2) How many rungs (feet) must an extension ladder protrude above the roof level to be considered safe?
  - a. Top of ladder must be flush with top of roof so you can step off over the top
  - b. 1 rung must protrude
  - c. 3 rungs must protrude
  - d. 5 rungs must protrude
- 3) How much Xylene or other chemical can you put into a can for application purposes before it requires a safety label?
  - a. 1 gallon
  - b. ½ gallon
  - c. 1 pint
  - d. NONE
- When is it okay to work without some form of fall protection (adequate parapet, railing, fall arrest system, warning line, safety monitor system, etc.)
  - a. Only for small repairs
  - b. Never
  - c. Only in an emergency repair situation
  - d. Only if you feel really safe doing so
- 5) How many Gallons of gas can you store in a vehicle, in the shop, or in on site?
  - a. 5
  - b. 10
  - c. 15
  - d. 20
- 6) How often will safety meeting be held?
  - a. Yearly
  - b. Monthly
  - c. Weekly
  - d. Daily

- 7) What is the minimum gage wire required for extension cords?
  - a. 8
  - b. 10
  - c. 12
  - d. 14
- 8) When is it okay to operate a power tool or piece of equipment that you have not specifically been trained to use?
  - a. Only when the foreman isn't around
  - b. If no one on-site has been trained
  - c. If it looks really easy
  - d. Never
- 9) What equipment can you fuel up while it is running?
  - a. None
  - b. Only grounded equipment
  - c. Only equipment that stays running throughout the day
  - d. Only equipment without rubber wheels.
- 10) What slope qualifies as "steep slope"?
  - a. 1/12 and greater
  - b. 3/12 and greater
  - c. 4/12 and greater
  - d. 6/12 and greater
- 11) Who must inspect scaffolding for hazards before use?
  - a. The foreman
  - b. The person using the scaffolding
  - c. No One
  - d. The Safety Officer
- 12) How often must your safety training be renewed?
  - a. Annually
  - b. Monthly
  - c. Never
  - d. Always ongoing through weekly trainings and job-start trainings
- 13) Where do you aim a fire extinguisher when trying to put out a fire?
  - a. Over the flames to cover them
  - b. Directly into the biggest flames
  - c. At the base of the flames
  - d. You don't, always evacuate in case of a fire and call emergency help
- 14) When must you wear a seat belt?
  - a. Anytime you are moving in a company owned or leased vehicle or on company time
  - b. When driving on the interstate
  - c. When driving on public roads
  - d. ALL OF THE ABOVE



## **Dave Loden Construction Fall Protection Training Certification**

Name of Person Conducting the training \_\_\_\_\_

Name of Person Receiving Training \_\_\_\_\_

The above named individual, as an employee of Dave Loden Construction, has completed instruction and training on the following items:

- Review of OSHA regulation 1926.500, 1926.501, 1926.502, 1926.503:
  - https://www.osha.gov/pls/oshaweb/owasrch.search\_form?p\_doc\_type=STANDARDS&p\_toc\_lev el=1&p\_keyvalue=1926
- The danger of fall hazards
- Identification of fall hazards
- Identification of when fall protection is necessary
  - Any height or potential fall of 6 feet or greater not protected by a rail of at least 42" in height.
- Proper erection, inspection and maintenance of fall protection devices used by Dave Loden Construction
  - o Fall Arrest Systems
  - Positioning Systems
  - o Guardrail System
  - Warning Line System
- Proper use and limitations of fall protection devices/methods used by Dave Loden Construction
  - o Fall Arrest Systems
    - Anchor
    - Life-Line
    - Rope Grab / Positioning Device
    - Shock absorbing lanyard
    - Harness
  - o Positioning Systems
  - o Guardrail System
  - o Warning Line System
  - Safety Monitoring System
  - o Controlled Access Areas
- The safety monitoring system including the responsibilities and duties of both the safety monitor and workers
- Procedures for protecting those below from overhead dangers
  - Correct procedures for setting up fall protection at height
  - Correct procedures for handling, securement, and storage of materials, tools, equipment at height

Signature of Owner, Safety Officer or Foreman Conducting Training

Signature of Employee

Date \_\_\_\_\_

## Form W-4 (2016)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2016 expires February 15, 2017. See Pub. 505, Tax Withholding and Estimated Tax.

Note: If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

**Exceptions**. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

• Is age 65 or older,

Is blind, or

Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances. Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2016. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

				rksheet (Keep for your records	5.)	
A			can claim you as a depen	dent		A
6	the second se		d have only one job; or		1	
в	Enter "1" if:	You are married, I	have only one job, and yo	ur spouse does not work; or	}	В
		<ul> <li>Your wages from a</li> </ul>	a second job or your spous	e's wages (or the total of both) are \$1	,500 or less.	
С	Enter "1" for you	r <b>spouse.</b> But, you	may choose to enter "-0-"	if you are married and have either a	a working spouse	e or more
			p you avoid having too lit			C
D	Enter number of	dependents (other	than your spouse or yours	self) you will claim on your tax return		D
E	Enter "1" if you v	vill file as head of he	ousehold on your tax retu	rn (see conditions under Head of he	ousehold above)	E
F				re expenses for which you plan to o		F
	(Note: Do not inc	clude child support	payments. See Pub. 503,	Child and Dependent Care Expense	s, for details.)	
G	Child Tax Credit	t (including addition	al child tax credit). See Pu	b. 972, Child Tax Credit, for more in	formation.	
	<ul> <li>If your total inc</li> </ul>	ome will be less that	n \$70,000 (\$100,000 if ma	rried), enter "2" for each eligible chil	d; then less "1" i	f you
			ess "2" if you have five or			
	<ul> <li>If your total incor</li> </ul>	ne will be between \$7	0,000 and \$84,000 (\$100,00	00 and \$119,000 if married), enter "1" fo	or each eligible chi	ld G
н	Add lines A throug	h G and enter total he	re. (Note: This may be differ	ent from the number of exemptions you	claim on your tax	return.) > H
	For accuracy,	<ul> <li>If you plan to iter and Adjustment</li> </ul>	mize or claim adjustments s Worksheet on page 2.	to income and want to reduce your v	vithholding, see th	ne Deductions
	complete all	• If you are single	and have more than one j	ob or are married and you and your	spouse both wor	k and the combined
	worksheets that apply.	earnings from all	jobs exceed \$50,000 (\$20,	,000 if married), see the Two-Earners	Multiple Jobs W	orksheet on page 2
	that apply.		oo little tax withheld.	op here and enter the number from lin		
	tment of the Treasury al Revenue Service	Whether you an	e entitled to claim a certain n	ing Allowance Certific umber of allowances or exemption from hay be required to send a copy of this for	withholding is	омв №. 1545-0074 2016
1	Your first name ar		Last name	ay be required to serie a copy of this for	in to the ino.	
		id middle millar	Last hane		2 Your socia	al security number
_	Home address (n					
	Home address (nu	mber and street or rural		3 Single Married M	larried, but withhold	at higher Single rate.
		mber and street or rural		Note: If married, but legally separated, or	larried, but withhold spouse is a nonresident	at higher Single rate. alien, check the "Single" bo
	Home address (nu City or town, state	mber and street or rural		Note:         If married, but legally separated, or           4         If your last name differs from th	larried, but withhold spouse is a nonresident at shown on your s	at higher Single rate. alien, check the "Single" bo ocial security card,
-	City or town, state	mber and street or rural	route)	Note:         If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ►
5	City or town, state	mber and street or rural , and ZIP code f allowances you are	route) e claiming (from line <b>H</b> abo	Note:         If married, but legally separated, or           4         If your last name differs from th           check here.         You must call 1-80           ove or from the applicable worksheet	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2)	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ▶ 5
6	City or town, state Total number o Additional amo	mber and street or rural a, and ZIP code f allowances you an unt, if any, you wan	route) e claiming (from line <b>H</b> abo t withheld from each payo	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80           ove or from the applicable worksheek	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2)	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ▶ [ 5 6 \$
	City or town, state Total number o Additional amo I claim exempti	mber and street or rural , and ZIP code f allowances you an unt, if any, you wan on from withholding	route) e claiming (from line <b>H</b> abo t withheld from each payo for 2016, and I certify tha	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80           ove or from the applicable worksheet           check           the image of the following conditional conditinteree conditenteree conditinteree conditional conditional condit	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2)	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ▶ [ 5 6 \$
6	City or town, state Total number o Additional amo I claim exempti • Last year I ha	mber and street or rural , and ZIP code f allowances you are unt, if any, you wan on from withholding d a right to a refund	route) e claiming (from line <b>H</b> about t withheld from each payor for 2016, and I certify that of <b>all</b> federal income tax	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80           ove or from the applicable worksheet           check	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2)  tions for exempti ty, and	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ▶ [ 5 6 \$
6	City or town, state Total number o Additional amo I claim exempti • Last year I ha • This year I ex	mber and street or rural , and ZIP code f allowances you ar unt, if any, you wan on from withholding d a right to a refund pect a refund of <b>all</b>	route) e claiming (from line <b>H</b> about t withheld from each payor for 2016, and I certify that of <b>all</b> federal income tax federal income tax withhe	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80           ove or from the applicable worksheet           theck	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2) tions for exempti ty, and iability.	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ▶ [ 5 6 \$
6 7	City or town, state Total number of Additional amo I claim exempti • Last year I ha • This year I ex If you meet bot	mber and street or rural , and ZIP code f allowances you ar unt, if any, you wan on from withholding d a right to a refund pect a refund of <b>all</b> h conditions, write "	route) e claiming (from line <b>H</b> about t withheld from each payor for 2016, and I certify that of <b>all</b> federal income tax federal income tax withhe Exempt" here	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80 pove or from the applicable worksheet theck           at I meet both of the following condition withheld because I had no tax liabilities and the tax liabilities and the tax liabilities and the tax liabilities and tax liabilities an	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2) tions for exempti ty, and iability.	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ► [ 5 6 \$ on.
6 7 Unde	City or town, state Total number o Additional amo I claim exempti • Last year I ha • This year I ex If you meet bot er penalties of perju	mber and street or rural , and ZIP code f allowances you ar unt, if any, you wan on from withholding d a right to a refund pect a refund of <b>all</b> h conditions, write "	route) e claiming (from line <b>H</b> about t withheld from each payor for 2016, and I certify that of <b>all</b> federal income tax federal income tax withhe Exempt" here	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80           ove or from the applicable worksheet           theck	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2)  tions for exempti ty, and iability.	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ► [ 5 6 \$ on.
6 7 Unde	City or town, state Total number o Additional amo I claim exempti • Last year I ha • This year I ex If you meet bot er penalties of perju	mber and street or rural , and ZIP code f allowances you are unt, if any, you wan on from withholding d a right to a refund pect a refund of <b>all</b> h conditions, write " ry, I declare that I hav	route) e claiming (from line <b>H</b> about t withheld from each payor for 2016, and I certify that of <b>all</b> federal income tax federal income tax withhe Exempt" here	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80 pove or from the applicable worksheet theck           at I meet both of the following condition withheld because I had no tax liabilities and the tax liabilities and the tax liabilities and the tax liabilities and tax liabilities an	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2) tions for exempti ty, and iability. ► 7 belief, it is true, c	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ► [ 5 6 \$ on.
6 7 Unde	City or town, state Total number or Additional amo I claim exempti • Last year I ha • This year I ex If you meet bot er penalties of perju <b>loyee's signature</b> form is not valid ur	mber and street or rural a, and ZIP code f allowances you are unt, if any, you wan on from withholding d a right to a refund pect a refund of <b>all</b> h conditions, write " ry, I declare that I hav	route) e claiming (from line <b>H</b> about t withheld from each payor for 2016, and I certify that of <b>all</b> federal income tax federal income tax withhe Exempt" here	Note: If married, but legally separated, or           4         If your last name differs from the check here. You must call 1-80           cove or from the applicable worksheet           check	larried, but withhold spouse is a nonresident at shown on your s 0-772-1213 for a re et on page 2) tions for exempti ty, and iability. ▶ 7 belief, it is true, c Date ▶	at higher Single rate. alien, check the "Single" bo ocial security card, eplacement card. ► [ 5 6 \$ on.

FORTH W	-4 (2016)			Page
	Deductions and Adju		_	
Note	: Use this worksheet only if you plan to itemize deductions or clair	n certain credits or adjustments to income.		
1	Enter an estimate of your 2016 itemized deductions. These include qualifying ho and local taxes, medical expenses in excess of 10% (7.5% if either you or you income, and miscellaneous deductions. For 2016, you may have to reduce your it and you are married filing jointly or are a qualifying widow(er); \$285,350 if you are not head of household or a qualifying widow(er); or \$155,650 if you are married fi	me mortgage interest, charitable contributions, state r spouse was born before January 2, 1952) of your emized deductions if your income is over \$311,300 a head of household: \$259,400 if you are single and	1	\$
1.00	\$12,600 if married filing jointly or qualifying widow(er)	1		
2	Enter: { \$9,300 if head of household \$6,300 if single or married filing separately	}	2	\$
3			3	\$
4	Enter an estimate of your 2016 adjustments to income and any add		4	\$
5	Add lines 3 and 4 and enter the total. (Include any amount for Withholding Allowances for 2016 Form W-4 worksheet in Pub. 50	or credits from the Converting Credits to	5	\$
6	Enter an estimate of your 2016 nonwage income (such as divider		6	\$
7			7	\$
8	Divide the amount on line 7 by \$4,050 and enter the result here.		8	·
9	Enter the number from the Personal Allowances Worksheet, lin		9	
10	Add lines 8 and 9 and enter the total here. If you plan to use the	Two-Earners/Multiple Jobs Worksheet,		-
6.00	also enter this total on line 1 below. Otherwise, stop here and er		10	
	Two-Earners/Multiple Jobs Worksheet (Se	ee Two earners or multiple jobs on pag	e 1.)	
	: Use this worksheet only if the instructions under line H on page 1			
1	Enter the number from line H, page 1 (or from line 10 above if you used the		1	
2	Find the number in Table 1 below that applies to the LOWEST	paying job and enter it here. However, if		
	you are married filing jointly and wages from the highest paying j than "3"	ob are \$65,000 or less, do not enter more		
			2	
3	If line 1 is more than or equal to line 2, subtract line 2 from I "-0-") and on Form W-4, line 5, page 1. Do not use the rest of thi	ine 1. Enter the result here (if zero, enter		
Noto	If line 1 is less than line 2, enter "-0-" on Form W-4, line 5, page		3	
	figure the additional withholding amount necessary to avoid a ye			
4	Enter the number from line 2 of this worksheet			
5	Enter the number from line 1 of this worksheet			
6	Subtract line 5 from line 4		6	
7	Find the amount in Table 2 below that applies to the HIGHEST p		7	\$
8	Multiply line 7 by line 6 and enter the result here. This is the add		8	\$
9	Divide line 8 by the number of pay periods remaining in 2016. For exa weeks and you complete this form on a date in January when there	are 25 pay periods remaining in 2016. Enter		
_	the result here and on Form W-4, line 6, page 1. This is the additional		9	\$
	Table 1	Table 2		

	lat	Die 1		Table 2						
Married Filing	Jointly	All Other	rs	Married Filing Jointly All Others			rs			
If wages from LOWEST paying job are -	- line 2 above paying job are - line 2 above paying job are - line 7 above				Enter on line 7 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above			
\$0 - \$6,000 6,001 - 14,000 14,001 - 25,000 25,001 - 27,000 27,001 - 35,000 35,001 - 44,000 44,001 - 55,000 55,001 - 65,000 65,001 - 75,000 75,001 - 80,000 100,001 - 115,000 115,001 - 130,000 140,001 - 150,000	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	\$0 - \$9,000 9,001 - 17,000 17,001 - 26,000 26,001 - 34,000 34,001 - 44,000 44,001 - 75,000 75,001 - 85,000 85,001 - 110,000 110,001 - 125,000 125,001 - 140,000 140,001 and over	0 1 2 3 4 5 6 7 8 9 10	\$0 - \$75,000 75,001 - 135,000 135,001 - 205,000 205,001 - 360,000 360,001 - 405,000 405,001 and over	\$610 1,010 1,130 1,340 1,420 1,600	\$0 - \$38,000 38,001 - 85,000 85,001 - 185,000 185,001 - 400,000 400,001 and over	\$610 1,010 1,130 1,340 1,600			

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

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You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



U.S. Citizenship and Immigration Services

► START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)										
Last Name (Family Name) First Na			ame <i>(Given Name)</i>			Middle Initial	Other Last Names Used (if any)			
Address (Street Number and Name)			Apt. Ni	umber	City or Town			State	ZIP Code	
Date of Birth (mm/dd/yyyy)     U.S. Social Security Number     Employee's E-mail Address     Employee's Telephone Number						elephone Number				

## I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

#### I attest, under penalty of perjury, that I am (check one of the following boxes):

1. A citizen of the United States		
2. A noncitizen national of the United States (See instructions)		
3. A lawful permanent resident (Alien Registration Number/USCIS Number):		
4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy):		
Some aliens may write "N/A" in the expiration date field. (See instructions)		
Aliens authorized to work must provide only one of the following document numbers to complet An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign I 1. Alien Registration Number/USCIS Number: OR 2. Form I-94 Admission Number: OR 3. Foreign Passport Number:		QR Code - Section 1 Do Not Write In This Space
Country of Issuance:		
Signature of Employee	Today's Date (mm/dd/)	уууу)
Preparer and/or Translator Certification (check one):		

I did not use a preparer or translator. A preparer(s) and/or translator(s) assisted the employee in completing Section 1.

#### (Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

## I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator			Today's D	Date (mm/c	ld/yyyy)
Last Name (Family Name)		First Name (Given Name)			
Address (Street Number and Name)	City or	Town		State	ZIP Code

STOP



### **Employment Eligibility Verification**

#### **Department of Homeland Security**

#### U.S. Citizenship and Immigration Services

Section 2. Employer or (Employers or their authorized rep. must physically examine one docu of Acceptable Documents.")	resentative mus	st complete and sign Sec	tion 2 within 3 b	usiness days of the	employ			
Employee Info from Section 1	Last Name (F	amily Name)	First Name	(Given Name)	M.I.	Citizenship/Immigration Status		
List A	-		ist B			List C		
Identity and Employment Aut	horization	ld	entity			Employment Authorization		
Document Title		Document Title		Docur	nent Tit	le		
Issuing Authority		Issuing Authority			Issuing Authority			
Document Number		Document Number			Document Number			
Expiration Date (if any) (mm/dd/yy	уу)	Expiration Date (if any	ı) (mm/dd/yyyy)	Expira	ation Da	ate (if any) (mm/dd/yyyy)		
Document Title								
Issuing Authority		Additional Informa	tion			QR Code - Sections 2 & 3 Do Not Write In This Space		
Document Number								

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy):

Expiration Date (if any) (mm/dd/yyyy)

Expiration Date (if any) (mm/dd/yyyy)

Document Title

**Issuing Authority** 

Document Number

(See instructions for exemptions)

Signature of Employer or Authorized Representative			Today's Date (mm/dd/yyyy)			Title of Employer or Authorized Representative				
Last Name of Employer or Authorized Represent	ative	First Name of Employer or Authorized Representative				Employer's Business or Organization Name				
Employer's Business or Organization Address ( <i>Street Number and Name</i> ) City or					Town	) wn			ZIP Code	
Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)										
A. New Name (if applicable)					E	B. Date of Rehire (if applicable)				
Last Name <i>(Family Name)</i>	First Na	First Name (Given Name) Middle Initial			al I	Date (mm/dd/yyyy)				
C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.										
Document Title			Document Number				E	Expiration Date (if any) (mm/dd/yyyy)		
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.										
Signature of Employer or Authorized Representative Today's D			Date (mm/c	ld/yyyy)	Name	Name of Employer or Authorized Representative			epresentative	

## LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization	DR	LIST B Documents that Establish Identity AN	1D	LIST C Documents that Establish Employment Authorization
2.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa		<ul> <li>Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>ID card issued by federal, state or local government agencies or entities,</li> </ul>	1.	<ul> <li>A Social Security Account Number card, unless the card includes one of the following restrictions:</li> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ul>
4.	Employment Authorization Document that contains a photograph (Form I-766)		provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	2.	
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status: <b>a.</b> Foreign passport; and	4	<ul> <li>School ID card with a photograph</li> <li>Voter's registration card</li> <li>U.S. Military card or draft record</li> <li>Military dependent's ID card</li> </ul>	3.	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	<ul> <li>b. Form I-94 or Form I-94A that has the following:</li> <li>(1) The same name as the passport; and</li> </ul>	7	<ul> <li>U.S. Coast Guard Merchant Mariner Card</li> </ul>	4. 5.	Native American tribal documentU.S. Citizen ID Card (Form I-197)
	<ul> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ul>		<ul> <li>Native American tribal document</li> <li>Driver's license issued by a Canadian government authority</li> </ul>	6.	Identification Card for Use of Resident Citizen in the United States (Form I-179)
			For persons under age 18 who are unable to present a document listed above:		Employment authorization document issued by the Department of Homeland Security
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	1	<ol> <li>School record or report card</li> <li>Clinic, doctor, or hospital record</li> <li>Day-care or nursery school record</li> </ol>		

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.



Date\_\_\_\_\_

I

\_(printed name)

and employee of Dave Loden Construction Inc. herby authorize Dave Loden Construction Inc. to withhold any money due them from my paycheck(s).

Money due may be due to, but not limited to any of the following reasons:

- Deliberate vandalism or destruction of company property
- Damage incurred to company property in my care/possession due to negligence
- Advancement of pay or loans received from Dave Loden Construction
- Unauthorized charges to accounts Dave Loden Construction accounts or Cards

I further agree that if I become delinquent or behind, reasonable/encured attorney fees and collection costs will be added to the balance owed to Dave Loden Construction Inc.

\_\_\_\_\_(signature)



Dave Loden Construction INC Credit Card Use Agreement

Please sign below indicating that you have read and understand the following rules, regulations and restrictions regarding the use of a Dave Loden Construction Company Credit Card. If at any time you are entrusted with a company credit card; either one assigned to you, or one given to you for a temporary basis the following rules or restrictions apply for its use. Violation of these rules will result in deduction of pay to cover the cost of purchases as well as disciplinary action up to and including termination of employment.

\*You must turn in all receipts for all credit card purchases weekly!

\*special, and unique exceptions may be made on a case by case basis, only if approved in advance by Erick Loden

The Card May be used for:

- Motels for crew members the night prior to a day they are scheduled to work
- Gas for company vehicles when used for company use (not personal use of company vehicles)
- Gas in personal vehicles when you have agreed to use your vehicle for company use (this does not include getting to or from a regular job site)
- Materials needed on a DLC site
- Tools, incidentals, and safety equipment that the company typically provides (not personal hand tools)
- Ice and Water for the job site
- Food for the crew \*only when approved or instructed to do so by company management

The Card may not be used for (to include by not exclusive to):

- Gas for personal use
- Motels outside of the night prior to scheduled work days
- Food
- Personal tools or building materials
- Any other personal use or items

Agreed (Sign)

Date \_\_\_\_\_

Print



Dave Loden Construction INC Vehicle Assignment Agreement

Company Trucks/Vehicles are available to you (only with permission / any time (circle one)).

Please use a company credit card to purchase fuel for all business related activities.

You must personally pay for an appropriate amount of fuel for any personal use of the vehicle. \*With Prior Approval

\*In order to use the vehicle for personal use, you must carry and have proof of either an unowned vehicle insurance policy or a personal vehicle insurance policy that includes unowned vehicle coverage.

You are responsible for:

- Keeping the truck clean of garbage, spills or general debris on a daily basis (inside and outside)
- Protecting the truck from damage
  - Interior seats from tears or damage by tools
  - o Exterior from damage from load
- Reporting any necessary repairs or damage to be fixed
- Informing your superior when a vehicle needs service
- Following all state and federal laws concerning the operation of the vehicle
- \*Maintaining an unowned vehicle insurance policy or a personal vehicle insurance policy that includes unowned vehicle coverage (Required to ever use a company vehicle for personal use)

Agreed (Sign)	 	Date	
Print	 		