



LINCOLN UNIVERSITY – RENOVATIONS TO CRESSON HALL  
ELECTRIC CONSTRUCTION

COMPANY NAME: Cedar Electric Inc

MAILING ADDRESS: 528 Cheltenham Court, Lititz PA 17543

CONTACT PERSON: Doug Coonan

CONTACT PHONE #: 717-945-7982

CONTACT EMAIL: [doug@cedarelectricinc.om](mailto:doug@cedarelectricinc.om)



**Department of General Services**  
**Lincoln University**

**Prime Contractor Project Team**

**Doug Coonan**  
Project Executive

**Brody Longstaff**  
Project Manager

**Joseph Sterkenberg**  
Project Superintendent

**Joshua Palmatier**  
Project Electrician

**Subcontractor**  
Security System

**Subcontractor**  
Data System

**Subcontractor**  
Fire Alarm System



## **Project Team**

### **Brody Longstaff – Project Manager**

- Responsible for planning and overseeing complete installation of the job site
- Communicate and manage various crew sizes, which include encouraging and educating apprentices.
- Review and compare all shop drawing submittals for rough-in installation and purchasing comparison.
- Plan and coordinate start up and demonstrations with owner

### **Joseph Sterkenberg – Project Superintendent**

- Communicate and coordinate installation with other trades such as light fixtures, distribution equipment, theatrical and dimming systems, cable trays, branch/feeder racks, masonry and slab work
- Develop safe and efficient work environments to allow everyone the opportunity to contribute at their highest level.
- Check all materials received on site for damages and comparisons against purchase orders

### **Joshua Palmatier -Electrician**

- Installation, such as light fixtures, distribution equipment, theatrical and dimming systems, cable trays, branch/feeder racks, masonry and slab work

# Brody Longstaff

brody@cedarelectricinc.com

## Professional Summary

Commercial Electrician with thirty-three years of diversified experience. Expertise includes complete supervision of job sites including but not limited to submittal review, takeoff comparisons, feeder and distribution review (wire/conduit size and phase calculations) generating "RFI's", pricing change orders, layout from slab to punch list and developing an exciting work environment.

## Work History

Cedar Electric, Inc.

**Project Manager/Job site superintendent**

Lititz, PA

December 2017 to Present

## Education

**ABC**

Lancaster, PA, Lancaster

Four-year apprenticeship program

1992

**Vocational School - Electrical**

Bolivar, NY

Two-year electrical program

1988

## License

Master Electrical License

City of Harrisburg Electrical License

## Clearances

FBI Finger Printing

Child Abuse

Criminal Background

## Courses

ATC (Johnson Control)

Personal Development

OSHA safety training (30 hour course)

Management Seminar (Harrisburg Area Community College)

Human Relations (Zig/Zigler / Dale Carnegie)

Leadership and Management (four year in house)

Claims Management

Practical application to the NEC

OSHA CPR & First Aid

Business Writing (L.M. Malistic & Associates)

## Field Work

Responsible for planning and overseeing complete installation of the job site.

Review and compare all shop drawing submittals for rough-in installation and purchasing comparison.

Review and adjust site progression schedules from general contractors and outside consultants.

Communicate and manage various crew sizes, which include encouraging and educating apprentices. Develop safe and efficient work environments to allow everyone the opportunity to contribute at their highest level.

Communicate and coordinate installation with other trades such as light fixtures, distribution

equipment, theatrical and dimming systems, cable trays, branch/feeder racks, masonry and slab work.

Plan and coordinate start up and demonstrations with owner.

## PROJECT EXPERIENCE:

Construct ICU Med Surgical Unit- Lebanon VAMC, Lebanon, Pennsylvania

Completed: February 2020

\$9,103,248.00

Chiller Replacement – Lebanon VAMC, Lebanon, Pennsylvania

Completed: October 2020

\$1,789,412.00



## **Joseph R. Sterkenburg**

Electrical Field Foreman / Journeyman Electrician

### **WORK EXPERIENCE**

#### **Electrical Field Foreman**

Cedar Electric Inc – Lititz, PA – 2018 – Present

##### Foreman Responsibilities:

- Responsible for the on-time and on budget installation of all electrical
- Responsible for planning and supervising the day-to-day management of a team of field electricians and apprentices (staff up to 20). Planned daily work assignments, accurately tracked hours worked as well as various other administrative requirements
- Read and maintain accurate on-site blueprints and isometric drawings and track all updates
- Interact daily with office Contract Manager regarding job progress, change orders, supplies, etc.
- Represent the electrical project in weekly General Contractor status meetings with other on-site trades and project leaders
- Responsible for on-time delivery and storage of jobsite materials
- Basic tool and equipment maintenance
- Responsible for maintaining a safe, clean and orderly environment

Foreman at the following facilities: **Lincoln University**, Arrowhead Elementary School

#### **Owner / Operator**

Sterk Electric – Wilmington, DE – 2015 – 2018

Foreman at the following facilities: Mt. Cuba Center, Myer & Myer Realty, Home Advisor

#### **Electrical Field Foreman**

Electri-Tech Inc – Dorothy, NJ – 2013 – 2015

Foreman at the following facilities: West Chester University, Dover Air Force Base

#### **Journeyman Electrician**

SP Construction & Design, Inc – Leola, PA – 2012 – 2013

##### **Journeyman Responsibilities:**

- Responsible for the on-time installation of all electrical including (but not limited to) alarm and detection systems; clock/program systems; electric heating cables; electrical controls; all exterior and interior and emergency lighting; public address systems; standby power generator system; television system; camera system; motion detectors; transfer switches; voice & data systems; service/distribution; electric/sliding doors and gates.

**Jobsites:** President James Buchanan’s historical home, Wheatland; Lancaster General Hospital Cancer Center

#### **Electrical Field Foreman**

Electri-Tech Inc – Dorothy, NJ – 1999 – 2012

Foreman at the following facilities: Monroe High School, Lindenwold High School, Absegami High School, **Lincoln University**, Montgomery County Community College, Harrilton High School

#### **Electrical Field Foreman**

Ray Angelini, Inc. (RAI) - Sewell, NJ – 1990-1999

Foreman at the following facilities: Philadelphia High School for Girls; Belmont Pumping Station; Downingtown High School; University of Delaware Science Building

### **EDUCATION**

#### **Master Electrician / Graduate of 4-year apprenticeship program**

George C. Wallace Community College (WCCS)

# Joshua Palmatier

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## SKILLS

I have worked as a journeyman electrician for nearly 15 years and have skills encompassing all aspects of the trade.

I am also skilled at internet marketing/online advertising.

## EXPERIENCE

### **Cyprum Solutions, East Petersburg, PA** - *Electrician*

July 2008 - 2017

- Commercial Electrical Construction
- Participated in the new construction of Phoenixville State Correctional Facility
- Participated in the remodel of several local schools

### **Mad Cow Marketing, New Providence, PA** - *Owner*

August 2017 - Present

- Website design and development
- Help companies build their presence on social media
- Specialize in online advertising (Google, Facebook, Instagram)

### **Cedar Electric, Lititz, PA** - *Electrician*

October 2020 - Present

- Commercial Electrical Construction
- Participated in the new construction and remodel of several schools
- Participated in both new and remodel construction and Lebanon VA Hospital

## EDUCATION

### **ABC Keystone, Manheim, PA** - *Journeyman Electrician*

Sept 2008 - May 2012

I completed four years of schooling and received *my* journeyman's certificate.

**Douglas M. Coonan**  
Cedar Electric, Inc.  
528 Cheltenham Court  
Lititz, PA. 17543  
(717) 945-7982

**Experience:**

**2002 - Present      President/CEO  
Project Manager, Safety Officer**      Cedar Electric, Inc.

Responsibilities Include:  
Manage day to day operations of Cedar  
Manage project up to \$1 million  
Networking with customers & future partners  
Contract Negotiations  
Perform random safety inspections on projects  
Update site supervisors on safety requirements and site findings  
Financials

**1995 - 2002      Estimator, Project Manager**      Cedar Electric, Inc.

Responsibilities Include:  
Scheduling of subcontractors and material deliveries  
Maintaining daily logs and preparing daily reports  
Holding safety and progress meetings  
Gathering information required for bidding projects  
Preparing bid folders and bid schedules  
Ordering bid bonds and tracking subcontractors progress

**1992 - 1995      On Site Supervisor**      Cedar Electric, Inc.

Responsibilities Include  
Scheduling of subcontractors and material deliveries  
Maintaining daily logs and preparing daily reports  
Holding safety and progress meetings

**1989 - 1992      Electrician**      Cedar Electric, Inc.

Responsibilities Include  
Performing all aspects of electrical construction and general labor on a vast array of projects

**Education:**

High School:      Manheim Central High      General/Academic Diploma 1990  
CEO Series:      Associated Builders & Contractors      2017  
OSHA 10 Hour           2006  
OSHA 30 Hour           2008  
OSHA CPR & First Aid           2022



This building is undergoing a complete gut and build back from the existing structure. A new service from an existing medium voltage to a transformer, a switchboard and all new panels. My general use power with lighting and emergency light, all new systems including Fire Alarm, IT, security, Audio/Video access control. We have also included power for plumbing and HVAC systems.

Ninety percent of the work we complete are schools and just like Lincoln University these schools need their building for students' education. Cedar Electric knows the importance of meeting or exceeding schedule. We are always prepared to increase manpower and put in additional hours in order to stay ahead of the schedule. We also take the team approach with other prime contractors and the owner to discuss possible issues with plenty of time to come up with a solution so the schedule is not impacted.

Cedar Electric has completed the Renovations to Azikiwe Nkrumah Hall at Lincoln University in 2020. We have also completed several renovations at the Air National Guard Fort Indiantown Gap in Annville PA. These were old stick-built buildings that were converted into new office spaces and living quarters for the officers of the National Guard. We have also successfully installed a complete Fire Alarm System in all of the building at Eisenhower Farm in Gettysburg PA. The Eisenhower Farm included the main house, the smaller care takers home and all the outbuilding including the barns. These are just a few of the older style stick-built properties we have work on.

We have completed the Azikiwe Nkrumah Hall Renovation in 2020. We complete the Mary Green Hall Renovation at Lebanon Valley College in 2018. We have also completed several school district renovations where multiple school buildings were located on the same property and were active during the construction period.

Ninety-five percent of our contracts are multi-prime contracts. We have been very successful with our team and approach to these contracts as everyone must be on the same page in order to keep the job on schedule, resolve all issues quickly and effectively. Weekly foreman's meetings are necessary to prevent unforeseen issues from cropping up and problem-solving issues when they are discovered.

As with all of our renovation projects we are tasked with installing new state of the art equipment into existing building and connecting to their exiting systems. Sometimes the integration goes smoothly and sometimes the exiting system is just that old the replacement is required. We are always prepared for the worst-case scenario when it comes to integration. Sometimes the existing system needs a major overhaul or just replaced to allow for the connection of the new equipment.

As I have previously mentioned ninety-five percent of our work is in schools. Either renovations or new construction but both of them always require new AV systems to be installed. Some are totally new and others require integration to the existing system. Some of them high end systems are built into soffits, stage screens or retractable screens in or upscale spaces. While others are more practical and permanently mounted with easy access and operation.



baron insurance group  
auto home life business

November 8, 2021

RE: Cedar Electric Inc. Experience Modification  
528 Cheltenham Court., Lititz PA 17543

To Whom it May Concern:

Cedar Electric Inc has an Experience Modification/Merit factor of .868 effective 4/1/2021-4/1/2022. The previous Experience Modification/Merit factor was .882 and was effective from 4/1/2020-4/1/2021.

Sincerely,

A handwritten signature in black ink that reads "Erica Kellenberger".

Erica L. Kellenberger  
Commercial Lines Agent  
[ericae@baroninsurancegroup.com](mailto:ericae@baroninsurancegroup.com)  
717-665-2985

20 East High Street ● Manheim, PA 17545 ● 717.665.2985 ● Fax: 717.664.2587  
48 Queen Road, Suite 4 ● Gordonville, PA 17529 ● 717.768.0244 ● Fax: 717.664.2587  
[baroninsurancegroup.com](http://baroninsurancegroup.com)



baron insurance group

auto home life business

March 16, 2019

RE: Experience Modification  
Cedar Electric Inc  
528 Cheltenham Court  
Lititz PA 17543

To Whom it May Concern,

Cedar Electric Inc has an Experience Modification/**Merit Rating** Factor of .950 effective 4/1/2019-2020.

Sincerely,

A handwritten signature in cursive script that reads "Rachel Wiegmann".

Rachel Wiegmann, CIC, CISR  
Commercial Account Executive  
[rachels@baroninsurancegroup.com](mailto:rachels@baroninsurancegroup.com)  
(717)665-2985

20 East High Street • Manheim, PA 17545 • 717.665.2985 • Fax: 717.664.2587  
48 Queen Road, Suite 4 • Gordonville, PA 17529 • 717.768.0244 • Fax: 717.664.2587  
[baroninsurancegroup.com](http://baroninsurancegroup.com)



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March 4, 2018

RE: Experience Modification  
Cedar Electric Inc  
528 Cheltenham Court  
Lititz PA 17543

To Whom it May Concern,

Cedar Electric Inc has an Experience Modification Factor of .8640 effective 4/1/2018-2019.

Sincerely,

A handwritten signature in black ink that reads "Rachel Wiegmann".

Rachel Wiegmann, CIC, CISR  
Commercial Account Executive  
[rachel@baroninsurancegroup.com](mailto:rachel@baroninsurancegroup.com)  
(717)665-2985

20 East High Street • Manheim, PA 17545 • 717.665.2985 • Fax: 717.664.2587  
48 Queen Road, Suite 4 • Gordonville, PA 17529 • 717.768.0244 • Fax: 717.664.2587  
[baroninsurancegroup.com](http://baroninsurancegroup.com)



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auto home life business

July 13, 2017

RE: Experience Modification  
Cedar Electric Inc  
528 Cheltenham Court  
Lititz PA 17543

To Whom it May Concern,

Cedar Electric Inc has an Experience Modification Factor of .8500 effective 4/1/2017-2018.

Sincerely,

A handwritten signature in cursive script that reads "Rachel Wiegmann".

Rachel Wiegmann, CIC, CISR  
Commercial Account Executive  
[rachels@baroninsurancegroup.com](mailto:rachels@baroninsurancegroup.com)  
(717)665-2985

20 East High Street • Manheim, PA 17545 • 717.665.2985 • Fax: 717.664.2587  
48 Queen Road, Suite 4 • Gordonville, PA 17529 • 717.768.0244 • Fax: 717.664.2587  
[baroninsurancegroup.com](http://baroninsurancegroup.com)



APPENDIX F

PRIME CONTRACTOR  
QUALIFICATION STATEMENT

**APPENDIX F**  
**PRIME CONTRACTOR**  
**QUALIFICATION STATEMENT**

**COVER SHEET**

DGS Project Name Lincoln University Cresson Hall Renovations  
DGS Project Number C-1101-0054.4

Check One:

- Corporation,  
 Partnership,  
 Individual,  
 Joint Venture,  
 Other \_\_\_\_\_

Name of Firm Cedar Electric Inc  
Address 528 Cheltenham Court, Lititz PA 17543  
Principal Office 528 Cheltenham Court, Lititz PA 17543  
Owner or Authorized Representative Doug Coonan

**SECTION 1 – INFORMATION ON FIRM**

1.1 Background Information

a) How many years has the firm been in business? \_\_\_\_\_ 55 \_\_\_\_\_

b) How many years has the firm been doing business in proposed contract field? \_\_\_\_\_ 55 \_\_\_\_\_

Under what former names has the firm conducted business?  
None \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Provide an **Attachment 1** to this Qualifications Statement identifying all jurisdictions in which the firm is licensed or otherwise qualified to do business. List and provide copies of any business or trade licenses, certificates or registrations (to the extent that they apply to the Contract Work) held by the firm.

d) If the firm is a corporation, provide the following information:

Date of incorporation \_\_\_\_\_ 1967 \_\_\_\_\_

State of incorporation \_\_\_\_\_ Pennsylvania \_\_\_\_\_

President's name \_\_\_\_\_ Doug Coonan \_\_\_\_\_

Vice President's name(s) \_\_\_\_\_

Secretary's name \_\_\_\_\_ Tanya Coonan \_\_\_\_\_

Treasurer's name \_\_\_\_\_ Doug Coonan \_\_\_\_\_

e) If the firm is a partnership, provide the following information:

Date of formation \_\_\_\_\_

Type of partnership \_\_\_\_\_

Names of partners \_\_\_\_\_

f) If the firm is individually owned, provide the following information:

Date of formation \_\_\_\_\_

Name of owner \_\_\_\_\_

g) If the form of the firm is other than those listed above, describe it and name the principals:  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 2 - EXPERIENCE AND PERFORMANCE**

2.1 General

- a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 2019 \$ 9,826,195.00

Year 2020 \$ 10,129,830.00

Year 2021 \$ 10,960,570.00

- b) Identify the percentage of work on similar projects the firm typically performs with its own work force \_\_\_\_\_
- c) List the categories of work that the firm normally performs with its own forces on similar projects.

2.2 Project Experience and References

Submit as **Attachment 2** to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:

- 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects that are similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- i. Name of project, type of project and location
- ii. Description of the project and relevance of work to the Contract Work
- iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e-mail address.
- iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- vi. As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as **Attachment 3** to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

- a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1: 2021 \_\_\_\_\_ .868

Year 2: 2020 \_\_\_\_\_ .882

Year 3: 2019 \_\_\_\_\_ .950 \_\_\_\_\_

b) Provide the firm's Total Lost Workday Incidence Rate (LWDIR) for the past three years, beginning with the most recent year available:

Year 1: 2021 \_\_\_\_\_ 0 \_\_\_\_\_

Year 2: 2020 \_\_\_\_\_ 0 \_\_\_\_\_

Year 3: 2019 \_\_\_\_\_ 0 \_\_\_\_\_

\*LWDIR Rate = Number of Lost Time Injuries & Illnesses x 200,000 ÷ Total Hours Worked

c) Provide the firm's Recordable Incidence Rate (RIR) for the past three years:

Year 1: 2021 \_\_\_\_\_ 3.472 \_\_\_\_\_

Year 2: 2020 \_\_\_\_\_ 0 \_\_\_\_\_

Year 3: 2019 \_\_\_\_\_ 0 \_\_\_\_\_

\*RIR Rate = Number of Injuries x 200,000 ÷ Total Hours Worked

d) Provide in an **Attachment 4** to this Qualifications Statement a list of any health or safety citations issued by federal or state agencies for serious or willful violations issued in the past 3 years. Include a separate statement for any such violations and include the citation number, a brief description of the violation and the amount of penalty, if any, for each violation and current status of violation.

### **SECTION 3 - REQUIRED DISCLOSURES**

The firm shall answer the following questions with regard to the past three (3) years. If any question is answered in the affirmative, the firm shall submit in an **Attachment 5** to this Qualifications Statement, for each affirmative answer, a written explanation which shall provide details concerning the matter in question, including applicable dates, locations, names of projects/project owners and current status of any such matter.

3.1 Has the firm ever been debarred or suspended from doing business with any federal, state or local government agency or private entity?

Yes \_\_\_ No x

3.2 Is the firm currently or has the firm been otherwise prohibited from doing business with any federal, state or local government agency or private entity?

Yes \_\_\_ No x

3.3 Has the firm been denied prequalification (not including short listing), declared non-responsible, or otherwise declared ineligible to submit bids or proposals for work by any federal, state or local government agency or private entity?

Yes \_\_\_ No x

3.4 Has the firm defaulted, been terminated for cause or otherwise failed to complete any project that it was awarded?

Yes \_\_\_ No x

3.5 Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project?

- Yes \_\_\_ No x
- 3.6 Has the firm had any business or professional license, registration, certificate or certification suspended or revoked?  
Yes \_\_\_ No x
- 3.7 Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers?  
Yes \_\_\_ No x
- 3.8 Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company?  
Yes \_\_\_ No x
- 3.9 Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency?  
Yes \_\_\_ No x
- \*Note: information regarding health and safety violations is addressed in a previous section.
- 3.10 Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?  
Yes \_\_\_ No x
- 3.11 Has the firm been the subject to any bankruptcy proceeding?  
Yes \_\_\_ No x

#### **SECTION 4 - REQUIRED REPRESENTATIONS**

In submitting this Qualifications Statement, along with the representations and authorizations listed on the Proposal Signature page and in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.
- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.

- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.




DO NOT DETACH

- (1) Master electricians and master plumbers are further required to provide this Bureau proof that their liability and workman's compensation insurance is in effect.
- (2) No work is to be undertaken until a proper permit is issued barring emergency situations that occur when the Bureau is not open for business (in which case the permit must be obtained on the next business day).
- (3) The permit must list all work to be performed.
- (4) All plumbers & electricians working on a job must be licensed.
- (5) An apprentice may be on a job only if a Journeyman or Master Electrician is present at all times.
- (6) Permit fees not paid within 15 days of permit issuance shall preclude the issuance of additional permits until such fees are paid.
- (7) Newly installed panels will not be accepted as meeting code compliance unless each branch circuit is clearly marked as required by Section 110.02 of the current code.
- (8) Bureau of Codes Administration room number is 205 and the phone number is 255-6553.
- (9) All electrical work done in the City of Harrisburg must be inspected by a licensed electrical inspection agency.

TRACKING # 2021106104 -7 AMOUNT \$125.00

ROBERT J TOBIAS  
 513 MAIN ST FRONT  
 ANNVILLE PA 17003



2021106104 -7  
 LICENSE ISSUED BY THE CITY OF HARRISBURG

CATEGORY **ELECTRICAL** MASTER

LICENSE NO. 00921 EXPIRES ON DEC 31, 2022

**PAID**

INDIVIDUAL SHOWN IS LICENSED FOR THE ABOVE SHOWN TRADE IN HARRISBURG, PA

ROBERT J TOBIAS NOV 24 2021  
 513 MAIN ST FRONT  
 ANNVILLE PA 17003 AAA

SIGNATURE *Robert J Tobias*  
NOT VALID UNLESS STAMPED BY CITY TREASURY





## SCHEDULE B - WORK HISTORY

Project Name	Owner	Architect	Scope of Work	Contract Value	Completed With Own Force
Brandywine Campus Alterations	Chester County Intermediate Unit	Breslin Ridyard	Electrical Service, Lighting, Systems and General Power	\$827,500.00	90%
Rose Tree Media School District	Rose Tree Media School District	Marotta Main Architects	Electrical Service and Generator	\$778,000.00	100%
1605 W. Main Street Renovations	Montgomery County Intermediate Unit	Fidevia	Electrical Service, Lighting, Systems and General Power	\$2,190,764.63	90%
Renovate & Expand Azikiwe Nkruman Hall	Lincoln Univeristy	Kimmel Bogrette Architects	Electrical Service, Lighting, Systems and General Power	\$308,000.00	95%
Good Hope 9th Gr Academy / Hampden ES	Cumberland Valley School District	Barton Associates	Electrical Service, Lighting, Systems and General Power	\$2,515,000.00	90%



# OSHA's Form 300A (Rev. 01/2004)

## Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases away from work	Total number of cases with days restriction	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0	0
(G)	(H)	(I)	(J)	(K)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(L)	(M)

### Injury and Illness Types

Total number of... (N)	(1) Injury	0	(4) Poisoning	0
	(2) Skin Disorder	0	(5) Hearing Loss	0
	(3) Respiratory Condition	0	(6) All Other Illnesses	0

### Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 88 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA, Office of Statistics, Room N-3844, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



Year 2019

U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

### Establishment information

Your establishment name CEDAR ELECTRIC INC.  
 Street 528 CHELTENHAM COURT  
 City LITITZ State PA Zip 17543  
 Industry description (e.g., Manufacture of motor truck trailers)  
ELECTRICAL CONSTRUCTION CONTRACTOR  
 Standard Industrial Classification (SIC), if known (e.g., SIC 3715)  
 OR North American Industrial Classification (NAICS), if known (e.g., 336212)

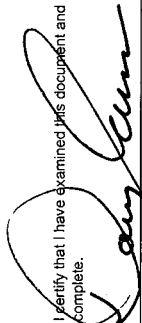
### Employment information

Annual average number of employees 33  
 Total hours worked by all employees last year 33916.25

### Sign here

Knowingly falsifying this document may result in a fine.

I verify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

  
 Company executive

President  
 Title

717-945-7982  
 Phone  
 January 1 2020  
 Date

# OSHA's Form 301 Injuries and Illnesses Incident Report

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

## Information about the employee

- 1) Full Name \_\_\_\_\_
- 2) Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- 3) Date of birth \_\_\_\_\_
- 4) Date hired \_\_\_\_\_
- 5)  Male  Female

## Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_  
\_\_\_\_\_

- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- 8) Was employee treated in an emergency room?  
 Yes  No

- 9) Was employee hospitalized overnight as an in-patient?  
 Yes  No

## Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
  - 11) Date of injury or illness \_\_\_\_\_
  - 12) Time employee began work \_\_\_\_\_ AM/PM
  - 13) Time of event \_\_\_\_\_ AM/PM  Check if time cannot be determined
- \*Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or SSNs) in the following fields.

- \*14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."

- \*15) **What happened?** Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."

- \*16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected. Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."

- \*17) **What object or substance directly harmed the employee?** Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.

- 18) **If the employee died, when did death occur?** Date of death \_\_\_\_\_

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Completed by	Doug Coonan
Title	President
Phone	717-945-7982
Date	1/1/2020

Public reporting burden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information unless it displays a current valid OMB control number. If you have any comments about this estimate or any other aspects of this data collection, including suggestions for reducing this burden, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



# OSHA's Form 300A (Rev. 01/2004)

## Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of cases other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

### Injury and Illness Types

Total number of... (M)	(1) Injury	(4) Poisoning	(2) Skin Disorder	(5) Hearing Loss	(3) Respiratory Condition	(6) All Other Illnesses
0	0	0	0	0	0	0

**Establishment information**

Your establishment name CEDAR ELECTRIC INC.  
 Street 528 CHELTENHAM COURT  
 City LUITZ State PA Zip 17543

Industry description (e.g., Manufacture of motor truck trailers)  
ELECTRICAL CONSTRUCTION CONTRACTOR

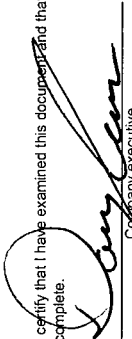
Standard Industrial Classification (SIC), if known (e.g., SIC 3715)  
 OR North American Industrial Classification (NAICS), if known (e.g., 336212)  
2 3 8 2 1 0

**Employment information**

Annual average number of employees 42  
 Total hours worked by all employees last year 52879.92

**Sign here**  
 Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

  
 Company executive  
 Title president  
 Date January 1, 2021  
 Phone 717-945-7982

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

# Injuries and Illnesses Incident Report

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



### Information about the employee

- 1) Full Name \_\_\_\_\_
- 2) Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- 3) Date of birth \_\_\_\_\_
- 4) Date hired \_\_\_\_\_
- 5)  Male  Female

### Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_

- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- 8) Was employee treated in an emergency room?  
 Yes  No
- 9) Was employee hospitalized overnight as an in-patient?  
 Yes  No

### Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness \_\_\_\_\_
- 12) Time employee began work \_\_\_\_\_ AM/PM
- 13) Time of event \_\_\_\_\_ AM/PM  Check if time cannot be determined  
\*Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or SSNs) in the following fields.

- \*14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."  
\_\_\_\_\_
- \*15) **What happened?** Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."  
\_\_\_\_\_

- \*16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected. Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."  
\_\_\_\_\_
- \*17) **What object or substance directly harmed the employee?** Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.  
\_\_\_\_\_

- 18) **If the employee died, when did death occur?** Date of death \_\_\_\_\_

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains

If you need additional copies of this form, you may photocopy and use as many as you need.

Completed by	Doug Coonan
Title	President
Phone	717-945-7982
Date	1/1/2021



OSHA's Form 300 (Rev. 01/2004)

Year 2021

U.S. Department of Labor Occupational Safety and Health Administration

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work, activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Form approved OMB no. 1218-0176

Establishment name

Cedar Electric Inc.

City Lititz

State PA

Identify the person

Describe the case

Classify the case

Table with columns: (A) Case No., (B) Employee's Name, (C) Job Title, (D) Date of injury or onset of illness, (E) Where the event occurred, (F) Describe injury or illness, (G) Death, (H) Days away from work, (I) Job transfer or restriction, (J) Remained at work, (K) Away From Work, (L) On job transfer or restriction, (M) Injury, (N) Check the "injury" column or choose one type of illness, (1) Injury, (2) Skin Disorder, (3) Respiratory Condition, (4) Poisoning, (5) Hearing Loss, (6) All other illnesses.

Page totals

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.





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U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

## Information about the employee

- 1) Full Name Joseph T LaFore
- 2) Street 117 Nickel Drive  
City Bechtelsville State PA Zip 19505
- 3) Date of birth 10/8/1994
- 4) Date hired 2/15/2021
- 5)  Male  
 Female

## Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_

- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Completed by	<u>Amanda Rusk</u>
Title	<u>Assistant</u>
Phone	<u>717-945-7982</u>
Date	<u>1/3/2022</u>

## Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness 3/1/2021
- 12) Time employee began work 6am AM/PM
- 13) Time of event 11am AM/PM  Check if time cannot be determined

\*Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or SSNs) in the following fields.

- \*14) What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry";  
pulling wire

- \*15) What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement";  
"Worker developed soreness in wrist over time."  
hit elbow on a duct strap while pulling wire

- \*16) What was the injury or illness? Tell us the part of the body that was affected and how it was affected. Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."  
laceration on right elbow

- \*17) What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.  
duct strap

- 18) If the employee died, when did death occur? Date of death \_\_\_\_\_

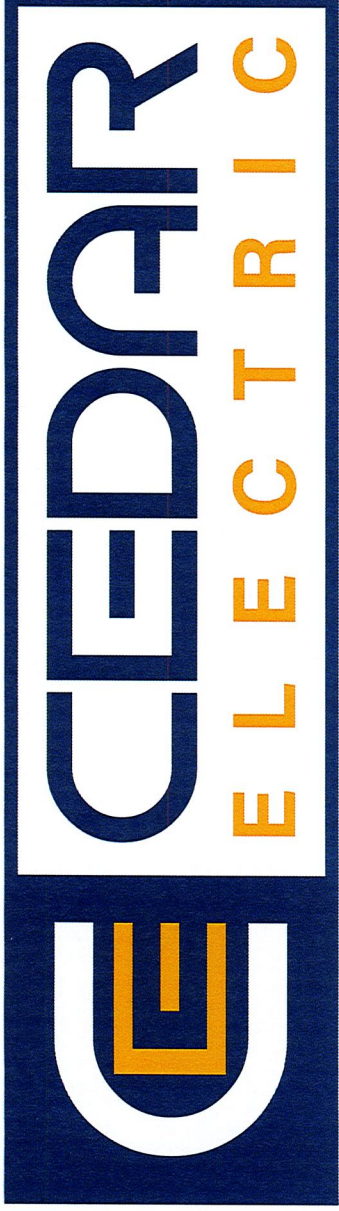
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September 20, 2022

Lincoln University – Renovations to Cresson Hall

**Re: Qualifications Statement - Safety Program**

This serves to verify that Cedar Electric Inc. has had no citations or violations for illnesses nor injuries for the 3- year period prior to the date of this bid submission for the Lincoln University Renovations to Cresson Hall.

A handwritten signature in black ink, appearing to read 'Doug Coonan', is written over a faint, light blue circular watermark.

Doug Coonan  
Corporate Safety Officer

APPENDIX G

DESIGNATED CRITICAL WORK  
QUALIFICATIONS STATEMENT

**APPENDIX G  
DESIGNATED CRITICAL WORK  
QUALIFICATIONS STATEMENT**

**COVER SHEET**

DGS Project Name Lincoln University Cresson Hall Renovations

DGS Project Number C-1101-0054.4

**DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.**

Check One Work item for which this Qualification Statement is being submitted:

General Construction (.1 contract)

- Masonry
- Slate Roofing
- Interior & Exterior Millwork

HVAC Construction (.2 contract)

- Testing, Adjusting and Balancing
- Geothermal System
- Building Automation Systems

Plumbing Construction (.3 contract)

- Sump Pumps & Alarm Systems
- Fire Protection Systems with pumps

Electrical Construction (.4 contract)

- Audio Visual
- Security Systems

Name of Firm Cedar Electric Inc

Address 528 Cheltenham Court, Lititz PA 17543

Principal Office 528 Cheltenham Court, Lititz PA 17543

Owner or Authorized Representative Doug Coonan

**SECTION 1 – FIRM INFORMATION**

1.1 Background Information

- a) How many years has the firm been in business? \_\_\_\_\_ 55
- b) How many years has the firm been doing business in proposed contract field? \_\_\_\_\_ 55

Under what former names has the firm conducted business?

\_\_\_\_\_ None \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Identify all jurisdictions in which the firm is licensed or otherwise qualified to do business.

\_\_\_\_\_ Pennsylvania \_\_\_\_\_  
\_\_\_\_\_ Harrisburg \_\_\_\_\_

d) If the firm is a corporation, provide the following information:

Date of incorporation \_\_\_\_\_ 1967 \_\_\_\_\_  
State of incorporation \_\_\_\_\_ Pennsylvania \_\_\_\_\_  
President's name \_\_\_\_\_ Doug Coonan \_\_\_\_\_  
Vice President's name(s) \_\_\_\_\_  
Secretary's name \_\_\_\_\_ Tanya Coonan \_\_\_\_\_  
Treasurer's name \_\_\_\_\_ Doug Coonan \_\_\_\_\_

e) If the firm is a partnership, provide the following information:

Date of formation \_\_\_\_\_  
Type of partnership \_\_\_\_\_  
Names of partners \_\_\_\_\_

f) If the firm is individually owned, provide the following information:

Date of formation \_\_\_\_\_  
Name of owner \_\_\_\_\_

g) If the form of the firm is other than those listed above, describe it and name the principals:

\_\_\_\_\_  
\_\_\_\_\_

## SECTION 2 - EXPERIENCE AND PERFORMANCE

### 2.1 General

- a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 2019 \$ 9,826,195.00

Year 2020 \$ 10,129,830.00

Year 2021 \$ 10,960,570.00

- b) Identify the percentage of work on similar projects the firm typically performs with its own work force 90%
- c) List the categories of work that the firm normally performs with its own forces on similar projects.

Low Voltage Electrical

### 2.2 Project Experience and References

Submit as **Attachment 1** to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:

- 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e-mail address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- xii. As available, performance ratings of the work evaluated by owner or owner's representative.

### 2.3 Contractor Safety Record

Submit as **Attachment 2** to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

- a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1: 2021 .868

Year 2: 2020 .882

Year 3:        2019        \_\_\_\_\_        .950 \_\_\_\_\_

b) Provide the firm's Total Lost Workday Incidence Rate (LWDIR) for the past three years, beginning with the most recent year available:

Year 1:        2021        \_\_\_\_\_        0 \_\_\_\_\_

Year 2:        2020        \_\_\_\_\_        0 \_\_\_\_\_

Year 3:        2019        \_\_\_\_\_        0 \_\_\_\_\_

\*LWDIR Rate = Number of Lost Time Injuries & Illnesses x 200,000 ÷ Total Hours Worked

c) Provide the firm's Recordable Incidence Rate (RIR) for the past three years:

Year 1:        2021        \_\_\_\_\_        3.472 \_\_\_\_\_

Year 2:        2020        \_\_\_\_\_        0 \_\_\_\_\_

Year 3:        2019        \_\_\_\_\_        0 \_\_\_\_\_

\*RIR Rate = Number of Injuries x 200,000 ÷ Total Hours Worked

d) Provide in an **Attachment 3** to this Qualifications Statement a list of any health or safety citations issued by federal or state agencies for serious or willful violations issued in the past 3 years. Include a separate statement for any such violations and include the citation number, a brief description of the violation and the amount of penalty, if any, for each violation and current status of violation.

### **SECTION 3 - REQUIRED DISCLOSURES**

The firm shall answer the following questions with regard to the past three (3) years. If any question is answered in the affirmative, the firm shall submit in an **Attachment 5** to this Qualifications Statement, for each affirmative answer, a written explanation which shall provide details concerning the matter in question, including applicable dates, locations, names of projects/project owners and current status of any such matter.

- 3.1 Is the firm currently debarred or suspended from doing business with any federal, state or local government agency or private entity?  
 Yes \_\_\_ No x
- 3.2 Has the firm ever been debarred or suspended from doing business with any federal, state or local government agency or private entity?  
 Yes \_\_\_ No x
- 3.3 Is the firm currently or has the firm been otherwise prohibited from doing business with any federal, state or local government agency or private entity?  
 Yes \_\_\_ No x
- 3.4 Has the firm been denied prequalification (not including short listing), declared non-responsible, or otherwise declared ineligible to submit bids or proposals for work by any federal, state or local government agency or private entity?  
 Yes \_\_\_ No x
- 3.5 Has the firm defaulted, been terminated for cause or otherwise failed to complete any project that it was awarded?



Yes \_\_\_ No x

3.6 Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project?

Yes \_\_\_ No x

3.7 Has the firm had any business or professional license, registration, certificate or certification suspended or revoked?

Yes \_\_\_ No x

3.8 Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers?

Yes \_\_\_ No x

3.9 Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company?

Yes \_\_\_ No x

3.10 Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency?

Yes \_\_\_ No x

\*Note: information regarding health and safety violations is addressed in a previous section.

3.11 Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?

Yes \_\_\_ No x

3.12 Has the firm been the subject to any bankruptcy proceeding?

Yes \_\_\_ No x

#### **SECTION 4 - REQUIRED REPRESENTATIONS**

In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.

4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.

4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.

- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.

APPENDIX G

DESIGNATED CRITICAL WORK  
QUALIFICATIONS STATEMENT

**APPENDIX G  
DESIGNATED CRITICAL WORK  
QUALIFICATIONS STATEMENT**

**COVER SHEET**

DGS Project Name Lincoln University Cresson Hall Renovations

DGS Project Number C-1101-0054.4

**DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.**

Check One Work item for which this Qualification Statement is being submitted:

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- Masonry
- Slate Roofing
- Interior & Exterior Millwork

HVAC Construction (.2 contract)

- Testing, Adjusting and Balancing
- Geothermal System
- Building Automation Systems

Plumbing Construction (.3 contract)

- Sump Pumps & Alarm Systems
- Fire Protection Systems with pumps

Electrical Construction (.4 contract)

- Audio Visual
- Security Systems

Name of Firm Cedar Electric Inc

Address 528 Cheltenham Court, Lititz PA 17543

Principal Office 528 Cheltenham Court, Lititz PA 17543

Owner or Authorized Representative Doug Coonan

**SECTION 1 – FIRM INFORMATION**

1.1 Background Information

- a) How many years has the firm been in business? \_\_\_\_\_ 55
- b) How many years has the firm been doing business in proposed contract field? \_\_\_\_\_ 55

Under what former names has the firm conducted business?

\_\_\_\_\_ None \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Identify all jurisdictions in which the firm is licensed or otherwise qualified to do business.

\_\_\_\_\_ Pennsylvania \_\_\_\_\_  
\_\_\_\_\_ Harrisburg \_\_\_\_\_

d) If the firm is a corporation, provide the following information:

Date of incorporation \_\_\_\_\_ 1967 \_\_\_\_\_  
State of incorporation \_\_\_\_\_ Pennsylvania \_\_\_\_\_  
President's name \_\_\_\_\_ Doug Coonan \_\_\_\_\_  
Vice President's name(s) \_\_\_\_\_  
Secretary's name \_\_\_\_\_ Tanya Coonan \_\_\_\_\_  
Treasurer's name \_\_\_\_\_ Doug Coonan \_\_\_\_\_

e) If the firm is a partnership, provide the following information:

Date of formation \_\_\_\_\_  
Type of partnership \_\_\_\_\_  
Names of partners \_\_\_\_\_

f) If the firm is individually owned, provide the following information:

Date of formation \_\_\_\_\_  
Name of owner \_\_\_\_\_

g) If the form of the firm is other than those listed above, describe it and name the principals:

\_\_\_\_\_  
\_\_\_\_\_

## SECTION 2 - EXPERIENCE AND PERFORMANCE

### 2.1 General

- a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 2019 \$ 9,826,195.00

Year 2020 \$ 10,129,830.00

Year 2021 \$ 10,960,570.00

- b) Identify the percentage of work on similar projects the firm typically performs with its own work force 90%
- c) List the categories of work that the firm normally performs with its own forces on similar projects.

Low Voltage Electric

### 2.2 Project Experience and References

Submit as **Attachment 1** to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:

- 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e-mail address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- xii. As available, performance ratings of the work evaluated by owner or owner's representative.

### 2.3 Contractor Safety Record

Submit as **Attachment 2** to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

- a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1: 2021 .868

Year 2: 2020 .882

Year 3:        2019        \_\_\_\_\_        .950

b) Provide the firm's Total Lost Workday Incidence Rate (LWDIR) for the past three years, beginning with the most recent year available:

Year 1:        2021        \_\_\_\_\_        0

Year 2:        2020        \_\_\_\_\_        0

Year 3:        2019        \_\_\_\_\_        0

\*LWDIR Rate = Number of Lost Time Injuries & Illnesses x 200,000 ÷ Total Hours Worked

c) Provide the firm's Recordable Incidence Rate (RIR) for the past three years:

Year 1:        2021        \_\_\_\_\_        3.472

Year 2:        2020        \_\_\_\_\_        0

Year 3:        2019        \_\_\_\_\_        0

\*RIR Rate = Number of Injuries x 200,000 ÷ Total Hours Worked

d) Provide in an **Attachment 3** to this Qualifications Statement a list of any health or safety citations issued by federal or state agencies for serious or willful violations issued in the past 3 years. Include a separate statement for any such violations and include the citation number, a brief description of the violation and the amount of penalty, if any, for each violation and current status of violation.

### **SECTION 3 - REQUIRED DISCLOSURES**

The firm shall answer the following questions with regard to the past three (3) years. If any question is answered in the affirmative, the firm shall submit in an **Attachment 5** to this Qualifications Statement, for each affirmative answer, a written explanation which shall provide details concerning the matter in question, including applicable dates, locations, names of projects/project owners and current status of any such matter.

- 3.1 Is the firm currently debarred or suspended from doing business with any federal, state or local government agency or private entity?  
Yes \_\_\_ No x
- 3.2 Has the firm ever been debarred or suspended from doing business with any federal, state or local government agency or private entity?  
Yes \_\_\_ No x
- 3.3 Is the firm currently or has the firm been otherwise prohibited from doing business with any federal, state or local government agency or private entity?  
Yes \_\_\_ No x
- 3.4 Has the firm been denied prequalification (not including short listing), declared non-responsible, or otherwise declared ineligible to submit bids or proposals for work by any federal, state or local government agency or private entity?  
Yes \_\_\_ No x
- 3.5 Has the firm defaulted, been terminated for cause or otherwise failed to complete any project that it was awarded?

- Yes \_\_\_ No x
- 3.6 Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project?  
Yes \_\_\_ No x
- 3.7 Has the firm had any business or professional license, registration, certificate or certification suspended or revoked?  
Yes \_\_\_ No x
- 3.8 Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers?  
Yes \_\_\_ No x
- 3.9 Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company?  
Yes \_\_\_ No x
- 3.10 Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency?  
Yes \_\_\_ No x
- \*Note: information regarding health and safety violations is addressed in a previous section.
- 3.11 Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?  
Yes \_\_\_ No x
- 3.12 Has the firm been the subject to any bankruptcy proceeding?  
Yes \_\_\_ No x

#### **SECTION 4 - REQUIRED REPRESENTATIONS**

- In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.
- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.



- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.



### SCHEDULE B - WORK HISTORY

Project Name	Owner	Architect	Scope of Work	Contract Value	Completed With Own Force
Brandywine Campus Alterations	Chester County Intermediate Unit	Breslin Ridyard	Electrical Service, Lighting, Systems and General Power	\$827,500.00	90%
Rose Tree Media School District	Rose Tree Media School District	Marotta Main Architects	Electrical Service and Generator	\$778,000.00	100%
1605 W. Main Street Renovations	Montgomery County Intermediate Unit	Fidevia	Electrical Service, Lighting, Systems and General Power	\$2,190,764.63	90%
Renovate & Expand Azikiwe Nkruman Hall	Lincoln Univeristy	Kimmel Bogrette Architects	Electrical Service, Lighting, Systems and General Power	\$308,000.00	95%
Good Hope 9th Gr Academy / Hampden ES	Cumberland Valley School District	Barton Associates	Electrical Service, Lighting, Systems and General Power	\$2,515,000.00	90%



# OSHA's Form 300A (Rev. 01/2004)

## Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases away from work	Total number of cases with days with job transfer or restriction	Total number of cases other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

### Injury and Illness Types

Total number of... (M)	(1) Injury	0	(4) Poisoning	0
	(2) Skin Disorder	0	(5) Hearing Loss	0
	(3) Respiratory Condition	0	(6) All Other Illnesses	0

### Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 88 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA, Office of Statistics, Room N-3844, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



Year 2019

U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

### Establishment information

Your establishment name CEDAR ELECTRIC INC.  
 Street 528 CHELTENHAM COURT  
 City LITITZ State PA Zip 17543  
 Industry description (e.g., Manufacture of motor truck trailers)  
ELECTRICAL CONSTRUCTION CONTRACTOR  
 Standard Industrial Classification (SIC), if known (e.g., SIC 3715)  
 OR North American Industrial Classification (NAICS), if known (e.g., 336212)

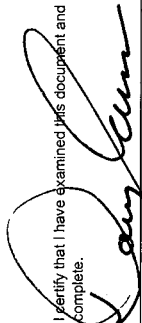
### Employment information

Annual average number of employees 33  
 Total hours worked by all employees last year 33916.25

### Sign here

Knowingly falsifying this document may result in a fine.

I verify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

  
 Company executive

President  
 Title

717-945-7982  
 Phone  
 January 1 2020  
 Date

# OSHA's Form 301 Injuries and Illnesses Incident Report

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

## Information about the employee

- 1) Full Name \_\_\_\_\_
- 2) Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- 3) Date of birth \_\_\_\_\_
- 4) Date hired \_\_\_\_\_
- 5)  Male  Female

## Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_  
\_\_\_\_\_

- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- 8) Was employee treated in an emergency room?  
 Yes  No

- 9) Was employee hospitalized overnight as an in-patient?  
 Yes  No

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Completed by	Doug Coonan
Title	President
Phone	717-945-7982
Date	1/1/2020

## Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness \_\_\_\_\_
- 12) Time employee began work \_\_\_\_\_ AM/PM
- 13) Time of event \_\_\_\_\_ AM/PM  Check if time cannot be determined

\*Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or SSNs) in the following fields.

- \*14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."

- \*15) **What happened?** Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."

- \*16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected. Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."

- \*17) **What object or substance directly harmed the employee?** Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.

- 18) **If the employee died, when did death occur?** Date of death \_\_\_\_\_

Public reporting burden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information unless it displays a current valid OMB control number. If you have any comments about this estimate or any other aspects of this data collection, including suggestions for reducing this burden, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



# OSHA's Form 300A (Rev. 01/2004)

## Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of cases other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

### Injury and Illness Types

Total number of... (M)	(1) Injury	(4) Poisoning	(2) Skin Disorder	(5) Hearing Loss	(3) Respiratory Condition	(6) All Other Illnesses
0	0	0	0	0	0	0

**Establishment information**

Your establishment name CEDAR ELECTRIC INC.  
 Street 528 CHELTENHAM COURT  
 City LUITZ State PA Zip 17543

Industry description (e.g., Manufacture of motor truck trailers)  
ELECTRICAL CONSTRUCTION CONTRACTOR

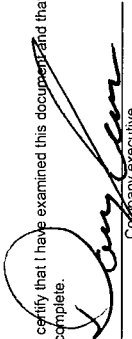
Standard Industrial Classification (SIC), if known (e.g., SIC 3715)  
 OR North American Industrial Classification (NAICS), if known (e.g., 336212)  
2 3 8 2 1 0

**Employment information**

Annual average number of employees 42  
 Total hours worked by all employees last year 52879.92

**Sign here**  
 Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

  
 Company executive  
 Title president  
 Date January 1, 2021  
 Phone 717-945-7982

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

# Injuries and Illnesses Incident Report

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



### Information about the employee

- 1) Full Name \_\_\_\_\_
- 2) Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- 3) Date of birth \_\_\_\_\_
- 4) Date hired \_\_\_\_\_
- 5)  Male  Female

### Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_

- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- 8) Was employee treated in an emergency room?  
 Yes  No
- 9) Was employee hospitalized overnight as an in-patient?  
 Yes  No

Completed by	Doug Coonan
Title	President
Phone	717-945-7982
Date	1/1/2021

### Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness \_\_\_\_\_
- 12) Time employee began work \_\_\_\_\_ AM/PM
- 13) Time of event \_\_\_\_\_ AM/PM  Check if time cannot be determined  
\*Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or SSNs) in the following fields.

\*14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."

\*15) **What happened?** Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."

\*16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected. Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."

\*17) **What object or substance directly harmed the employee?** Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.

18) **If the employee died, when did death occur?** Date of death \_\_\_\_\_

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.





OSHA's Form 300 (Rev. 01/2004)

Year 2021

U.S. Department of Labor Occupational Safety and Health Administration

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work, activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Form approved OMB no. 1218-0176

Establishment name

Cedar Electric Inc.

City Lititz

State PA

Identify the person

Describe the case

Classify the case

Table with columns: (A) Case No., (B) Employee's Name, (C) Job Title, (D) Date of injury or onset of illness, (E) Where the event occurred, (F) Describe injury or illness, (G) Death, (H) Days away from work, (I) Job transfer or restriction, (J) Remained at work, (K) Away From Work, (L) On job transfer or restriction, (M) Injury, (N) Check the "injury" column or choose one type of illness, (1) Injury, (2) Skin Disorder, (3) Respiratory Condition, (4) Poisoning, (5) Hearing Loss, (6) All other illnesses.

Page totals

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

# OSHA's Form 300A (Rev. 01/2004)

## Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases away from work	Total number of cases with days with job transfer or restriction	Total number of cases with job transfer or restriction	Total number of other recordable cases
0 (G)	0 (H)	0 (I)	0 (J)	0

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0 (K)	0 (L)

### Injury and Illness Types

Total number of... (M)	(1) Injury	(2) Skin Disorder	(3) Respiratory Condition	(4) Poisoning	(5) Hearing Loss	(6) All Other Illnesses
1	0	0	0	0	0	0

### Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 38 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



Year 2021

U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

### Establishment information

Your establishment name CEDAR ELECTRIC INC.

Street 528 CHELTENHAM COURT

City LITITZ State PA Zip 17543

Industry description (e.g., Manufacture of motor truck trailers)  
ELECTRICAL CONSTRUCTION CONTRACTOR

Standard Industrial Classification (SIC), if known (e.g., SIC 3715)

OR North American Industrial Classification (NAICS), if known (e.g., 336212)

2 3 8 2 1 0

### Employment information

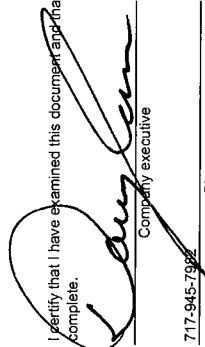
Annual average number of employees 24

Total hours worked by all employees last year 57606

### Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

  
Company executive

president

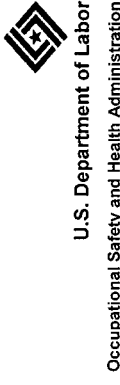
Title

717-945-7982 Phone

January 3 2022

Date

# OSHA's Form 301 Injuries and Illnesses Incident Report



Form approved OMB no. 1218-0176

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

## Information about the employee

- 1) Full Name Joseph T LaFore
- 2) Street 117 Nickel Drive
- City Bechtelsville State PA Zip 19505
- 3) Date of birth 10/8/1994
- 4) Date hired 2/15/2021
- 5)  Male  Female

## Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_

- 7) If treatment was given away from the worksite, where was it given? \_\_\_\_\_

- Facility \_\_\_\_\_
- Street \_\_\_\_\_
- City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- 8) Was employee treated in an emergency room?  Yes  No

- 9) Was employee hospitalized overnight as an in-patient?  Yes  No

## Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness 3/1/2021
- 12) Time employee began work 6am AM/PM
- 13) Time of event 11am AM/PM  Check if time cannot be determined

\*Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or SSNs) in the following fields.

- \*14) What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry";  
pulling wire

- \*15) What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement";  
"Worker developed soreness in wrist over time."  
hit elbow on a duct strap while pulling wire

- \*16) What was the injury or illness? Tell us the part of the body that was affected and how it was affected. Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."  
laceration on right elbow

- \*17) What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.  
duct strap

- 18) If the employee died, when did death occur? Date of death \_\_\_\_\_

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

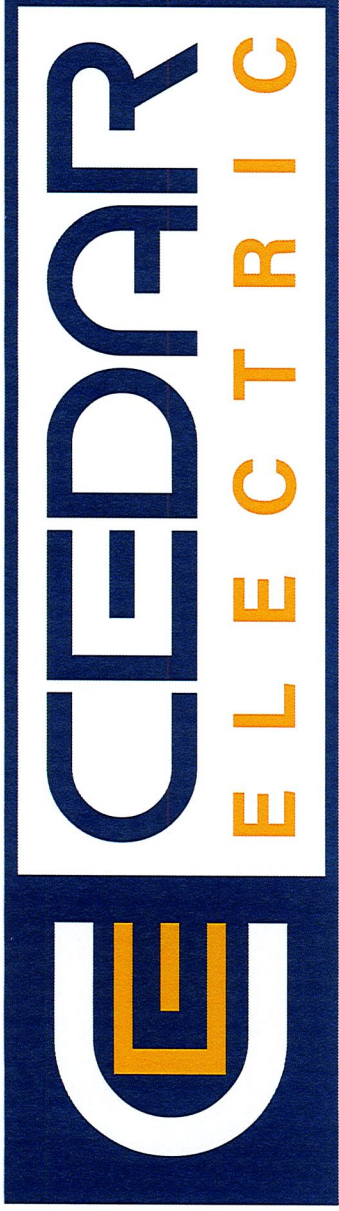
Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Completed by	<u>Amanda Rusk</u>
Title	<u>Assistant</u>
Phone	<u>717-945-7982</u>
Date	<u>1/3/2022</u>

Public reporting burden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information unless it displays a current valid OMB control number. If you have any comments about this estimate or any other aspects of this data collection, including suggestions for reducing this burden, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



September 20, 2022

Lincoln University – Renovations to Cresson Hall

**Re: Qualifications Statement - Safety Program**

This serves to verify that Cedar Electric Inc. has had no citations or violations for illnesses nor injuries for the 3- year period prior to the date of this bid submission for the Lincoln University Renovations to Cresson Hall.

A handwritten signature in black ink, appearing to read 'Doug Coonan', is written over the printed name.

Doug Coonan

Corporate Safety Officer



## SCHEDULE B - WORK HISTORY

Project Name	Owner	Architect	Scope of Work	Contract Value	Completed With Own Force
Brandywine Campus Alterations	Chester County Intermediate Unit	Breslin Ridyard	Electrical Service, Lighting, Systems and General Power	\$827,500.00	90%
Rose Tree Media School District	Rose Tree Media School District	Marotta Main Architects	Electrical Service and Generator	\$778,000.00	100%
1605 W. Main Street Renovations	Montgomery County Intermediate Unit	Fidevia	Electrical Service, Lighting, Systems and General Power	\$2,190,764.63	90%
Renovate & Expand Azikiwe Nkruman Hall	Lincoln Univeristy	Kimmel Bogrette Architects	Electrical Service, Lighting, Systems and General Power	\$308,000.00	95%
Good Hope 9th Gr Academy / Hampden ES	Cumberland Valley School District	Barton Associates	Electrical Service, Lighting, Systems and General Power	\$2,515,000.00	90%



## **Project Management Team**

### **Brody Longstaff – Project Manager**

Responsible for ensuring work is performed on schedule, within budget and safely, while maintaining a high level of quality. Coordinates and conducts weekly planning meetings with subcontractors to monitor progress, implement design team resolutions, and to ensure milestone schedule dates are achieved. Schedules, supervises, monitors, and evaluates performance of all work crews, including subcontractors.

### **Joseph Sterkenburg – Project Superintendent**

On site full time to coordinate subcontractor activities and ensure quality of materials and methods. Administers on-site safety procedures, identifies and resolves construction issues and maintains daily progress

Brody and Joe have developed a strong working relationship on multiple jobs over the last 30 years. Together they have managed phased renovations, additions, and new construction. Brody and Joe have years of experience performing critical work on occupied buildings. Cedar Electric understands the importance to maintain a safe and professional work environment for all trades and building guests.

Some of the prior jobs consist of:

#### **Lincoln University- Azikiwe-Nkrumah Hall Renovation and Expansion**

Installation and upgrade of lighting, fire alarm and data cabling.

Contract Value \$308,000.

#### **Brandywine Campus Alterations**

Installation of lighting, fire alarm and data systems

Contract Value \$853,500.

#### **Arrowhead Elementary School Addition and Renovation**

Installation of lighting, fire alarm, generator, data

Contract Value \$3,486,802.



## Project Team

### **Brody Longstaff – Project Manager**

- Responsible for planning and overseeing complete installation of the job site
- Communicate and manage various crew sizes, which include encouraging and educating apprentices.
- Review and compare all shop drawing submittals for rough-in installation and purchasing comparison.
- Plan and coordinate start up and demonstrations with owner

### **Joseph Sterkenberg – Project Superintendent**

- Communicate and coordinate installation with other trades such as light fixtures, distribution equipment, theatrical and dimming systems, cable trays, branch/feeder racks, masonry and slab work
- Develop safe and efficient work environments to allow everyone the opportunity to contribute at their highest level.
- Check all materials received on site for damages and comparisons against purchase orders

### **Joshua Palmatier -Electrician**

- Installation, such as light fixtures, distribution equipment, theatrical and dimming systems, cable trays, branch/feeder racks, masonry and slab work

# Brody Longstaff

brody@cedarelectricinc.com

## Professional Summary

Commercial Electrician with thirty-three years of diversified experience. Expertise includes complete supervision of job sites including but not limited to submittal review, takeoff comparisons, feeder and distribution review (wire/conduit size and phase calculations) generating "RFI's", pricing change orders, layout from slab to punch list and developing an exciting work environment.

## Work History

Cedar Electric, Inc.

**Project Manager/Job site superintendent**

Lititz, PA

December 2017 to Present

## Education

**ABC**

Lancaster, PA, Lancaster

Four-year apprenticeship program

1992

**Vocational School - Electrical**

Bolivar, NY

Two-year electrical program

1988

## License

Master Electrical License

City of Harrisburg Electrical License

## Clearances

FBI Finger Printing

Child Abuse

Criminal Background

## Courses

ATC (Johnson Control)

Personal Development

OSHA safety training (30 hour course)

Management Seminar (Harrisburg Area Community College)

Human Relations (Zig/Zigler / Dale Carnegie)

Leadership and Management (four year in house)

Claims Management

Practical application to the NEC

OSHA CPR & First Aid

Business Writing (L.M. Malistic & Associates)

## Field Work

Responsible for planning and overseeing complete installation of the job site.

Review and compare all shop drawing submittals for rough-in installation and purchasing comparison.

Review and adjust site progression schedules from general contractors and outside consultants.

Communicate and manage various crew sizes, which include encouraging and educating apprentices. Develop safe and efficient work environments to allow everyone the opportunity to contribute at their highest level.

Communicate and coordinate installation with other trades such as light fixtures, distribution

equipment, theatrical and dimming systems, cable trays, branch/feeder racks, masonry and slab work.

Plan and coordinate start up and demonstrations with owner.

## PROJECT EXPERIENCE:

Construct ICU Med Surgical Unit- Lebanon VAMC, Lebanon, Pennsylvania

Completed: February 2020

\$9,103,248.00

Chiller Replacement – Lebanon VAMC, Lebanon, Pennsylvania

Completed: October 2020

\$1,789,412.00



## **Joseph R. Sterkenburg**

Electrical Field Foreman / Journeyman Electrician

### **WORK EXPERIENCE**

#### **Electrical Field Foreman**

Cedar Electric Inc – Lititz, PA – 2018 – Present

##### Foreman Responsibilities:

- Responsible for the on-time and on budget installation of all electrical
- Responsible for planning and supervising the day-to-day management of a team of field electricians and apprentices (staff up to 20). Planned daily work assignments, accurately tracked hours worked as well as various other administrative requirements
- Read and maintain accurate on-site blueprints and isometric drawings and track all updates
- Interact daily with office Contract Manager regarding job progress, change orders, supplies, etc.
- Represent the electrical project in weekly General Contractor status meetings with other on-site trades and project leaders
- Responsible for on-time delivery and storage of jobsite materials
- Basic tool and equipment maintenance
- Responsible for maintaining a safe, clean and orderly environment

Foreman at the following facilities: **Lincoln University**, Arrowhead Elementary School

#### **Owner / Operator**

Sterk Electric – Wilmington, DE – 2015 – 2018

Foreman at the following facilities: Mt. Cuba Center, Myer & Myer Realty, Home Advisor

#### **Electrical Field Foreman**

Electri-Tech Inc – Dorothy, NJ – 2013 – 2015

Foreman at the following facilities: West Chester University, Dover Air Force Base

#### **Journeyman Electrician**

SP Construction & Design, Inc – Leola, PA – 2012 – 2013

##### **Journeyman Responsibilities:**

- Responsible for the on-time installation of all electrical including (but not limited to) alarm and detection systems; clock/program systems; electric heating cables; electrical controls; all exterior and interior and emergency lighting; public address systems; standby power generator system; television system; camera system; motion detectors; transfer switches; voice & data systems; service/distribution; electric/sliding doors and gates.

**Jobsites:** President James Buchanan’s historical home, Wheatland; Lancaster General Hospital Cancer Center

#### **Electrical Field Foreman**

Electri-Tech Inc – Dorothy, NJ – 1999 – 2012

Foreman at the following facilities: Monroe High School, Lindenwold High School, Absegami High School, **Lincoln University**, Montgomery County Community College, Harrilton High School

#### **Electrical Field Foreman**

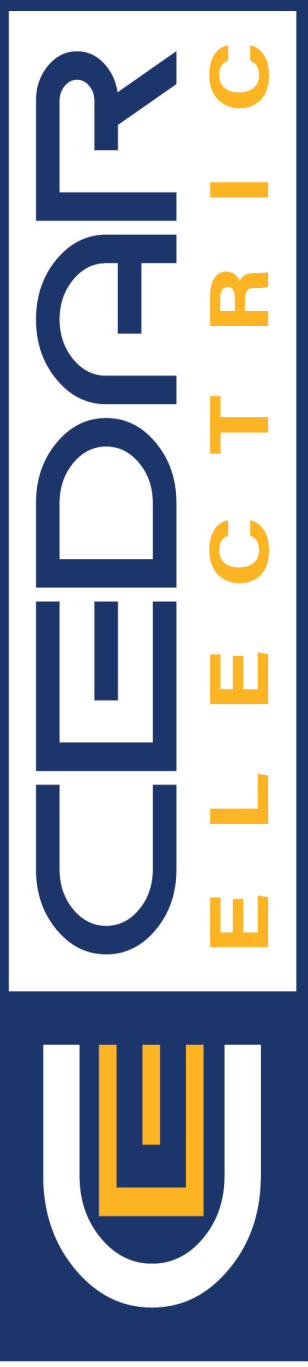
Ray Angelini, Inc. (RAI) - Sewell, NJ – 1990-1999

Foreman at the following facilities: Philadelphia High School for Girls; Belmont Pumping Station; Downingtown High School; University of Delaware Science Building

### **EDUCATION**

#### **Master Electrician / Graduate of 4-year apprenticeship program**

George C. Wallace Community College (WCCS)



## **Cedar Electric Inc. Safety Plan**

In addition to providing each employee and subcontractor with a copy of this plan, Cedar Electric conducts periodic meetings to instruct employees in the recognition or avoidance of unsafe conditions. These meetings shall also emphasize the requirements of specific owner/users of each construction site to minimize exposure to unsafe/unhealthy conditions.

All phases of our Health and Safety Plan meet OSHA standards and also address items listed in the Army Corp of Engineers Manual EM 385-1-1.

Weekly safety information "TOOL BOX" meetings shall be held to review safe use of hand tools.

Safety inspections are completed daily.

Phase hazard meetings shall also be held prior to the start of each phase of a project. Phase hazards shall be conducted during preparatory inspections for each definable feature of work.

Employees shall inspect job site daily and note any correction and corrective action needed or taken.

Employees shall record any specific safety items as related to definable features and coordinate with the PROJECT MANAGER to insure all safety items are covered.

CONTACT FOR SAFETY: Doug Coonan 717-945-7982

### **ACKNOWLEDGMENT**

#### **Compliance Responsibility**

All work activity and product will comply with applicable Federal, State and municipal laws, codes and regulations such as 29 CFR 1926 OSHA Construction Industry Standards, EPA, DEP and National Fire Protection Association (NFPA) Code 241, Standard for Safeguarding Construction, Alteration, and Demolition Operations, 2009 Edition. Any fines or damages incurred for fault or negligence in meeting the terms of applicable codes and standards will be paid in accordance with 52.236-7.

#### **Intervention Authority**

Facility Safety Officer has intervention authority to immediately halt construction activities should an individual(s) be placed in imminent danger or a serious threat to the loss of facilities or a serious threat to the environment.

**No Alcoholic Beverages/Firearms** will be allowed on the medical center grounds.

#### **Security is Paramount**

Access to construction sites will be secured at all times to prevent people (veterans, visitors and staff) from wandering into the work areas that may be hazardous. Penthouse/attic, mechanical room and roof access doors will not be propped open and left unattended.



#### **PROCEDURES FOR ON-SITE MEDICAL, FIRE OR ACCIDENT EMERGENCIES**

Each of our job trailers is equipped with a First Aid Kit. Workers are trained in First Aid and CPR and are trained to provide emergency first aid or dial 911 for emergency assistance.

Workers who are injured and in need of medical treatment will be transported to a local hospital or taken there by local ambulance, depending on the severity of the injury. A Workers' Compensation Medical Panel is posted in each job site trailer.

Foremen are required to investigate every injury and complete the necessary paperwork for processing a Worker's Compensation claim for our corporate office.

All OSHA 300 log injuries and exposures will be noted on Daily Log and the COTR will be notified immediately of severe injuries.

#### **NO SMOKING**

Construction staff will not be allowed to smoke in buildings, on the grounds or on construction sites.

#### **FIRE/LIFE SAFETY**

Fire extinguishers are provided at each job site for any fire emergencies and will be maintained and training will be provided in accordance with Attachment A.

No disruption of systems will occur without receiving prior approval of Contracting Officer Technical Representative (COTR). A 15-day advance notice will be provided for planned shutdowns. An interim measure will be requested from the COTR for disruptions fire alarm, sprinkler, generator and medical gas systems.

All temporary construction partitions will be smoke-tight and made of noncombustible material that will not contribute to the development or spread of fire.

#### **DAILY INTERIM LIFE SAFETY MEASURES**

Daily checks will be performed and documented using form (Attachment B).

#### **GENERAL TRAINING REQUIREMENTS FOR ON-SITE WORKERS**

##### **Occupational Safety and Health Training Course**

Before arriving on site all workers will have successfully completed a 10-hour of "Construction Safety & Health" and all foremen/superintendents will have completed a 30-hour course.

##### **Awareness Module - Attachment C**

##### **Mandatory OSHA Training Records, such as industrial truck, hoisting/rigging, jacks, etc.**

Copies of training records will be maintained on site.

#### **ELECTRICAL**

All temporary electrical conductors and equipment shall be approved. Employees will ensure that electrical equipment is free from serious physical harm to employees. All electricians shall comply with all regulations as set forth by OSHA regulations.

No employee shall work in the proximity to any part of an electric power circuit that the employee could contact the electric power circuit in the course of his work, unless the employee is protected against electric shock by de-energizing the circuit and grounding it or other means. Protective gloves will be provided to employees where the exact locations of underground electric power lines is known, if these employees are using



jackhammers, bars or other digging tools. Employees shall post warning signs where necessary to advise employees of the location of such lines, the hazards involved and the protective measures to be taken.

Working areas, walkways and similar locations shall be kept clean of cords to eliminate hazards. No area will be used as a passageway if there are energized parts or electrical equipment exposed. Worn and frayed cable will not be used. Extension cords shall not be fastened with staples or suspended by wire. Ground fault adapters shall be used with all extension cords.

Work will not be performed on live circuits of 50 volts or greater. The two exceptions are when:

- De-energizing introduces additional increased hazards, i.e., interruption of life support equipment, emergency alarm systems or at times, removal of illumination or ventilation, etc.
- It is not feasible due to equipment design or operation limitations, i.e., performing diagnostics, testing and troubleshooting, etc.

Electrical contractor will assess the risk associated with working on live power and will use professional judgment in deciding to work on a "live circuit".

#### **LOCK OUT/TAG OUT PROCEDURES:**

OSHA Lock Out/Tag Out procedures have been established for all workers. Locks and tags are available at job sites for locking out and/or tagging out breakers and other electrical equipment when work is being performed.

Workers are instructed to communicate any lock out or tag out procedures with other contractors on a job site.

Lock Out/Tag Out Training is provided to all workers of our company prior to the start of any job site.

#### **HAND AND POWER TOOLS**

All hand and power tools to be used on the job shall be in safe and operable condition. If tools have been designed to accommodate guards, they shall be equipped with such guards when in use. Belts, gears, shafts, pulleys, sprockets, spindles, drums, fly wheels, chains and all other moving parts of the equipment shall be guarded if such parts are exposed to contact by employee's Protective personal gear will be provided to all employees using hand and power tools and exposed to the hazards of falling, flying, abrasive and splashing objects, or who have exposure to dusts, fumes, mists, vapors or gases.

Tools and equipment will not be left unattended in public areas.

#### **MATERIAL HANDLING, STORAGE USE AND DISPOSAL**

No lift will be made over occupied areas. All material will be stored securely to prevent sliding, falling or collapse. Maximum safe load limits will be posted except for floor or slab on grade. Aisles and passageways will be kept clear so the employees may handle and move materials and equipment safely. Materials will be stored away from floor-openings and hoist ways. Rigging equipment will be inspected prior to the beginning of each shift. Defective rigging equipment shall be repaired immediately or removed from the jobsite. When not in use rigging equipment will be removed from the work area. All rigging accessory gear will be inspected and if defective its use will be prohibited.

#### **MATERIAL SAFETY DATA SHEETS (MSDSs)**

No hazardous substance as defined in 29 CFR 1910.1200 will be allowed on site without a MSDS. A master copy of chemical inventory list will be maintained and copies of all MSDSs kept in the in-site office and will be readily available for an OSHA audit at any time. All employees will be advised that they have a right of access and may read the MSDSs upon request.



### **BODILY PROTECTION**

Employees will be required to adhere to certain requirements concerning the appropriate attire to be worn; trousers significantly shorter than ankle length will not be permitted regardless of weather conditions. Shirts worn on the jobsites are required to have a sleeve length which will cover three-quarters of the arm area between the shoulder and the elbow.

Employees reporting to jobsites will be required to wear safety shoes. Any individual wearing soft, non-safety rated shoes will be removed from the jobsite.

### **FACE AND EYE PROTECTION**

Employees shall be provided with eye and face protection when machines or other operations present the potential for eye or facial injury. This protective gear shall meet the specifications of ANSI Z87.1-1968, Practice for Occupational and Educational Eye Face Protection. Goggles for eye protection will be provided where necessary. All protective gear will be clean and in good condition. The use of defective gear will be prohibited. Any employee whose occupation requires exposure to laser beams shall be furnished with suitable laser safety goggles.

### **HEAD PROTECTION**


It is mandatory that each employee working in the areas where there is potential danger of head injury from impact, or from falling or flying objects, or from electrical shock and/or burns, be equipped with and wear protective helmets. These helmets must meet the specifications of ANSI ZB9.1-1969 and Z89.2-1971, Safety Requirements for Industrial Head Protection. Any employee not in compliance will be removed from the jobsite.

**Objective:** To ensure that workers and the visitors are properly protected while on construction sites.

### **Sensible Risk Management:**

- **Ensuring** that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust action.
- **Enabling** contractors to understand that as well as the right to protection, they also have to exercise responsibility.
- **Assessing** the risks on the construction site for determining when hard hats shall be worn. Protective helmets shall be worn in any work environment where there is a possible danger of head injury from impact, or from falling, or flying objects, or from electrical shock and burns. Refer to American National Standards Institute, Z89.1 and Z89.2 for helmets meeting a particular protection.

### **Contractors' Risk Assessment:**

- **Identify** work-activities that have potential for head injury from impact, or from falling, or flying objects, or from electrical shock and burns.
- **Determine** what phases of projects that will require use of hard hats or deem scaffolding, trenching, demolition, electrical work and rough-in activities as hard hat phases or deem the whole construction period requiring hard hats.
- **Post** signs at all entrances of construction when hard hats are required. 
- **Present** Contracting Officer Technical Representative a signed and dated copy of risk assessment.

### **GASES, VAPORS, FUMES, DUSTS AND MISTS**

The contractor will comply with section 1926.55 of OSHA regulations when exposing employees to inhalation, ingestion, skin absorption or contact with any airborne contaminant (gases, vapors, fumes, dusts and mists). If the OSHA regulation fails to adequately protect, or is not feasible to implement, appropriate and properly selected respiratory devices, based on the hazards of the work, shall be provided and shall be used. Such devices would be approved by the U.S. Department of Mines.





#### **NOISE EXPOSURE**

Protection from noise shall be in compliance with OSHA 1926.52. Ear protection devices shall be provided and must be used whenever it is necessary to reduce noise levels for health and safety purposes. Noise levels and the duration of exposure to particular noise levels shall comply with OSHA 1926.52, Permissible Noise Exposure, Plain cotton will not be permitted for use as a protective ear device.

#### **ILLUMINATION**

General construction area, all ramps, runways, corridors, offices, shops and storage facilities shall be provided with adequate illumination. The level of illumination provided shall in compliance with OSHA 1926.56.

#### **SIGNS, SIGNALS AND BARRICADES**

Accident and prevention signs and tags will be provided and will comply with OSHA 1926.200. Signs will be removed when danger no longer exists. Signs will be of the appropriate color and style, as follows: "DANGER: Immediate hazard." Red predominating color for upper panel, black border, black lower panel. "CAUTION: Potential hazard warning." Yellow predominating color, black upper panel, lower yellow panel, black lettering. "DIRECTIONAL" White with black panel. "SAFETY INSTRUCTIONS:" White and green upper panel. All signs will conform to ANSI D.6 .1-1971.

#### **ACCIDENT PREVENTION TAGS**

Tags shall be used as a temporary means of warning employees of existing hazards, such as defective tools, Equipment machinery.

#### **SAFETY BELTS, LIFELINES AND SAFETY NETS**

Safety belts, lifelines and lanyards shall be used. Such gear will be in compliance with OSHA 1926. Safety nets will be provided and used when workplaces are more 25 feet above the ground or other surfaces where the use of ladders scaffolds catches platforms, temporary floors, safety lines and belts are not practical. Safety nets will be of the type to meet or exceed the standards set by OSHA.

#### **ASBESTOS DEMOLITION**

All asbestos demolition will be performed by a licensed contractor in accordance with Approved asbestos abatement plan. Only, employees who are competent mechanics specially schooled and trained in abatement regulations shall be allowed in the containment. The contractor will also have available during renovation work a competent supervisory employee who is capable of identifying existing asbestos in the workplace and who has the authority to take prompt corrective measures to eliminate such hazards.

#### **FORMWORK AND FALSEWORK**

The planning and design of formwork and false work shall be in accordance with provisions of the American Concrete Institute, Publication ACI 347-78, and Recommended Practice for Concrete Formwork and ANSI A10.9, Safety Requirements for Concrete Construction and Masonry Work.

All formwork, false work, structural shoring, and bracing shall be designed, erected, braced, and maintained so that it will safely support all vertical and lateral loads that might be applied until such loads can be supported by the structure.

The design of formwork and false work shall be submitted for review to the Designated Authority.

Stripped forms and shoring shall be removed and stockpiled promptly after stripping. Protruding nails, wire ties, and other form accessories not necessary to subsequent work, shall be pulled, cut, or other means taken to eliminate the hazard. Employees will be supplied with and required to wear eye and/or face protection during all operations involving nailing into concrete.



## **DEMOLITION**

Prior to the commencement of demolition operations, a competent individual will inspect and document his findings of the structure to determine the condition of the framing, floors and walls and the possibility of any unplanned collapse of any portion of the structure. If applicable, all electric, gas, water, steam, sewer and other services shall be shut off, capped or otherwise controlled before demolition work begins. When necessary to maintain power, water and other utilities during demolition such lines will be temporarily relocated and protected. Appropriate hazard signs will be posted. Entrances to multi-story structures being demolished shall be completely protected. Demolition will begin at the top and demolition work will proceed downward. All stairs, passageways, ladders and incidental equipment shall be frequently inspected and maintained in a safe and operable condition. No material will be dropped to any point lying outside the exterior walls of the structure unless the area is adequately protected. Chutes shall be enclosed. Guardrails to

the chutes will be installed where necessary. Debris disposed of through floor openings shall be performed through an opening no larger than 25 percent of the total floor area. Weakened floors made unsafe by the demolition work will be shored for safety. Demolition debris will be hauled away daily or frequently enough so as not to accumulate an unsafe amount of weight on any floors. Walls will be left in stable condition at the end of each workday.

No demolition or other dust generating activity shall commence before an issuance of an Infection Control Risk Assessment (ICRA) is issued by the Contracting Officer Technical Representative. See Attachment D.

## **DUST & ODOR CONTROL**

Adequate negative air fan(s) equipped with HEPA filter(s) will be used to ensure dust and odors do not migrate into the adjacent spaces.

Sticky mats will be placed at points of exiting (construction-side of door) into adjacent occupied spaces. Sheets will be peeled off before becoming soiled.

## **EXCAVATIONS AND TRENCHING**

The services of a utility locating company will be used along with record drawings prior to the commencement of excavation.

All excavation vehicles shall have an unobstructed view to the rear otherwise a reverse signal alarm audible above surrounding noises, or an observer signals that it is safe to back up. All vehicles will be equipped with windshields and power wipers. Cracked and broken glass will be replaced immediately. No vehicle will be used with fogged or frosted windshields. All haulage vehicles whose pay load is loaded by means of cranes, power shovels, loaders or similar equipment shall have a cab shield or canopy to protect the driver from falling or shifting materials.

Trucks with dump bodies will be equipped with positive means of support, permanently attached and capable of being locked in position to prevent accidental lowering of the body while maintenance or inspection work is being performed. Operating levers controlling hoisting or dumping devices on haulage bodies shall be equipped with a latch or other device which will prevent accidental starting or tripping of the mechanism. Trip handles for tailgates of the dump trucks shall be arranged so that the operator-will be in no danger during the dumping process

Only those trenches for which material is on hand and ready for placing therein shall be opened. As soon as practicable after material has been placed and work approved, trenches shall be backfilled and compacted as required. In the meantime, all resulting hazardous conditions shall be marked and lighted.



The sides of all excavations in which employees are exposed to danger from moving ground shall be guarded by a shoring system, sloping off the ground, or other equivalent means. The minimum sloping for excavations >5 feet, but <20 feet in any soil, with the exception of solid rock, shall be no less than 1.5 horizontal to 1 vertical.

Diversion ditches, dikes, or other means shall be used to prevent surface water entering an excavation and to provide good drainage of the area adjacent to the excavation.

Excavated materials shall be stored and retained at least 2 feet from the edge of the excavation and at a distance to prevent excessive loading on the face of the excavation.

Boulders, stumps, or other materials that may slide or roll into the excavation shall be removed or made safe.

Guardrails, fences, or barricades and warning lights or other illumination maintained from sunset to sunup, shall be placed at all excavations which are adjacent to paths, walkways, sidewalks, driveways, and other pedestrian or vehicle thoroughfares. Adequate physical protection shall be provided at all remotely located excavations.

Walkways or bridges with guardrails shall be provided where people or equipment are required or permitted to cross over excavations.

Banks more than 5 feet high shall be shored, laid back to a stable slope, or provided with other equivalent protection where employees may be exposed to moving ground or cave-ins. Trenches less than 5 feet in depth

also shall be protected when examination of the ground indicates hazardous ground movement may be expected. The safe angle of repose for soil conditions and bracing systems shall be determined by a qualified person.

Portable trench boxes, sliding trench boxes, or shields shall be designed, constructed, and maintained in a manner to provide protection equal to or greater than the sheathing and shoring required for the situation.

Ladders used as access ways shall extend from the bottom of the trench to not less than 3 feet above the surface. Lateral travel to an exit ladder shall not exceed 25 feet.

Sloping for excavations >5 feet, but <20 feet shall be benched no less than 1.5 horizontal to 1 vertical

#### **CRAWLER, TRUCK AND WHEEL MOUNTED CRANES**

All cranes shall be provided and operated by a reputable equipment company with certified operators.

All mobile hydraulic cranes shall meet the applicable requirements of ANSI B30.15. All crawler, truck, or locomotive cranes in use shall meet the requirements for design, inspection, construction, testing, maintenance, and operation in ANSI B.30.5, Safety Code for Crawler, Locomotive and Truck Cranes.

A means shall be provided for the crane operator to visually determine the levelness of the crane.

A boom angle or radius indicator shall be provided within operator's view.

Equipment manufacturer's specifications and limitations shall be complied with.

Rated load capacities, recommended operating speeds, and special hazard warnings or instructions shall be posted on all equipment and be visible from the operator's station.

Equipment shall be inspected before each use and all deficiencies corrected before further use.

Accessible areas within the swing radius of the revolving superstructure shall be barricaded.

Except where electrical distribution and transmission lines have been de-energized and visibly grounded at point of work, or where insulating barriers not a part of or an attachment to the equipment or machinery have been erected to prevent physical contact with the lines, no part of a crane or its load shall be operated within 10 feet





of a line rated 50 kV or below; 10 feet+ 0.4 inches for each 1 kV over 50 kV for lines rated over 50 kV, or twice the length of the line insulator, but never less than 10 feet.

### **WELDING AND CUTTING**

When transporting compressed gas cylinders the valve protection caps shall be in place and properly secured.

Cylinders will be moved by tilting and rolling them on the bottom edges. No cylinder will be intentionally dropped, struck or allowed to strike each other violently. When hoisted, cylinders shall be on a cradle, sling board or pallet. Cylinders will be properly secured before hoisting. Caps shall not be pried loose. Chains or other steadying devices will be used to prevent cylinders from being knocked over while in use. When not in use the cylinder valve will be closed and will be kept in an upright position at all times. There will be no mixing of gases and no refills by employees.

Each welding or cutting unit shall be equipped with a compatible fire extinguisher.

No damaged or defective cylinders shall be used. Employees will be properly instructed in the safe use of cylinders containing oxygen, acetylene or other fuel gases.

Compressed air and gas equipment shall be secured while stored in an upright position. Canisters must be segregated and all other provisions of Section 21, EM38S-1-1, Corps of Engineers Safety and Health Regulations Manual, adhered to.

All hoses used for gas and oxygen will be inspected prior to each use and *if* defective will be replaced immediately. Hoses will be kept clear of passageways, ladders and stairways.

Torches will be kept clean and in good condition with defective torches being replaced immediately. Proper lighting methods will be used. Good housekeeping techniques around areas where welding is performed will be enforced. All welding and cutting cables will be insulated. Defective cables will be replaced immediately.

Workers will be protected by flame-proof screens. Proper grounding will be enforced. Proper ventilation systems will be in place with contaminated air exhausted from the work space. When necessary, fire watching will be enforced. Employees performing any type of welding will be required to wear protective eye equipment, hand shields when appropriate and welding helmets. Respirators will be worn by employees when welding, cutting or heating around preservative coatings.

Hot Work procedures, as recommended by OSHA will be followed. A 2S foot clearance shall be maintained when any hot work activities are completed at a job site. A fire extinguisher will be readily available at any hot work site. No hot work activity will commence until a Hot Work Permit *is* issued by the COTR.

Shielding curtains will be used to protect other workers who are within 50' of the welding arc or require appropriate eye protection worn.

### **SCAFFOLDING**

The contractor will provide competent and qualified personnel to erect and dismantle all scaffolding. Guard rails and toe boards shall be installed on all open sides and ends of any platform that is more than six (6) feet above the ground or floor.

### **CONFINED SPACE ENTRY PROCEDURES**

In the event of a confined space entry by any of our workers, permits will be obtained and all OSHA confined space entry procedures will be followed.

In addition, Core Drill permits will be issued by the COTR.



#### **UTILITY LOCATING PROCEDURES**

When needed, a utility locating service or call to the PA Utility Hot Line will be used to locate utility lines. Drawings of utility line locations will be made available for review prior to excavation.

#### **HAZARD ANALYSIS FOR SPECIFIC HAZARDS**

Any hazardous job tasks not already identified in this Plan will be subject to a Hazard Analysis by the Job Site Superintendent or Foreman and upon completion, this analysis will be reviewed with workers on our job sites. Workers will be advised of Personal Protective Equipment (PPE) required for specific activities. Analysis and PPE determination will be kept on file in our job site office for review.

Doug Coonan

CEDAR ELECTRIC INC.



**B. STEPS TAKEN TO PROMOTE SAFETY IN PAST (3) YEARS**

Cedar Electric is committed to safety. We believe that our work safety history on prior jobs has proven that. We are not perfect, but we strive to become better which requires a continual effort.

In the past three years, Cedar Electric has made sure that the staff has a 30 hr OSHA certificate. Employees get weekly Tool-Box-Talks and weekly safety inspections are reviewed on-site. All employees have OSHA First Aid and CPR certification. Cedar Electric has also joined the Keystone Chapter of ABC and sent apprentices to their training school. This program reviews important safety topics so they are prepared to work safely and correct unsafe conditions. Cedar will also post yellow safety signs on the job site so that workers on the project can understand expectations.

Cedar Electric takes safety very seriously. Recently, they removed subcontractor employees who refused to comply with safety requirements.



## **Schedule Methodology**

Adequate scheduling processes are necessary to ensure completion and control of the project from the beginning to the end of a project. It involves taking a close look at the construction activities and allowing enough time for each. In order to make a realistic schedule, all contractors need to have input.

Cedar Electric and our subcontracting team are capable of mobilizing, performing and completing this project on or before the allotted projected completion date. We will develop a schedule that is practical to maintain and one that provides valuable information for Cedar Electric, our subcontractors and other prime contractors on the job.

- First, subcontractors will be contacted to give their input for the schedule
- Cedar Electric will coordinate with other trades/contractors to ensure the most efficient timeline
- We will distribute our schedule to the team for a clear understanding on how we believe the project should proceed
- There will be weekly communication between our team to drive the daily activities

The next page shows the estimated schedule and timeline for the Electrical work. Cedar Electric used December 1, 2022 as the estimated Notice to Proceed date.

ID	Task Name	Duration	Start	2	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	
1	Notice To Proceed	1 day	Thu 12/1/22																								
2	Job Conference (Initia	1 day	Mon 12/5/2																								
3	Submittal Process	60 days	Mon 12/12/																								
4	Scheduling Conferenc	1 day	Mon 12/12/																								
5	Project Schedule Subi	1 day	Sun 2/12/23																								
6	Mobilization	1 day	Thu 12/15/2																								
7	Electrical Demolition	30 days	Mon 12/19/																								
8	Install Electrical Servi	15 days	Mon 1/16/2																								
9	Install Transformer &	5 days	Mon 1/30/2																								
10	Install Electrical Pane	30 days	Fri 2/3/23																								
11	Install Generator	18 days	Mon 1/30/2																								
12	Floor Box Rough-In	6 days	Mon 2/6/23																								
13	Electrical Rough-In B	10 days	Wed 2/15/2																								
14	Electrical Rough-In F	21 days	Mon 2/27/2																								
15	Electrical Rough-In S	21 days	Mon 3/20/2																								
16	Electrical Rough-In A	31 days	Mon 3/27/2																								
17	Systems Rough-In	45 days	Wed 2/15/2																								
18	Elec. Device Install B	5 days	Mon 5/15/2																								
19	Elec. Device Install 1	7 days	Mon 5/15/2																								
20	Elec. Device Install 2	7 days	Sat 5/27/23																								
21	Elec. Device Install A	5 days	Tue 6/6/23																								
22	Light Fixture Install B	5 days	Tue 8/15/23																								
23	Light Fixture Install 1	10 days	Tue 8/22/23																								
24	Light Fixture Install 2	10 days	Sun 9/10/23																								
25	Light Fixture Install A	5 days	Sat 9/30/23																								
26	Lighting Controls all	17 days	Mon 10/30/																								
27	Fire Alarm All Floors	21 days	Fri 11/10/23																								
28	Install IT Cables all	18 days	Sun 12/10/2																								
29	Install AV Equip all	21 days	Fri 1/12/24																								
30	Security Install	14 days	Mon 2/12/2																								
31	Fire Alarm Start up	2 days	Fri 3/1/24																								
32	IT devices and racks/	10 days	Thu 3/14/24																								
33	AV Start up	2 days	Tue 4/2/24																								
34	Punch List	10 days	Wed 5/1/24																								
35	Substantial Completio	1 day	Sat 6/1/24																								
36	Training	3 days	Sun 8/25/24																								
37	O&M Manuals	1 day	Tue 8/27/24																								
38	Close Out Documents	1 day	Sat 8/31/24																								

Project: msproj11  
Date: Tue 9/20/22

Task		Project Summary		Inactive Milestone		Manual Summary Rollup		Deadline	
Split		External Tasks		Inactive Summary		Manual Summary		Progress	
Milestone		External Milestone		Manual Task		Start-only		Manual Progress	
Summary		Inactive Task		Duration-only		Finish-only			

Page 1





## **WORK PLAN**

The biggest issue we see with this project is converting this old construction style building into the new construction requirements. The new equipment is sometimes challenging to make it fit into the old style of construction. These types of projects require experienced tradesman to be clever enough to find ways to fit the new technology into the historical building. Our foreman that will be running this job has decades of experience in the electrical renovation field.

The longest lead times we are currently experiencing is with the A/V, Fire Alarm and IT materials. These products are needed at the end of the project so they will be submitted early so we can place the order and this equipment will be onsite in plenty of time and before they are needed.

As we mentioned above our site foreman has a tremendous amount of experience in renovation projects and is always thinking ahead to minimize challenges and hopefully eliminate all delays. Close coordination amongst all contactors is necessary to achieve a smooth-running project.

The site is extremely tight and the laydown area is very small but we are prepared to manage this project with minimal site storage of just day to day materials. The larger the materials will be stored off site at one of our warehouses and delivered on an as needed basis.

We have experience using Procore, E-Builder, FTP site and Microsoft Project in the past and are familiar with all of them. Documents are stored without our company with Google Drive.

When looking to create a tentative schedule for this project we consider the age of the building and how all the new equipment would go into this building as the biggest hurdle on the job. We were very generous when allotting timeframes for items that always go smoothly on new construction. We know from past experience on the Azikiwe Nkrumah Hall renovation that items can turn into difficult issues very easily. With all of this info we used the entire 641 days allotted for job to almost guarantee this job will be completed within that timeframe, barring any major unforeseen issues.



14-602034532

This card acknowledges that the recipient has successfully completed:

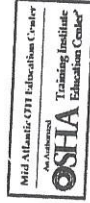
**30-hour Construction Safety & Health**

This card is issued to:

**Brody Longstaff**

Kevin Keith  
Trainer Name

3/22/2019  
Date of Issue



877-700-6212  
<http://www.osharmdatlantic.org/>

OSHA recommends Outreach Training Courses as an orientation to occupational safety and health workers. Participation is voluntary. Workers must receive additional training on specific hazards of their job. This course completion does not expire.

Use or distribution of this card for fraudulent purposes, including false claims of having received training, may result in prosecution under 18 U.S.C. 1001. Potential penalties include substantial criminal fines, imprisonment up to 5 years, or both.

To verify this training, scan the QR code with your mobile device.



Rev 1/2019



# 3M Energy Academy Certificate of Training Attendance

**Brody Longstaff**

To

**CEDAR ELECTRIC INC.**

Company

## Course Description

The above recipient attended a 4 hour course which included the following topics:

**Cable Theory and Prep, Medium Voltage (5-35kv) Terminating and Elbows**

\* Product Training was given according to 3M's published installation instructions for such cable accessories.

**12/12/2020**

Date

**Lititz, PA**

Location

**Jim McClain**

Instructor

**Major Projects Rep**

Title







**3M Energy Academy**  
**Certificate of Training Attendance**

**Josh Palmatier**

To

**CEDAR ELECTRIC INC.**

Company

**Course Description**

The above recipient attended a 4 hour course which included the following topics:

**Cable Theory and Prep, Medium Voltage (5-35kv) Terminating and Elbows**

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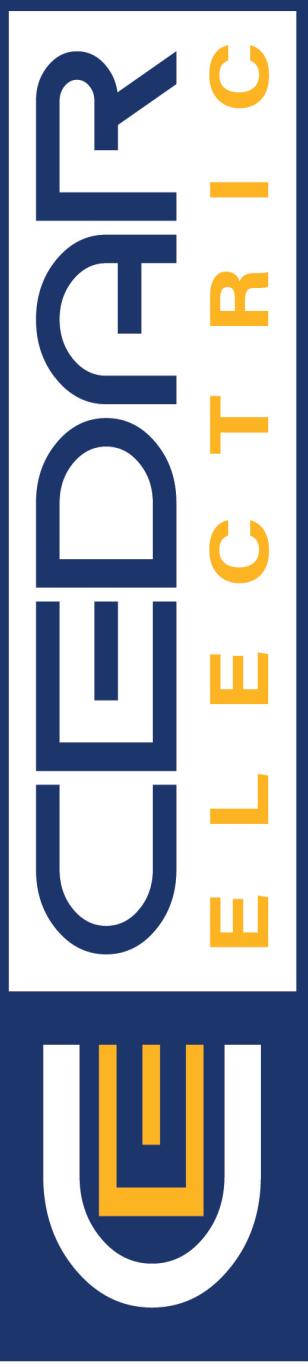
Title





## Covid-19 Job Site Protocols

- If you don't feel well, **STAY HOME** and take a covid test.
- If you have Covid-19 stay home for at least 5 days. On day 6 if your symptoms are improving or you no longer have symptoms you may return to work but must wear a mask until day 10 of your sickness.
- If you have been in close contact with someone that has been diagnosed with COVID-19 and you are up to date on your vaccine or have had Covid-19 in the past 90 days you may go to work but must wear a mask for 10 days. If you are not vaccinated or did not have Covid-19 in the last 90 days you must stay home for at least 5 days. If no symptoms are present on day 6 you may return to work but wear a mask until day 10 of your exposure.
- If you start feeling poorly at work (with common Covid-19 symptoms) **GO HOME** immediately and report to your supervisor via phone call that you are not feeling well.
- Do not hesitate to bring any questions or concerns to your Foreman
- For more info., please visit **CDC.GOV**



## **Cedar Electric Inc. Safety Plan**

In addition to providing each employee and subcontractor with a copy of this plan, Cedar Electric conducts periodic meetings to instruct employees in the recognition or avoidance of unsafe conditions. These meetings shall also emphasize the requirements of specific owner/users of each construction site to minimize exposure to unsafe/unhealthy conditions.

All phases of our Health and Safety Plan meet OSHA standards and also address items listed in the Army Corp of Engineers Manual EM 385-1-1.

Weekly safety information "TOOL BOX" meetings shall be held to review safe use of hand tools.

Safety inspections are completed daily.

Phase hazard meetings shall also be held prior to the start of each phase of a project. Phase hazards shall be conducted during preparatory inspections for each definable feature of work.

Employees shall inspect job site daily and note any correction and corrective action needed or taken.

Employees shall record any specific safety items as related to definable features and coordinate with the PROJECT MANAGER to insure all safety items are covered.

CONTACT FOR SAFETY: Doug Coonan 717-945-7982

## **ACKNOWLEDGMENT**

### **Compliance Responsibility**

All work activity and product will comply with applicable Federal, State and municipal laws, codes and regulations such as 29 CFR 1926 OSHA Construction Industry Standards, EPA, DEP and National Fire Protection Association (NFPA) Code 241, Standard for Safeguarding Construction, Alteration, and Demolition Operations, 2009 Edition. Any fines or damages incurred for fault or negligence in meeting the terms of applicable codes and standards will be paid in accordance with 52.236-7.

### **Intervention Authority**

Facility Safety Officer has intervention authority to immediately halt construction activities should an individual(s) be placed in imminent danger or a serious threat to the loss of facilities or a serious threat to the environment.

**No Alcoholic Beverages/Firearms** will be allowed on the medical center grounds.

### **Security is Paramount**

Access to construction sites will be secured at all times to prevent people (veterans, visitors and staff) from wandering into the work areas that may be hazardous. Penthouse/attic, mechanical room and roof access doors will not be propped open and left unattended.



### **PROCEDURES FOR ON-SITE MEDICAL, FIRE OR ACCIDENT EMERGENCIES**

Each of our job trailers is equipped with a First Aid Kit. Workers are trained in First Aid and CPR and are trained to provide emergency first aid or dial 911 for emergency assistance.

Workers who are injured and in need of medical treatment will be transported to a local hospital or taken there by local ambulance, depending on the severity of the injury. A Workers' Compensation Medical Panel is posted in each job site trailer.

Foremen are required to investigate every injury and complete the necessary paperwork for processing a Worker's Compensation claim for our corporate office.

All OSHA 300 log injuries and exposures will be noted on Daily Log and the COTR will be notified immediately of severe injuries.

### **NO SMOKING**

Construction staff will not be allowed to smoke in buildings, on the grounds or on construction sites.

### **FIRE/LIFE SAFETY**

Fire extinguishers are provided at each job site for any fire emergencies and will be maintained and training will be provided in accordance with Attachment A.

No disruption of systems will occur without receiving prior approval of Contracting Officer Technical Representative (COTR). A 15-day advance notice will be provided for planned shutdowns. An interim measure will be requested from the COTR for disruptions fire alarm, sprinkler, generator and medical gas systems.

All temporary construction partitions will be smoke-tight and made of noncombustible material that will not contribute to the development or spread of fire.

### **DAILY INTERIM LIFE SAFETY MEASURES**

Daily checks will be performed and documented using form (Attachment B).

### **GENERAL TRAINING REQUIREMENTS FOR ON-SITE WORKERS**

#### **Occupational Safety and Health Training Course**

Before arriving on site all workers will have successfully completed a 10-hour of "Construction Safety & Health" and all foremen/superintendents will have completed a 30-hour course.

#### **Awareness Module - Attachment C**

#### **Mandatory OSHA Training Records, such as industrial truck, hoisting/rigging, jacks, etc.**

Copies of training records will be maintained on site.

### **ELECTRICAL**

All temporary electrical conductors and equipment shall be approved. Employees will ensure that electrical equipment is free from serious physical harm to employees. All electricians shall comply with all regulations as set forth by OSHA regulations.

No employee shall work in the proximity to any part of an electric power circuit that the employee could contact the electric power circuit in the course of his work, unless the employee is protected against electric shock by de-energizing the circuit and grounding it or other means. Protective gloves will be provided to employees where the exact locations of underground electric power lines is known, if these employees are using





jackhammers, bars or other digging tools. Employees shall post warning signs where necessary to advise employees of the location of such lines, the hazards involved and the protective measures to be taken.

Working areas, walkways and similar locations shall be kept clean of cords to eliminate hazards. No area will be used as a passageway if there are energized parts or electrical equipment exposed. Worn and frayed cable will not be used. Extension cords shall not be fastened with staples or suspended by wire. Ground fault adapters shall be used with all extension cords.

Work will not be performed on live circuits of 50 volts or greater. The two exceptions are when:

- De-energizing introduces additional increased hazards, i.e., interruption of life support equipment, emergency alarm systems or at times, removal of illumination or ventilation, etc.
- It is not feasible due to equipment design or operation limitations, i.e., performing diagnostics, testing and troubleshooting, etc.

Electrical contractor will assess the risk associated with working on live power and will use professional judgment in deciding to work on a "live circuit".

#### **LOCK OUT/TAG OUT PROCEDURES:**

OSHA Lock Out/Tag Out procedures have been established for all workers. Locks and tags are available at job sites for locking out and/or tagging out breakers and other electrical equipment when work is being performed.

Workers are instructed to communicate any lock out or tag out procedures with other contractors on a job site.

Lock Out/Tag Out Training is provided to all workers of our company prior to the start of any job site.

#### **HAND AND POWER TOOLS**

All hand and power tools to be used on the job shall be in safe and operable condition. If tools have been designed to accommodate guards, they shall be equipped with such guards when in use. Belts, gears, shafts, pulleys, sprockets, spindles, drums, fly wheels, chains and all other moving parts of the equipment shall be guarded if such parts are exposed to contact by employee's Protective personal gear will be provided to all employees using hand and power tools and exposed to the hazards of falling, flying, abrasive and splashing objects, or who have exposure to dusts, fumes, mists, vapors or gases.

Tools and equipment will not be left unattended in public areas.

#### **MATERIAL HANDLING, STORAGE USE AND DISPOSAL**

No lift will be made over occupied areas. All material will be stored securely to prevent sliding, falling or collapse. Maximum safe load limits will be posted except for floor or slab on grade. Aisles and passageways will be kept clear so the employees may handle and move materials and equipment safely. Materials will be stored away from floor-openings and hoist ways. Rigging equipment will be inspected prior to the beginning of each shift. Defective rigging equipment shall be repaired immediately or removed from the jobsite. When not in use rigging equipment will be removed from the work area. All rigging accessory gear will be inspected and if defective its use will be prohibited.

#### **MATERIAL SAFETY DATA SHEETS (MSDSs)**

No hazardous substance as defined in 29 CFR 1910.1200 will be allowed on site without a MSDS. A master copy of chemical inventory list will be maintained and copies of all MSDSs kept in the in-site office and will be readily available for an OSHA audit at any time. All employees will be advised that they have a right of access and may read the MSDSs upon request.



### **BODILY PROTECTION**

Employees will be required to adhere to certain requirements concerning the appropriate attire to be worn; trousers significantly shorter than ankle length will not be permitted regardless of weather conditions. Shirts worn on the jobsites are required to have a sleeve length which will cover three-quarters of the arm area between the shoulder and the elbow.

Employees reporting to jobsites will be required to wear safety shoes. Any individual wearing soft, non-safety rated shoes will be removed from the jobsite.

### **FACE AND EYE PROTECTION**

Employees shall be provided with eye and face protection when machines or other operations present the potential for eye or facial injury. This protective gear shall meet the specifications of ANSI Z87.1-1968, Practice for Occupational and Educational Eye Face Protection. Goggles for eye protection will be provided where necessary. All protective gear will be clean and in good condition. The use of defective gear will be prohibited. Any employee whose occupation requires exposure to laser beams shall be furnished with suitable laser safety goggles.

### **HEAD PROTECTION**


It is mandatory that each employee working in the areas where there is potential danger of head injury from impact, or from falling or flying objects, or from electrical shock and/or burns, be equipped with and wear protective helmets. These helmets must meet the specifications of ANSI ZB9.1-1969 and Z89.2-1971, Safety Requirements for Industrial Head Protection. Any employee not in compliance will be removed from the jobsite.

**Objective:** To ensure that workers and the visitors are properly protected while on construction sites.

### **Sensible Risk Management:**

- **Ensuring** that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust action.
- **Enabling** contractors to understand that as well as the right to protection, they also have to exercise responsibility.
- **Assessing** the risks on the construction site for determining when hard hats shall be worn. Protective helmets shall be worn in any work environment where there is a possible danger of head injury from impact, or from falling, or flying objects, or from electrical shock and burns. Refer to American National Standards Institute, Z89.1 and Z89.2 for helmets meeting a particular protection.

### **Contractors' Risk Assessment:**

- **Identify** work-activities that have potential for head injury from impact, or from falling, or flying objects, or from electrical shock and burns.
- **Determine** what phases of projects that will require use of hard hats or deem scaffolding, trenching, demolition, electrical work and rough-in activities as hard hat phases or deem the whole construction period requiring hard hats.
- **Post** signs at all entrances of construction when hard hats are required. 
- **Present** Contracting Officer Technical Representative a signed and dated copy of risk assessment.

### **GASES, VAPORS, FUMES, DUSTS AND MISTS**

The contractor will comply with section 1926.55 of OSHA regulations when exposing employees to inhalation, ingestion, skin absorption or contact with any airborne contaminant (gases, vapors, fumes, dusts and mists). If the OSHA regulation fails to adequately protect, or is not feasible to implement, appropriate and properly selected respiratory devices, based on the hazards of the work, shall be provided and shall be used. Such devices would be approved by the U.S. Department of Mines.



#### **NOISE EXPOSURE**

Protection from noise shall be in compliance with OSHA 1926.52. Ear protection devices shall be provided and must be used whenever it is necessary to reduce noise levels for health and safety purposes. Noise levels and the duration of exposure to particular noise levels shall comply with OSHA 1926.52, Permissible Noise Exposure, Plain cotton will not be permitted for use as a protective ear device.

#### **ILLUMINATION**

General construction area, all ramps, runways, corridors, offices, shops and storage facilities shall be provided with adequate illumination. The level of illumination provided shall in compliance with OSHA 1926.56.

#### **SIGNS, SIGNALS AND BARRICADES**

Accident and prevention signs and tags will be provided and will comply with OSHA 1926.200. Signs will be removed when danger no longer exists. Signs will be of the appropriate color and style, as follows: "DANGER: Immediate hazard." Red predominating color for upper panel, black border, white lower panel. "CAUTION: Potential hazard warning." Yellow predominating color, black upper panel, lower yellow panel, black lettering. "DIRECTIONAL" White with black panel. "SAFETY INSTRUCTIONS:" White and green upper panel. All signs will conform to ANSI D.6 .1-1971.

#### **ACCIDENT PREVENTION TAGS**

Tags shall be used as a temporary means of warning employees of existing hazards, such as defective tools, Equipment machinery.

#### **SAFETY BELTS, LIFELINES AND SAFETY NETS**

Safety belts, lifelines and lanyards shall be used. Such gear will be in compliance with OSHA 1926. Safety nets will be provided and used when workplaces are more 25 feet above the ground or other surfaces where the use of ladders scaffolds catches platforms, temporary floors, safety lines and belts are not practical. Safety nets will be of the type to meet or exceed the standards set by OSHA.

#### **ASBESTOS DEMOLITION**

All asbestos demolition will be performed by a licensed contractor in accordance with Approved asbestos abatement plan. Only, employees who are competent mechanics specially schooled and trained in abatement regulations shall be allowed in the containment. The contractor will also have available during renovation work a competent supervisory employee who is capable of identifying existing asbestos in the workplace and who has the authority to take prompt corrective measures to eliminate such hazards.

#### **FORMWORK AND FALSEWORK**

The planning and design of formwork and false work shall be in accordance with provisions of the American Concrete Institute, Publication ACI 347-78, and Recommended Practice for Concrete Formwork and ANSI A10.9, Safety Requirements for Concrete Construction and Masonry Work.

All formwork, false work, structural shoring, and bracing shall be designed, erected, braced, and maintained so that it will safely support all vertical and lateral loads that might be applied until such loads can be supported by the structure.

The design of formwork and false work shall be submitted for review to the Designated Authority.

Stripped forms and shoring shall be removed and stockpiled promptly after stripping. Protruding nails, wire ties, and other form accessories not necessary to subsequent work, shall be pulled, cut, or other means taken to eliminate the hazard. Employees will be supplied with and required to wear eye and/or face protection during all operations involving nailing into concrete.



## **DEMOLITION**

Prior to the commencement of demolition operations, a competent individual will inspect and document his findings of the structure to determine the condition of the framing, floors and walls and the possibility of any unplanned collapse of any portion of the structure. If applicable, all electric, gas, water, steam, sewer and other services shall be shut off, capped or otherwise controlled before demolition work begins. When necessary to maintain power, water and other utilities during demolition such lines will be temporarily relocated and protected. Appropriate hazard signs will be posted. Entrances to multi-story structures being demolished shall be completely protected. Demolition will begin at the top and demolition work will proceed downward. All stairs, passageways, ladders and incidental equipment shall be frequently inspected and maintained in a safe and operable condition. No material will be dropped to any point lying outside the exterior walls of the structure unless the area is adequately protected. Chutes shall be enclosed. Guardrails to

the chutes will be installed where necessary. Debris disposed of through floor openings shall be performed through an opening no larger than 25 percent of the total floor area. Weakened floors made unsafe by the demolition work will be shored for safety. Demolition debris will be hauled away daily or frequently enough so as not to accumulate an unsafe amount of weight on any floors. Walls will be left in stable condition at the end of each workday.

No demolition or other dust generating activity shall commence before an issuance of an Infection Control Risk Assessment (ICRA) is issued by the Contracting Officer Technical Representative. See Attachment D.

## **DUST & ODOR CONTROL**

Adequate negative air fan(s) equipped with HEPA filter(s) will be used to ensure dust and odors do not migrate into the adjacent spaces.

Sticky mats will be placed at points of exiting (construction-side of door) into adjacent occupied spaces. Sheets will be peeled off before becoming soiled.

## **EXCAVATIONS AND TRENCHING**

The services of a utility locating company will be used along with record drawings prior to the commencement of excavation.

All excavation vehicles shall have an unobstructed view to the rear otherwise a reverse signal alarm audible above surrounding noises, or an observer signals that it is safe to back up. All vehicles will be equipped with windshields and power wipers. Cracked and broken glass will be replaced immediately. No vehicle will be used with fogged or frosted windshields. All haulage vehicles whose pay load is loaded by means of cranes, power shovels, loaders or similar equipment shall have a cab shield or canopy to protect the driver from falling or shifting materials.

Trucks with dump bodies will be equipped with positive means of support, permanently attached and capable of being locked in position to prevent accidental lowering of the body while maintenance or inspection work is being performed. Operating levers controlling hoisting or dumping devices on haulage bodies shall be equipped with a latch or other device which will prevent accidental starting or tripping of the mechanism. Trip handles for tailgates of the dump trucks shall be arranged so that the operator-will be in no danger during the dumping process

Only those trenches for which material is on hand and ready for placing therein shall be opened. As soon as practicable after material has been placed and work approved, trenches shall be backfilled and compacted as required. In the meantime, all resulting hazardous conditions shall be marked and lighted.





The sides of all excavations in which employees are exposed to danger from moving ground shall be guarded by a shoring system, sloping off the ground, or other equivalent means. The minimum sloping for excavations >5 feet, but <20 feet in any soil, with the exception of solid rock, shall be no less than 1.5 horizontal to 1 vertical.

Diversion ditches, dikes, or other means shall be used to prevent surface water entering an excavation and to provide good drainage of the area adjacent to the excavation.

Excavated materials shall be stored and retained at least 2 feet from the edge of the excavation and at a distance to prevent excessive loading on the face of the excavation.

Boulders, stumps, or other materials that may slide or roll into the excavation shall be removed or made safe.

Guardrails, fences, or barricades and warning lights or other illumination maintained from sunset to sunup, shall be placed at all excavations which are adjacent to paths, walkways, sidewalks, driveways, and other pedestrian or vehicle thoroughfares. Adequate physical protection shall be provided at all remotely located excavations.

Walkways or bridges with guardrails shall be provided where people or equipment are required or permitted to cross over excavations.

Banks more than 5 feet high shall be shored, laid back to a stable slope, or provided with other equivalent protection where employees may be exposed to moving ground or cave-ins. Trenches less than 5 feet in depth

also shall be protected when examination of the ground indicates hazardous ground movement may be expected. The safe angle of repose for soil conditions and bracing systems shall be determined by a qualified person.

Portable trench boxes, sliding trench boxes, or shields shall be designed, constructed, and maintained in a manner to provide protection equal to or greater than the sheathing and shoring required for the situation.

Ladders used as access ways shall extend from the bottom of the trench to not less than 3 feet above the surface. Lateral travel to an exit ladder shall not exceed 25 feet.

Sloping for excavations >5 feet, but <20 feet shall be benched no less than 1.5 horizontal to 1 vertical

#### **CRAWLER, TRUCK AND WHEEL MOUNTED CRANES**

All cranes shall be provided and operated by a reputable equipment company with certified operators.

All mobile hydraulic cranes shall meet the applicable requirements of ANSI B30.15. All crawler, truck, or locomotive cranes in use shall meet the requirements for design, inspection, construction, testing, maintenance, and operation in ANSI B.30.5, Safety Code for Crawler, Locomotive and Truck Cranes.

A means shall be provided for the crane operator to visually determine the levelness of the crane.

A boom angle or radius indicator shall be provided within operator's view.

Equipment manufacturer's specifications and limitations shall be complied with.

Rated load capacities, recommended operating speeds, and special hazard warnings or instructions shall be posted on all equipment and be visible from the operator's station.

Equipment shall be inspected before each use and all deficiencies corrected before further use.

Accessible areas within the swing radius of the revolving superstructure shall be barricaded.

Except where electrical distribution and transmission lines have been de-energized and visibly grounded at point of work, or where insulating barriers not a part of or an attachment to the equipment or machinery have been erected to prevent physical contact with the lines, no part of a crane or its load shall be operated within 10 feet



of a line rated 50 kV or below; 10 feet+ 0.4 inches for each 1 kV over 50 kV for lines rated over 50 kV, or twice the length of the line insulator, but never less than 10 feet.

### **WELDING AND CUTTING**

When transporting compressed gas cylinders the valve protection caps shall be in place and properly secured.

Cylinders will be moved by tilting and rolling them on the bottom edges. No cylinder will be intentionally dropped, struck or allowed to strike each other violently. When hoisted, cylinders shall be on a cradle, sling board or pallet. Cylinders will be properly secured before hoisting. Caps shall not be pried loose. Chains or other steadying devices will be used to prevent cylinders from being knocked over while in use. When not in use the cylinder valve will be closed and will be kept in an upright position at all times. There will be no mixing of gases and no refills by employees.

Each welding or cutting unit shall be equipped with a compatible fire extinguisher.

No damaged or defective cylinders shall be used. Employees will be properly instructed in the safe use of cylinders containing oxygen, acetylene or other fuel gases.

Compressed air and gas equipment shall be secured while stored in an upright position. Canisters must be segregated and all other provisions of Section 21, EM38S-1-1, Corps of Engineers Safety and Health Regulations Manual, adhered to.

All hoses used for gas and oxygen will be inspected prior to each use and *if* defective will be replaced immediately. Hoses will be kept clear of passageways, ladders and stairways.

Torches will be kept clean and in good condition with defective torches being replaced immediately. Proper lighting methods will be used. Good housekeeping techniques around areas where welding is performed will be enforced. All welding and cutting cables will be insulated. Defective cables will be replaced immediately.

Workers will be protected by flame-proof screens. Proper grounding will be enforced. Proper ventilation systems will be in place with contaminated air exhausted from the work space. When necessary, fire watching will be enforced. Employees performing any type of welding will be required to wear protective eye equipment, hand shields when appropriate and welding helmets. Respirators will be worn by employees when welding, cutting or heating around preservative coatings.

Hot Work procedures, as recommended by OSHA will be followed. A 2S foot clearance shall be maintained when any hot work activities are completed at a job site. A fire extinguisher will be readily available at any hot work site. No hot work activity will commence until a Hot Work Permit *is* issued by the COTR.

Shielding curtains will be used to protect other workers who are within 50' of the welding arc or require appropriate eye protection worn.

### **SCAFFOLDING**

The contractor will provide competent and qualified personnel to erect and dismantle all scaffolding. Guard rails and toe boards shall be installed on all open sides and ends of any platform that is more than six (6) feet above the ground or floor.

### **CONFINED SPACE ENTRY PROCEDURES**

In the event of a confined space entry by any of our workers, permits will be obtained and all OSHA confined space entry procedures will be followed.

In addition, Core Drill permits will be issued by the COTR.



#### **UTILITY LOCATING PROCEDURES**

When needed, a utility locating service or call to the PA Utility Hot Line will be used to locate utility lines. Drawings of utility line locations will be made available for review prior to excavation.

#### **HAZARD ANALYSIS FOR SPECIFIC HAZARDS**

Any hazardous job tasks not already identified in this Plan will be subject to a Hazard Analysis by the Job Site Superintendent or Foreman and upon completion, this analysis will be reviewed with workers on our job sites. Workers will be advised of Personal Protective Equipment (PPE) required for specific activities. Analysis and PPE determination will be kept on file in our job site office for review.

Doug Coonan

CEDAR ELECTRIC INC.



**B. STEPS TAKEN TO PROMOTE SAFETY IN PAST (3) YEARS**

Cedar Electric is committed to safety. We believe that our work safety history on prior jobs has proven that. We are not perfect, but we strive to become better which requires a continual effort.

In the past three years, Cedar Electric has made sure that the staff has a 30 hr OSHA certificate. Employees get weekly Tool-Box-Talks and weekly safety inspections are reviewed on-site. All employees have OSHA First Aid and CPR certification. Cedar Electric has also joined the Keystone Chapter of ABC and sent apprentices to their training school. This program reviews important safety topics so they are prepared to work safely and correct unsafe conditions. Cedar will also post yellow safety signs on the job site so that workers on the project can understand expectations.

Cedar Electric takes safety very seriously. Recently, they removed subcontractor employees who refused to comply with safety requirements.



## **SKILL TRAINING**

Every one of our electricians has completed the four-year apprenticeship course at some point in their career. As an active member of the Capital Region ABC our new hire first step is the electrical apprenticeship program. As a member of ABC, we have resources to continued training for our more seasoned electricians which allows them to refresh their skills or expand their training to include new technology and become familiar with a broader scope of the electrical industry. We also use ABC training for our foreman's training and multiple project management training sessions.

**WORKER PROTECTION AND INVESTMENT CERTIFICATION FORM**

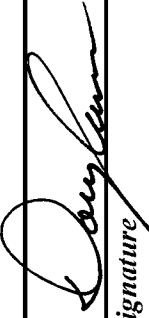
A. Pursuant to Executive Order 2021-06, *Worker Protection and Investment* (October 21, 2021), the Commonwealth is responsible for ensuring that every worker in Pennsylvania has a safe and healthy work environment and the protections afforded them through labor laws. To that end, contractors of the Commonwealth must certify that they are in compliance with all applicable Pennsylvania state labor and workforce safety laws including, but not limited to:

1. Construction Workplace Misclassification Act
2. Employment of Minors Child Labor Act
3. Minimum Wage Act
4. Prevailing Wage Act
5. Equal Pay Law
6. Employer to Pay Employment medical Examination Fee Act
7. Seasonal Farm Labor Act
8. Wage Payment and Collection Law
9. Industrial Homework Law
10. Construction Industry Employee Verification Act
11. Act 102: Prohibition on Excessive Overtime in Healthcare
12. Apprenticeship and Training Act
13. Inspection of Employment Records Law

B. Pennsylvania law establishes penalties for providing false certifications, including civil penalties; contract termination; and three-year ineligibility to bid on contracts under 62 Pa. C.S. § 531 (Debarment or suspension).

**CERTIFICATION**

I, the official named below, certify I have read and understand this Worker Protection and Certification Form and I am duly authorized to execute this certification on behalf of the firm identified below, and the firm identified below is compliant with all applicable Pennsylvania state labor and workplace safety laws, including, but not limited to, those listed in Paragraph A, above. I understand that I must report any change in the firm’s compliance status to the DGS Public Works immediately. I further confirm and understand that this Certification is subject to the provisions and penalties of 18 Pa. C.S. § 4904 (Unsworn falsification to authorities).

	9/20/22
<i>Signature</i>	<i>Date</i>
Doug Coonan	
<i>Name (Printed)</i>	
Cedar Electric Inc	
<i>Firm Name (Printed)</i>	
C-1101-0054.4	
<i>DGS Project Number</i>	



## **WORKFORCE SAFETY**

As I have previously mentioned being a member of ABC gives Cedar Electric endless opportunities for training of all levels. Each ABC apprentice receives basic first aid training during their courses. Each graduate receives their 10 Hour OSHA certificate and most of our foremen go on to receive their 30 Hour OSHA certificate.

Cedar Electric has weekly toolbox talk meetings where subjects are sent to us by ABC to cover the most active safety issues at the current time.

Everyone of Cedars employees was just certified or re-certified in CPR and First Aid. This training was completed in our office by a local certified instructor and again ABC was instrumental in getting this training completed for us.

I believe our safety program is top notch and I believe our EMR ratings clearly show we take safety very seriously.





## Quality Control Plan

### Quality Control Personnel

Cedar Electric Inc fully integrates its quality management system into the organization structure and performance management system for each project. We:

- Appoint a Project Superintendent and a Project Manager to each project with well-defined quality responsibilities and the authority to carry them out
- Enforce policies that monitor work conditions before and during work so that quality results are assured
- Have well-defined quality responsibilities for every employee with specific quality responsibilities for key job positions

### Project Quality Coordination and Communication

Cedar Electric Inc tightly controls the construction process to ensure quality results. We:

- Plan quality communications through meetings, reporting requirements and points of contact
- Have project start-up meetings to communicate project goals and expectations

### Employee Qualifications

Cedar Electric Inc ensures that only knowledgeable, capable employees carry out the planning, execution and control of our projects. We:

- Identify employee qualification requirements, including licensing requirements, training qualifications, responsibilities and authority for each job position
- Train field employees on quality standards and procedures for their position
- Review ongoing employee qualifications and evaluate quality practices and performance as part of the employee performance management process





### **Qualification of Subcontractors and Suppliers**

Cedar Electric Inc purchases only from subcontractors and suppliers that consistently meet Cedar Electric standards for quality. We:

- Clearly define subcontractor and supplier qualification requirements including licensing requirements, compliance with specific quality standards, qualification of personnel and quality improvement processes

### **Quality Responsibilities**

The Project Superintendent is responsible for ensuring the overall effectiveness of the Quality System for a specific project. Regardless of other duties, the Project Superintendent is responsible for:

- Planning project quality controls required by Cedar Electric's Quality Systems and contract requirements
- Manage the operation of the Cedar Electric Quality Systems on the project
- Implement and manage all phases of quality control
- Communicating project-specific quality requirements to all affected departments, subcontractors and customers
- Monitoring progress of activities
- Ensuring that the Quality System is maintained

### **Work Task Quality Inspections**

Cedar Electric identifies a list of work tasks, phases of production, which will be quality controlled. Each work Task is a subject to a series of inspections; before, during and after the work is complete. Each inspection verifies compliance with full scope of the relevant specification; not limited to checkpoints for heightened awareness.

- The initial task-ready inspection occurs when crews are ready to start work and ensures that work begins only when it does not adversely impact quality results
- Incoming material inspections verify that materials are as specified and meet all requirements necessary to assure quality results
- Work-in-progress inspections continuously to verify that work conforms to project specification and workmanship expectations.



- At the completion of the Task an inspection verifies that work, materials and tests have been completed in accordance with project quality requirements.
- Inspection results are recorded and maintained as part of the project files

### **Quality Control Report**

- Scheduled Activities completed
- General description of work in progress
- Problems encountered
- Meetings held, participants and decisions made
- Subcontractor and company crews onsite
- Visitors and purpose
- Weather conditions

### **Quality Controls of Punch List Items**

Should a problem occur in the quality of work, we systematically contain the issue and quickly make corrections Our first action is to clearly mark the item by tape or other easily observable signal.

Then we expedite a corrective action that brings the workmanship or material issue into conformance by repair, replacement or rework. In the event that we cannot correct the item to meet contract specifications, the customer will be notified and a customer approval of corrective actions is required before proceeding.



## **STAFFING RESOURCES**

Certainly, after our estimate is complete, we will know how many man hours this job will take to complete the onsite work along with the Project Management included. We know how many men the job will take; we already know the who will be the site foreman and have the electricians that will be assigned to this project. These employees will be assigned to this specific project until we are notified that we are not the awarded electrical contractor. At Cedar Electric we never bid a project if we do not have a crew available and capable to complete that project. We do not rely heavily on subcontractors to get our work completed. We staff our own low voltage electricians that are trained, certified and able to complete systems work if our subcontractors are extra busy. This type of situation very rarely happens since we have an excellent working relation with all of our subcontractors and we go out of our way to help each other out.



## **SKILL TRAINING**

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14-602034532

This card acknowledges that the recipient has successfully completed:

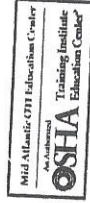
**30-hour Construction Safety & Health**

This card is issued to:

**Brody Longstaff**

Kevin Keith  
Trainer Name

3/22/2019  
Date of Issue



877-700-6212  
<http://www.osharmdatlantic.org/>

OSHA recommends Outreach Training Courses as an orientation to occupational safety and health workers. Participation is voluntary. Workers must receive additional training on specific hazards of their job. This course completion does not expire.

Use or distribution of this card for fraudulent purposes, including false claims of having received training, may result in prosecution under 18 U.S.C. 1001. Potential penalties include substantial criminal fines, imprisonment up to 5 years, or both.

To verify this training, scan the QR code with your mobile device.



Rev 1/2019





# 3M Energy Academy Certificate of Training Attendance

**Brody Longstaff**

To

**CEDAR ELECTRIC INC.**

Company

## Course Description

The above recipient attended a 4 hour course which included the following topics:

**Cable Theory and Prep, Medium Voltage (5-35kv) Terminating and Elbows**

\* Product Training was given according to 3M's published installation instructions for such cable accessories.

**12/12/2020**

Date

**Lititz, PA**

Location

**Jim McClain**

Instructor

**Major Projects Rep**

Title





baron insurance group  
auto home life business

November 8, 2021

RE: Cedar Electric Inc. Experience Modification  
528 Cheltenham Court., Lititz PA 17543

To Whom it May Concern:

Cedar Electric Inc has an Experience Modification/Merit factor of .868 effective 4/1/2021-4/1/2022. The previous Experience Modification/Merit factor was .882 and was effective from 4/1/2020-4/1/2021.

Sincerely,

A handwritten signature in black ink that reads "Erica Kellenberger".

Erica L. Kellenberger  
Commercial Lines Agent  
[ericae@baroninsurancegroup.com](mailto:ericae@baroninsurancegroup.com)  
717-665-2985

20 East High Street ● Manheim, PA 17545 ● 717.665.2985 ● Fax: 717.664.2587  
48 Queen Road, Suite 4 ● Gordonville, PA 17529 ● 717.768.0244 ● Fax: 717.664.2587  
[baroninsurancegroup.com](http://baroninsurancegroup.com)





baron insurance group

auto home life business

March 16, 2019

RE: Experience Modification  
Cedar Electric Inc  
528 Cheltenham Court  
Lititz PA 17543

To Whom it May Concern,

Cedar Electric Inc has an Experience Modification/**Merit Rating** Factor of .950 effective 4/1/2019-2020.

Sincerely,

A handwritten signature in cursive script that reads "Rachel Wiegmann".

Rachel Wiegmann, CIC, CISR  
Commercial Account Executive  
[rachels@baroninsurancegroup.com](mailto:rachels@baroninsurancegroup.com)  
(717)665-2985

20 East High Street • Manheim, PA 17545 • 717.665.2985 • Fax: 717.664.2587  
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[baroninsurancegroup.com](http://baroninsurancegroup.com)



baron insurance group  
auto home life business

March 4, 2018

RE: Experience Modification  
Cedar Electric Inc  
528 Cheltenham Court  
Lititz PA 17543

To Whom it May Concern,

Cedar Electric Inc has an Experience Modification Factor of .8640 effective 4/1/2018-2019.

Sincerely,

A handwritten signature in black ink that reads "Rachel Wiegmann".

Rachel Wiegmann, CIC, CISR  
Commercial Account Executive  
[rachel@baroninsurancegroup.com](mailto:rachel@baroninsurancegroup.com)  
(717)665-2985

20 East High Street • Manheim, PA 17545 • 717.665.2985 • Fax: 717.664.2587  
48 Queen Road, Suite 4 • Gordonville, PA 17529 • 717.768.0244 • Fax: 717.664.2587  
[baroninsurancegroup.com](http://baroninsurancegroup.com)



baron insurance group

auto home life business

July 13, 2017

RE: Experience Modification  
Cedar Electric Inc  
528 Cheltenham Court  
Lititz PA 17543

To Whom it May Concern,

Cedar Electric Inc has an Experience Modification Factor of .8500 effective 4/1/2017-2018.

Sincerely,

A handwritten signature in cursive script that reads "Rachel Wiegmann".

Rachel Wiegmann, CIC, CISR  
Commercial Account Executive  
[rachels@baroninsurancegroup.com](mailto:rachels@baroninsurancegroup.com)  
(717)665-2985

20 East High Street • Manheim, PA 17545 • 717.665.2985 • Fax: 717.664.2587  
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[baroninsurancegroup.com](http://baroninsurancegroup.com)



**3M Energy Academy**  
**Certificate of Training Attendance**

**Josh Palmatier**

To

**CEDAR ELECTRIC INC.**

Company

**Course Description**

The above recipient attended a 4 hour course which included the following topics:

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**12/12/2020**

Date

**Lititz, PA**

Location

**Jim McClain**

Instructor

**Major Projects Rep**

Title

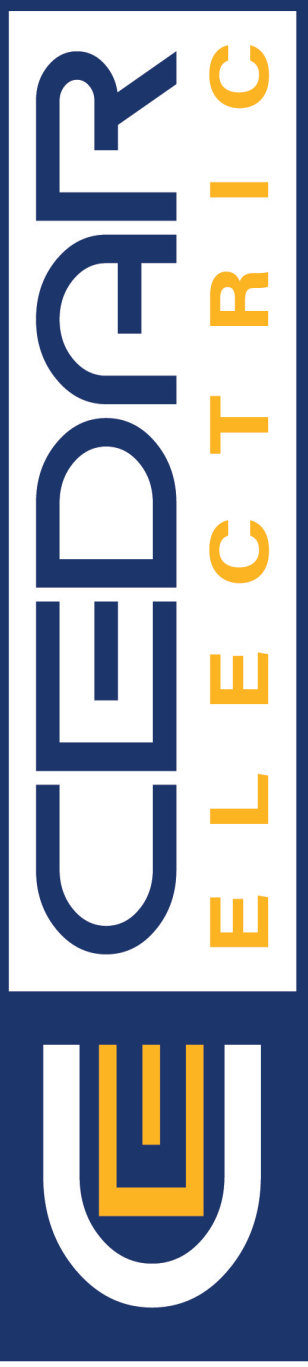




## Covid-19 Job Site Protocols

- If you don't feel well, **STAY HOME** and take a covid test.
- If you have Covid-19 stay home for at least 5 days. On day 6 if your symptoms are improving or you no longer have symptoms you may return to work but must wear a mask until day 10 of your sickness.
- If you have been in close contact with someone that has been diagnosed with COVID-19 and you are up to date on your vaccine or have had Covid-19 in the past 90 days you may go to work but must wear a mask for 10 days. If you are not vaccinated or did not have Covid-19 in the last 90 days you must stay home for at least 5 days. If no symptoms are present on day 6 you may return to work but wear a mask until day 10 of your exposure.
- If you start feeling poorly at work (with common Covid-19 symptoms) **GO HOME** immediately and report to your supervisor via phone call that you are not feeling well.
- Do not hesitate to bring any questions or concerns to your Foreman
- For more info., please visit **CDC.GOV**





## **Cedar Electric Inc. Safety Plan**

In addition to providing each employee and subcontractor with a copy of this plan, Cedar Electric conducts periodic meetings to instruct employees in the recognition or avoidance of unsafe conditions. These meetings shall also emphasize the requirements of specific owner/users of each construction site to minimize exposure to unsafe/unhealthy conditions.

All phases of our Health and Safety Plan meet OSHA standards and also address items listed in the Army Corp of Engineers Manual EM 385-1-1.

Weekly safety information "TOOL BOX" meetings shall be held to review safe use of hand tools.

Safety inspections are completed daily.

Phase hazard meetings shall also be held prior to the start of each phase of a project. Phase hazards shall be conducted during preparatory inspections for each definable feature of work.

Employees shall inspect job site daily and note any correction and corrective action needed or taken.

Employees shall record any specific safety items as related to definable features and coordinate with the PROJECT MANAGER to insure all safety items are covered.

CONTACT FOR SAFETY: Doug Coonan 717-945-7982

## **ACKNOWLEDGMENT**

### **Compliance Responsibility**

All work activity and product will comply with applicable Federal, State and municipal laws, codes and regulations such as 29 CFR 1926 OSHA Construction Industry Standards, EPA, DEP and National Fire Protection Association (NFPA) Code 241, Standard for Safeguarding Construction, Alteration, and Demolition Operations, 2009 Edition. Any fines or damages incurred for fault or negligence in meeting the terms of applicable codes and standards will be paid in accordance with 52.236-7.

### **Intervention Authority**

Facility Safety Officer has intervention authority to immediately halt construction activities should an individual(s) be placed in imminent danger or a serious threat to the loss of facilities or a serious threat to the environment.

**No Alcoholic Beverages/Firearms** will be allowed on the medical center grounds.

### **Security is Paramount**

Access to construction sites will be secured at all times to prevent people (veterans, visitors and staff) from wandering into the work areas that may be hazardous. Penthouse/attic, mechanical room and roof access doors will not be propped open and left unattended.



### **PROCEDURES FOR ON-SITE MEDICAL, FIRE OR ACCIDENT EMERGENCIES**

Each of our job trailers is equipped with a First Aid Kit. Workers are trained in First Aid and CPR and are trained to provide emergency first aid or dial 911 for emergency assistance.

Workers who are injured and in need of medical treatment will be transported to a local hospital or taken there by local ambulance, depending on the severity of the injury. A Workers' Compensation Medical Panel is posted in each job site trailer.

Foremen are required to investigate every injury and complete the necessary paperwork for processing a Worker's Compensation claim for our corporate office.

All OSHA 300 log injuries and exposures will be noted on Daily Log and the COTR will be notified immediately of severe injuries.

### **NO SMOKING**

Construction staff will not be allowed to smoke in buildings, on the grounds or on construction sites.

### **FIRE/LIFE SAFETY**

Fire extinguishers are provided at each job site for any fire emergencies and will be maintained and training will be provided in accordance with Attachment A.

No disruption of systems will occur without receiving prior approval of Contracting Officer Technical Representative (COTR). A 15-day advance notice will be provided for planned shutdowns. An interim measure will be requested from the COTR for disruptions fire alarm, sprinkler, generator and medical gas systems.

All temporary construction partitions will be smoke-tight and made of noncombustible material that will not contribute to the development or spread of fire.

### **DAILY INTERIM LIFE SAFETY MEASURES**

Daily checks will be performed and documented using form (Attachment B).

### **GENERAL TRAINING REQUIREMENTS FOR ON-SITE WORKERS**

#### **Occupational Safety and Health Training Course**

Before arriving on site all workers will have successfully completed a 10-hour of "Construction Safety & Health" and all foremen/superintendents will have completed a 30-hour course.

#### **Awareness Module - Attachment C**

#### **Mandatory OSHA Training Records, such as industrial truck, hoisting/rigging, jacks, etc.**

Copies of training records will be maintained on site.

### **ELECTRICAL**

All temporary electrical conductors and equipment shall be approved. Employees will ensure that electrical equipment is free from serious physical harm to employees. All electricians shall comply with all regulations as set forth by OSHA regulations.

No employee shall work in the proximity to any part of an electric power circuit that the employee could contact the electric power circuit in the course of his work, unless the employee is protected against electric shock by de-energizing the circuit and grounding it or other means. Protective gloves will be provided to employees where the exact locations of underground electric power lines is known, if these employees are using





jackhammers, bars or other digging tools. Employees shall post warning signs where necessary to advise employees of the location of such lines, the hazards involved and the protective measures to be taken.

Working areas, walkways and similar locations shall be kept clean of cords to eliminate hazards. No area will be used as a passageway if there are energized parts or electrical equipment exposed. Worn and frayed cable will not be used. Extension cords shall not be fastened with staples or suspended by wire. Ground fault adapters shall be used with all extension cords.

Work will not be performed on live circuits of 50 volts or greater. The two exceptions are when:

- De-energizing introduces additional increased hazards, i.e., interruption of life support equipment, emergency alarm systems or at times, removal of illumination or ventilation, etc.
- It is not feasible due to equipment design or operation limitations, i.e., performing diagnostics, testing and troubleshooting, etc.

Electrical contractor will assess the risk associated with working on live power and will use professional judgment in deciding to work on a "live circuit".

#### **LOCK OUT/TAG OUT PROCEDURES:**

OSHA Lock Out/Tag Out procedures have been established for all workers. Locks and tags are available at job sites for locking out and/or tagging out breakers and other electrical equipment when work is being performed.

Workers are instructed to communicate any lock out or tag out procedures with other contractors on a job site.

Lock Out/Tag Out Training is provided to all workers of our company prior to the start of any job site.

#### **HAND AND POWER TOOLS**

All hand and power tools to be used on the job shall be in safe and operable condition. If tools have been designed to accommodate guards, they shall be equipped with such guards when in use. Belts, gears, shafts, pulleys, sprockets, spindles, drums, fly wheels, chains and all other moving parts of the equipment shall be guarded if such parts are exposed to contact by employee's Protective personal gear will be provided to all employees using hand and power tools and exposed to the hazards of falling, flying, abrasive and splashing objects, or who have exposure to dusts, fumes, mists, vapors or gases.

Tools and equipment will not be left unattended in public areas.

#### **MATERIAL HANDLING, STORAGE USE AND DISPOSAL**

No lift will be made over occupied areas. All material will be stored securely to prevent sliding, falling or collapse. Maximum safe load limits will be posted except for floor or slab on grade. Aisles and passageways will be kept clear so the employees may handle and move materials and equipment safely. Materials will be stored away from floor-openings and hoist ways. Rigging equipment will be inspected prior to the beginning of each shift. Defective rigging equipment shall be repaired immediately or removed from the jobsite. When not in use rigging equipment will be removed from the work area. All rigging accessory gear will be inspected and if defective its use will be prohibited.

#### **MATERIAL SAFETY DATA SHEETS (MSDSs)**

No hazardous substance as defined in 29 CFR 1910.1200 will be allowed on site without a MSDS. A master copy of chemical inventory list will be maintained and copies of all MSDSs kept in the in-site office and will be readily available for an OSHA audit at any time. All employees will be advised that they have a right of access and may read the MSDSs upon request.



### **BODILY PROTECTION**

Employees will be required to adhere to certain requirements concerning the appropriate attire to be worn; trousers significantly shorter than ankle length will not be permitted regardless of weather conditions. Shirts worn on the jobsites are required to have a sleeve length which will cover three-quarters of the arm area between the shoulder and the elbow.

Employees reporting to jobsites will be required to wear safety shoes. Any individual wearing soft, non-safety rated shoes will be removed from the jobsite.

### **FACE AND EYE PROTECTION**

Employees shall be provided with eye and face protection when machines or other operations present the potential for eye or facial injury. This protective gear shall meet the specifications of ANSI Z87.1-1968, Practice for Occupational and Educational Eye Face Protection. Goggles for eye protection will be provided where necessary. All protective gear will be clean and in good condition. The use of defective gear will be prohibited. Any employee whose occupation requires exposure to laser beams shall be furnished with suitable laser safety goggles.

### **HEAD PROTECTION**


It is mandatory that each employee working in the areas where there is potential danger of head injury from impact, or from falling or flying objects, or from electrical shock and/or burns, be equipped with and wear protective helmets. These helmets must meet the specifications of ANSI ZB9.1-1969 and Z89.2-1971, Safety Requirements for Industrial Head Protection. Any employee not in compliance will be removed from the jobsite.

**Objective:** To ensure that workers and the visitors are properly protected while on construction sites.

### **Sensible Risk Management:**

- **Ensuring** that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust action.
- **Enabling** contractors to understand that as well as the right to protection, they also have to exercise responsibility.
- **Assessing** the risks on the construction site for determining when hard hats shall be worn. Protective helmets shall be worn in any work environment where there is a possible danger of head injury from impact, or from falling, or flying objects, or from electrical shock and burns. Refer to American National Standards Institute, Z89.1 and Z89.2 for helmets meeting a particular protection.

### **Contractors' Risk Assessment:**

- **Identify** work-activities that have potential for head injury from impact, or from falling, or flying objects, or from electrical shock and burns.
- **Determine** what phases of projects that will require use of hard hats or deem scaffolding, trenching, demolition, electrical work and rough-in activities as hard hat phases or deem the whole construction period requiring hard hats.
- **Post** signs at all entrances of construction when hard hats are required. 
- **Present** Contracting Officer Technical Representative a signed and dated copy of risk assessment.

### **GASES, VAPORS, FUMES, DUSTS AND MISTS**

The contractor will comply with section 1926.55 of OSHA regulations when exposing employees to inhalation, ingestion, skin absorption or contact with any airborne contaminant (gases, vapors, fumes, dusts and mists). If the OSHA regulation fails to adequately protect, or is not feasible to implement, appropriate and properly selected respiratory devices, based on the hazards of the work, shall be provided and shall be used. Such devices would be approved by the U.S. Department of Mines.



### **NOISE EXPOSURE**

Protection from noise shall be in compliance with OSHA 1926.52. Ear protection devices shall be provided and must be used whenever it is necessary to reduce noise levels for health and safety purposes. Noise levels and the duration of exposure to particular noise levels shall comply with OSHA 1926.52, Permissible Noise Exposure, Plain cotton will not be permitted for use as a protective ear device.

### **ILLUMINATION**

General construction area, all ramps, runways, corridors, offices, shops and storage facilities shall be provided with adequate illumination. The level of illumination provided shall in compliance with OSHA 1926.56.

### **SIGNS, SIGNALS AND BARRICADES**

Accident and prevention signs and tags will be provided and will comply with OSHA 1926.200. Signs will be removed when danger no longer exists. Signs will be of the appropriate color and style, as follows: "DANGER: Immediate hazard." Red predominating color for upper panel, black border, white lower panel. "CAUTION: Potential hazard warning." Yellow predominating color, black upper panel, lower yellow panel, black lettering. "DIRECTIONAL" White with black panel. "SAFETY INSTRUCTIONS:" White and green upper panel. All signs will conform to ANSI D.6 .1-1971.

### **ACCIDENT PREVENTION TAGS**

Tags shall be used as a temporary means of warning employees of existing hazards, such as defective tools, Equipment machinery.

### **SAFETY BELTS, LIFELINES AND SAFETY NETS**

Safety belts, lifelines and lanyards shall be used. Such gear will be in compliance with OSHA 1926. Safety nets will be provided and used when workplaces are more 25 feet above the ground or other surfaces where the use of ladders scaffolds catches platforms, temporary floors, safety lines and belts are not practical. Safety nets will be of the type to meet or exceed the standards set by OSHA.

### **ASBESTOS DEMOLITION**

All asbestos demolition will be performed by a licensed contractor in accordance with Approved asbestos abatement plan. Only, employees who are competent mechanics specially schooled and trained in abatement regulations shall be allowed in the containment. The contractor will also have available during renovation work a competent supervisory employee who is capable of identifying existing asbestos in the workplace and who has the authority to take prompt corrective measures to eliminate such hazards.

### **FORMWORK AND FALSEWORK**

The planning and design of formwork and false work shall be in accordance with provisions of the American Concrete Institute, Publication ACI 347-78, and Recommended Practice for Concrete Formwork and ANSI A10.9, Safety Requirements for Concrete Construction and Masonry Work.

All formwork, false work, structural shoring, and bracing shall be designed, erected, braced, and maintained so that it will safely support all vertical and lateral loads that might be applied until such loads can be supported by the structure.

The design of formwork and false work shall be submitted for review to the Designated Authority.

Stripped forms and shoring shall be removed and stockpiled promptly after stripping. Protruding nails, wire ties, and other form accessories not necessary to subsequent work, shall be pulled, cut, or other means taken to eliminate the hazard. Employees will be supplied with and required to wear eye and/or face protection during all operations involving nailing into concrete.



## **DEMOLITION**

Prior to the commencement of demolition operations, a competent individual will inspect and document his findings of the structure to determine the condition of the framing, floors and walls and the possibility of any unplanned collapse of any portion of the structure. If applicable, all electric, gas, water, steam, sewer and other services shall be shut off, capped or otherwise controlled before demolition work begins. When necessary to maintain power, water and other utilities during demolition such lines will be temporarily relocated and protected. Appropriate hazard signs will be posted. Entrances to multi-story structures being demolished shall be completely protected. Demolition will begin at the top and demolition work will proceed downward. All stairs, passageways, ladders and incidental equipment shall be frequently inspected and maintained in a safe and operable condition. No material will be dropped to any point lying outside the exterior walls of the structure unless the area is adequately protected. Chutes shall be enclosed. Guardrails to

the chutes will be installed where necessary. Debris disposed of through floor openings shall be performed through an opening no larger than 25 percent of the total floor area. Weakened floors made unsafe by the demolition work will be shored for safety. Demolition debris will be hauled away daily or frequently enough so as not to accumulate an unsafe amount of weight on any floors. Walls will be left in stable condition at the end of each workday.

No demolition or other dust generating activity shall commence before an issuance of an Infection Control Risk Assessment (ICRA) is issued by the Contracting Officer Technical Representative. See Attachment D.

## **DUST & ODOR CONTROL**

Adequate negative air fan(s) equipped with HEPA filter(s) will be used to ensure dust and odors do not migrate into the adjacent spaces.

Sticky mats will be placed at points of exiting (construction-side of door) into adjacent occupied spaces. Sheets will be peeled off before becoming soiled.

## **EXCAVATIONS AND TRENCHING**

The services of a utility locating company will be used along with record drawings prior to the commencement of excavation.

All excavation vehicles shall have an unobstructed view to the rear otherwise a reverse signal alarm audible above surrounding noises, or an observer signals that it is safe to back up. All vehicles will be equipped with windshields and power wipers. Cracked and broken glass will be replaced immediately. No vehicle will be used with fogged or frosted windshields. All haulage vehicles whose pay load is loaded by means of cranes, power shovels, loaders or similar equipment shall have a cab shield or canopy to protect the driver from falling or shifting materials.

Trucks with dump bodies will be equipped with positive means of support, permanently attached and capable of being locked in position to prevent accidental lowering of the body while maintenance or inspection work is being performed. Operating levers controlling hoisting or dumping devices on haulage bodies shall be equipped with a latch or other device which will prevent accidental starting or tripping of the mechanism. Trip handles for tailgates of the dump trucks shall be arranged so that the operator-will be in no danger during the dumping process

Only those trenches for which material is on hand and ready for placing therein shall be opened. As soon as practicable after material has been placed and work approved, trenches shall be backfilled and compacted as required. In the meantime, all resulting hazardous conditions shall be marked and lighted.





The sides of all excavations in which employees are exposed to danger from moving ground shall be guarded by a shoring system, sloping off the ground, or other equivalent means. The minimum sloping for excavations >5 feet, but <20 feet in any soil, with the exception of solid rock, shall be no less than 1.5 horizontal to 1 vertical.

Diversion ditches, dikes, or other means shall be used to prevent surface water entering an excavation and to provide good drainage of the area adjacent to the excavation.

Excavated materials shall be stored and retained at least 2 feet from the edge of the excavation and at a distance to prevent excessive loading on the face of the excavation.

Boulders, stumps, or other materials that may slide or roll into the excavation shall be removed or made safe.

Guardrails, fences, or barricades and warning lights or other illumination maintained from sunset to sunup, shall be placed at all excavations which are adjacent to paths, walkways, sidewalks, driveways, and other pedestrian or vehicle thoroughfares. Adequate physical protection shall be provided at all remotely located excavations.

Walkways or bridges with guardrails shall be provided where people or equipment are required or permitted to cross over excavations.

Banks more than 5 feet high shall be shored, laid back to a stable slope, or provided with other equivalent protection where employees may be exposed to moving ground or cave-ins. Trenches less than 5 feet in depth

also shall be protected when examination of the ground indicates hazardous ground movement may be expected. The safe angle of repose for soil conditions and bracing systems shall be determined by a qualified person.

Portable trench boxes, sliding trench boxes, or shields shall be designed, constructed, and maintained in a manner to provide protection equal to or greater than the sheathing and shoring required for the situation.

Ladders used as access ways shall extend from the bottom of the trench to not less than 3 feet above the surface. Lateral travel to an exit ladder shall not exceed 25 feet.

Sloping for excavations >5 feet, but <20 feet shall be benched no less than 1.5 horizontal to 1 vertical

#### **CRAWLER, TRUCK AND WHEEL MOUNTED CRANES**

All cranes shall be provided and operated by a reputable equipment company with certified operators.

All mobile hydraulic cranes shall meet the applicable requirements of ANSI B30.15. All crawler, truck, or locomotive cranes in use shall meet the requirements for design, inspection, construction, testing, maintenance, and operation in ANSI B.30.5, Safety Code for Crawler, Locomotive and Truck Cranes.

A means shall be provided for the crane operator to visually determine the levelness of the crane.

A boom angle or radius indicator shall be provided within operator's view.

Equipment manufacturer's specifications and limitations shall be complied with.

Rated load capacities, recommended operating speeds, and special hazard warnings or instructions shall be posted on all equipment and be visible from the operator's station.

Equipment shall be inspected before each use and all deficiencies corrected before further use.

Accessible areas within the swing radius of the revolving superstructure shall be barricaded.

Except where electrical distribution and transmission lines have been de-energized and visibly grounded at point of work, or where insulating barriers not a part of or an attachment to the equipment or machinery have been erected to prevent physical contact with the lines, no part of a crane or its load shall be operated within 10 feet



of a line rated 50 kV or below; 10 feet+ 0.4 inches for each 1 kV over 50 kV for lines rated over 50 kV, or twice the length of the line insulator, but never less than 10 feet.

### **WELDING AND CUTTING**

When transporting compressed gas cylinders the valve protection caps shall be in place and properly secured.

Cylinders will be moved by tilting and rolling them on the bottom edges. No cylinder will be intentionally dropped, struck or allowed to strike each other violently. When hoisted, cylinders shall be on a cradle, sling board or pallet. Cylinders will be properly secured before hoisting. Caps shall not be pried loose. Chains or other steadying devices will be used to prevent cylinders from being knocked over while in use. When not in use the cylinder valve will be closed and will be kept in an upright position at all times. There will be no mixing of gases and no refills by employees.

Each welding or cutting unit shall be equipped with a compatible fire extinguisher.

No damaged or defective cylinders shall be used. Employees will be properly instructed in the safe use of cylinders containing oxygen, acetylene or other fuel gases.

Compressed air and gas equipment shall be secured while stored in an upright position. Canisters must be segregated and all other provisions of Section 21, EM38S-1-1, Corps of Engineers Safety and Health Regulations Manual, adhered to.

All hoses used for gas and oxygen will be inspected prior to each use and *if* defective will be replaced immediately. Hoses will be kept clear of passageways, ladders and stairways.

Torches will be kept clean and in good condition with defective torches being replaced immediately. Proper lighting methods will be used. Good housekeeping techniques around areas where welding is performed will be enforced. All welding and cutting cables will be insulated. Defective cables will be replaced immediately.

Workers will be protected by flame-proof screens. Proper grounding will be enforced. Proper ventilation systems will be in place with contaminated air exhausted from the work space. When necessary, fire watching will be enforced. Employees performing any type of welding will be required to wear protective eye equipment, hand shields when appropriate and welding helmets. Respirators will be worn by employees when welding, cutting or heating around preservative coatings.

Hot Work procedures, as recommended by OSHA will be followed. A 2S foot clearance shall be maintained when any hot work activities are completed at a job site. A fire extinguisher will be readily available at any hot work site. No hot work activity will commence until a Hot Work Permit *is* issued by the COTR.

Shielding curtains will be used to protect other workers who are within 50' of the welding arc or require appropriate eye protection worn.

### **SCAFFOLDING**

The contractor will provide competent and qualified personnel to erect and dismantle all scaffolding. Guard rails and toe boards shall be installed on all open sides and ends of any platform that is more than six (6) feet above the ground or floor.

### **CONFINED SPACE ENTRY PROCEDURES**

In the event of a confined space entry by any of our workers, permits will be obtained and all OSHA confined space entry procedures will be followed.

In addition, Core Drill permits will be issued by the COTR.



#### **UTILITY LOCATING PROCEDURES**

When needed, a utility locating service or call to the PA Utility Hot Line will be used to locate utility lines. Drawings of utility line locations will be made available for review prior to excavation.

#### **HAZARD ANALYSIS FOR SPECIFIC HAZARDS**

Any hazardous job tasks not already identified in this Plan will be subject to a Hazard Analysis by the Job Site Superintendent or Foreman and upon completion, this analysis will be reviewed with workers on our job sites. Workers will be advised of Personal Protective Equipment (PPE) required for specific activities. Analysis and PPE determination will be kept on file in our job site office for review.

Doug Coonan

CEDAR ELECTRIC INC.





**B. STEPS TAKEN TO PROMOTE SAFETY IN PAST (3) YEARS**

Cedar Electric is committed to safety. We believe that our work safety history on prior jobs has proven that. We are not perfect, but we strive to become better which requires a continual effort.

In the past three years, Cedar Electric has made sure that the staff has a 30 hr OSHA certificate. Employees get weekly Tool-Box-Talks and weekly safety inspections are reviewed on-site. All employees have OSHA First Aid and CPR certification. Cedar Electric has also joined the Keystone Chapter of ABC and sent apprentices to their training school. This program reviews important safety topics so they are prepared to work safely and correct unsafe conditions. Cedar will also post yellow safety signs on the job site so that workers on the project can understand expectations.

Cedar Electric takes safety very seriously. Recently, they removed subcontractor employees who refused to comply with safety requirements.



## **SKILL TRAINING**

Every one of our electricians has completed the four-year apprenticeship course at some point in their career. As an active member of the Capital Region ABC our new hire first step is the electrical apprenticeship program. As a member of ABC, we have resources to continued training for our more seasoned electricians which allows them to refresh their skills or expand their training to include new technology and become familiar with a broader scope of the electrical industry. We also use ABC training for our foreman's training and multiple project management training sessions.



## **WORKFORCE SAFETY**

As I have previously mentioned being a member of ABC gives Cedar Electric endless opportunities for training of all levels. Each ABC apprentice receives basic first aid training during their courses. Each graduate receives their 10 Hour OSHA certificate and most of our foremen go on to receive their 30 Hour OSHA certificate.

Cedar Electric has weekly toolbox talk meetings where subjects are sent to us by ABC to cover the most active safety issues at the current time.

Everyone of Cedars employees was just certified or re-certified in CPR and First Aid. This training was completed in our office by a local certified instructor and again ABC was instrumental in getting this training completed for us.

I believe our safety program is top notch and I believe our EMR ratings clearly show we take safety very seriously.