rabbittransit: WSP-01 OVERVIEW
BLOODBORNE PATHOGENS & EXPOSURE CONTROL PLAN

What the plan is and how it applies to our operation

The Bloodborne Pathogen & Exposure Control Plan deals with potential employee exposure to diseases which can be transmitted through contact with blood and other bodily fluids. The plan is intended to identify employees at risk and taking necessary precautions to ensure that they are protected from transmittal of bloodborne pathogens (BBPs).

How to comply with the Bloodborne Pathogens Plan

There are essentially three steps that need to be taken to comply with the bloodborne pathogens plan. The first step is to develop an Exposure Control Plan. The second step is to provide employees with proper personal protective equipment (PPE), and the final step is to train employees with regards to the dangers associated with BBPs, the necessary precautions required to prevent exposure, and what to do if an exposure incident occurs.

Step One – Exposure Control Plan

This requires employers to identify, in writing, tasks and procedures as well as job classifications where occupational exposure to blood and bodily fluids may occur. In other words, employers must develop a written plan that identifies employees who may be reasonably expected to come into contact with blood or other bodily fluids while performing their job duties.

> *Those employees who are designated as likely to have exposure to BBPs during their job duties must be offered the Hepatitis B Vaccination at no charge. Employees may either accept the vaccination or decline to be vaccinated. This vaccination is three shots over the better part of a year, and most employees will decline. If they do decline, they must complete a declination form and the employer must maintain this indicating that they were offered but waived the vaccination. If an employee declines the vaccination and later is exposed to BBPs, the treating medical clinic will likely administer the vaccine, which is also effective if administered immediately following exposure to the virus.*

The second part of the plan involves developing and mandating universal precautions to be taken by employees (treating body fluids/materials as if infectious) and emphasizing engineering and work practice controls to minimize exposure risks.

In other words, employers must direct employees on the proper methods to deal with blood and other unknown bodily fluids – always under the assumption that they are infectious. Employers must designate processes and methods to be used by employees to limit exposure risk when encountering blood and other bodily fluids. These processes should include washing hands and areas where skin has come into contact with blood or other bodily fluids and specific methods and materials to be used to clean up the fluids.

In setting these procedures, the employer must identify appropriate materials and personal protective equipment (PPE) to be used. Such materials and PPE must be provided at no cost to employees.

Last, the plan must identify processes to follow when an “exposure incident” occurs. An “exposure incident” is defined as one where an eye, mouth, other mucous membrane, non-intact skin, or other

internal exposure with blood or other potentially infections materials that results from the performance of an employee's duties.

A treatment plan, including optional treatments for the employee exposed must be documented in the plan. The treatment plan specifies procedures to be made available to all employees who have had an exposure incident. All laboratory tests must be conducted by an accredited laboratory at no cost to the employee. Follow-up must include a confidential medical evaluation documenting the circumstances of exposure, identifying and testing the source individual if feasible, testing the exposed employee's blood if he/she consents, post-exposure prevention steps, counseling and evaluation of reported illnesses. Healthcare professionals must be provided specified information to facilitate the evaluation and their written opinion on the need for hepatitis B vaccination following the exposure. Information such as the employee's ability to receive the hepatitis B vaccine must be supplied to the employer. All diagnoses must remain confidential.

The Exposure Control Plan must be accessible to employees.

Employers must review and update the plan when necessary to accommodate workplace changes.

Step Two – PPE and materials acquisition, distribution and maintenance

Employers must acquire PPE and materials indicated in the plan, which are designed to minimize exposure risks.

These materials must be provided to all employees identified in step one as having a reasonable expectation of exposure to BBPs.

A method for ensuring that these materials remain available should be developed and practiced.

Step Three – Training

The final step involves training of employees. Training regarding BBPs, the Exposure Control Plan, universal precautions established, and reporting exposure incidents must be provided to all applicable employees (those designated as having a reasonable expectation of exposure to BBPs) must be provided at the time of hire and biannually thereafter.

Training includes general discussion on bloodborne diseases and their transmission, exposure control plan, engineering and work practice controls, personal protective equipment, hepatitis B vaccine, response to emergencies involving blood, how to handle exposure incidents, the post-exposure evaluation and follow-up program. There must be opportunity for questions and answers, and the trainer must be knowledgeable in the subject matter.

What the plan is and how it applies to our operation

The Emergency Action Plan pertains to establishing and communicating an action plan to respond to emergencies. The Fire Prevention Plan pertains to minimizing the risk of fires and their effects.

How to comply with Emergency Action and Fire Prevention Plan

There are two steps that need to be taken to comply with the Emergency Action and Fire Prevention Plan.

- The first step is to develop a written Emergency Action and Fire Prevention Plan. The written plan must be kept in the workplace and readily available for employees to review.

- The second step is to provide training on the plan procedures to employees.

Step One – Develop a Written Emergency Action and Fire Prevention Plan

The Emergency Action and Fire Prevention Plan must be site specific with respect to emergency conditions evaluated, evacuation policies and procedures, emergency-reporting mechanisms, alarm systems and fire prevention controls. Your written plan must also designate who are the emergency evacuation coordinators – those charged with the most responsibility during the process.

Step Two – Employee Training

Employers must review the plan(s) with each employee when the initial plan is developed and thereafter with every new employee hired. Also, you must review the plan with each employee when his/her actions or responsibilities under the plan change or when the plan itself changes. While not specifically required, periodic retraining and drills in which employees can practice evacuating their workplace and gathering in the assembly area are recommended.

Training must ensure all employees understand the function and elements of your emergency action plan, including types of potential emergencies, reporting procedures, alarm systems, and evacuation plans. Any special workplace hazards must be discussed (such as bulk quantities of explosive/flammable liquids). An employer must inform employees those parts of the fire prevention plan necessary for self-protection.

rabbittransit: WSP-07 OVERVIEW

POWERED INDUSTRIAL TRUCK: FORKLIFT PROGRAM

What the program is and how it applies to our operation

The Powered Industrial Truck: Forklift Program pertains to safety requirements relating to design, maintenance, and use of fork trucks, tractors, platform lift trucks, motorized hand trucks, and other specialized industrial trucks powered by electric motors or internal combustion engines.

How to comply with the Powered Industrial Truck: Forklift Program

There are two steps that need to be taken to comply with this program. The first step involves ensuring any forklift in use meets safety and design requirements. The second step involves required training of employees who operate forklifts.

Step One – General Requirements

The general requirements of this program pertain to specific markings and labels that are required to be on approved forklifts/PIT including capacity requirements and powered industrial truck data. You should be familiar with these requirements and ensure that any forklift/PIT used in your operation meets these requirements.

Step Two – Training

Employers must ensure that each forklift/PIT operator is competent to operate the powered industrial truck. Training and evaluations must be conducted by trained persons with knowledge of, and experience using, forklifts.

Training employees on the safe operations of the forklift/PIT is required before an employee uses a forklift. The training must consist of a combination of classroom instruction, practical exercises for the operator and an evaluation of each trainee's "behind-the-wheel" proficiency. Training must be provided by someone who has been certified to operate a forklift and is familiar with forklift operations. Once a person has been successfully trained, they should be issued a certification, consisting of the name of the trainee, date of training, date of evaluation and the name of trainer.

Formal and practical training must be provided on the following subjects when applicable:

A. Forklift/Lift Truck Operations
B. Vehicle Stability
C. Vehicle Capacity
D. Traveling
E. Loading
F. Fuel Handling and Storage
G. Fire Safety
H. Safety guards
I. Operation of the Truck
J. Maintenance of the Forklift/Powered Industrial Truck
K. Practical Training Driving the Forklift/Operating the Powered Industrial Truck

An evaluation of each forklift/PIT operator's performance must be completed at least once every three years for recertification.

Additionally, refresher training and evaluations must be conducted when:

A. The operator has been observed operating the vehicle in an unsafe manner.
B. The operator has been involved in an accident or near-miss incident.
C. The operator has received an evaluation that reveals the operator is not operating the truck safely.
D. The operator is assigned to drive a different type of truck.
E. Conditions at the workplace change in a manner that could affect safe operation of the truck.

rabbittransit: WSP-02
HAZARD COMMUNICATION PROGRAM OVERVIEW

What the program is and how it applies to our operation

The Hazard Communication Program pertains to communicating and responding to physical and health hazards of chemicals present in the workplace to employees. The program is intended to identify hazardous chemicals in the workplace, educate employees with regard to these chemicals and their effects, and provide necessary documentation in the event of an exposure of an employee to a hazardous chemical. In our operation, the program is most applicable to shop personnel including cleaners, drivers and other personnel in specific situations.

How to comply with the Hazard Communication Program

There are essentially three steps that need to be taken to comply with the Hazard Communication Program. The first step is to develop a hazard communication written program. The second step is to inventory all hazardous chemicals in the workplace and to ensure that a Safety Data Sheet (SDS) is present for each chemical inventoried. The final step is to train employees on the hazard communication program, how to recognize hazardous chemicals, where information on chemicals can be found, and what to do if exposed to a hazardous chemical.

Step One – Hazard Communication Program

All workplaces where employees are exposed to hazardous chemicals should have a written program that describes how the program will be implemented in that facility. It is intended to be a blueprint for implementation of your program - an assurance that all aspects of the requirements have been addressed.

The written program should describe how the requirements for labels and other forms of warning, safety data sheets, and employee information and training, are going to be met in our facility. Additionally, the plan must indicate when and how training will be conducted and outline specific steps which will be taken when non-routine hazardous tasks are performed.

Step Two – Inventory chemicals, obtain SDS sheets

Employers should take an inventory of all chemicals present in the workplace. The hazard communication program covers both physical hazards (such as flammability), and health hazards (such as irritation, lung damage, and cancer). Most chemicals used in the workplace have some hazard potential and thus will be covered by the program.

The best way to prepare a comprehensive list is to survey the workplace. A broad perspective should be taken when doing the survey. Sometimes people think of "chemicals" as being only liquids in containers. The hazard communications program covers chemicals in all physical forms - liquids, solids, gases, vapors, fumes, and mists - whether they are "contained" or not. The hazardous nature of the chemical and the potential for exposure are the factors which determine whether a chemical is covered.

Identify chemicals in containers, including pipes, but also think about chemicals generated in the work operations. For example, welding fumes, dust, and exhaust fumes are all sources of chemical exposures. Read labels provided by suppliers for hazard information. Make a list of all chemicals in the workplace that

are potentially hazardous. For planning/training purposes, you may also want to note on the list the location(s) of the products within the workplace.

Once an employer has compiled a chemical inventory list an SDS should be obtained for each chemical on the inventory. SDSs are commonly available through each chemical supplier or the chemical manufacturer's website.

Step Three – Training

The final step in complying with the hazard communication program involves training of employees.

Training pertaining to hazardous chemicals presents in the workplace, where to find information on chemicals present (SDSs), the location of the hazard communication program, and steps to be taken to minimize exposure to hazardous chemicals must be provided to affected employees prior to their initial assignment.

Training should include specific locations of hazardous chemicals as detailed during a facility walk-through. Hazard communication training should be documented via a sign-off sheet or other documentation method so that an employer's duties are verified.

rabbittransit: WSP-09
HAZARD IDENTIFICATION

Common hazards and violations that are identified during a maintenance facility safety inspection.

Flammable and Combustible Materials

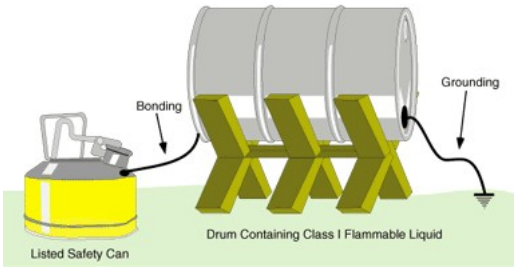
- Unlabeled chemical containers and storage tanks
- Missing safety data sheets and/or chemical inventory list
- "Open top" containers filled with flammable/combustible materials when not in use

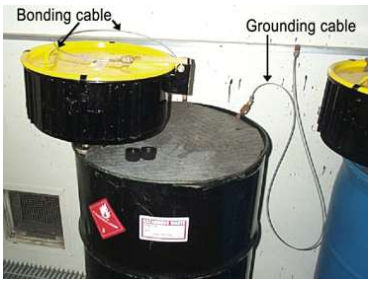


- Flammable and combustible liquids not stored in storage cabinets or in designated storage areas
  - Excessive quantities of "daily use" flammable and combustible liquids throughout shop
- Ordinary material stored in flammable storage cabinets (designed for flammable/combustible materials only)



- Missing bonding and grounding system on metal drums/containers, special conductive plastic drums, or plastic drums with metal lids and clamps that are used for dispensing flammable liquids.



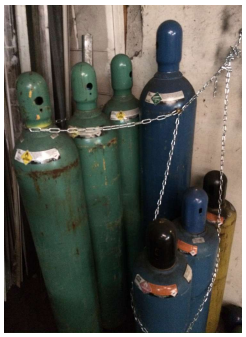


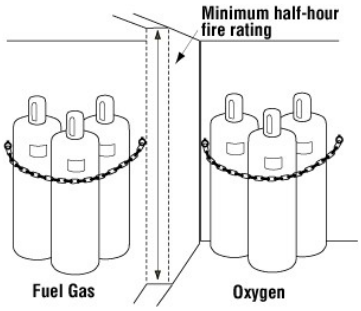
Compressed Gas Cylinders

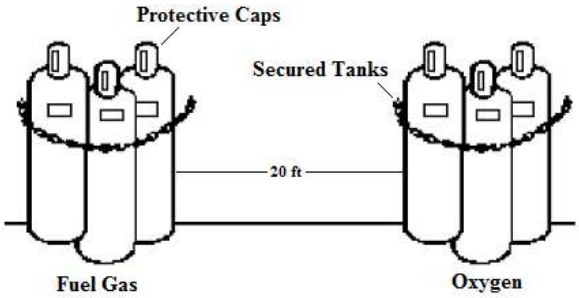
- Storage of compressed gas cylinders
  - Unprotected and unsecured cylinders
  - Missing protective valve caps
  - Oxygen (oxidizers) and acetylene (flammables) not separated by at least 20 feet or by a five-foot wall with a minimum half hour fire rating
  - Cylinders stored near highly flammable substances or by ignition sources
  - Unlabeled storage areas or cylinder markings











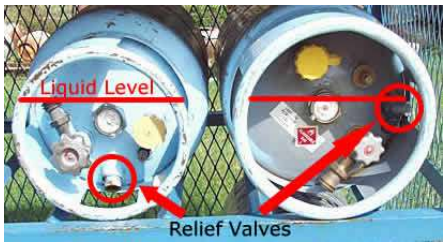
- Torch Units
  - Missing flashback arrestors on torch or torch regulator units
    - There is a difference between a backflow valve and flashback arrestor: backflow valve prevents gases from mixing in the system while flashback arrestors prevent ignition of mixed gases by preventing “flashback” (stops flames or sparks). Most flashback arrestors have built in backflow valves.


Backflow Valves


Flashback Arrestors


Liquid Petroleum Gas

- Storage of LPG tanks
  - Unprotected and unsecured cylinders
  - Tanks stored near highly flammable substances or by ignition sources
  - Unlabeled storage areas or tank markings
  - Tanks stored with the relief valve not in communication with vapors



Incorrect storage

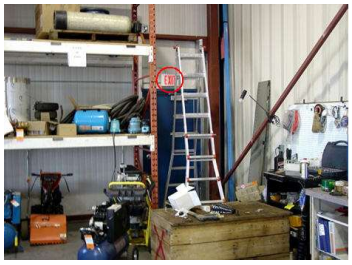
Correct storage

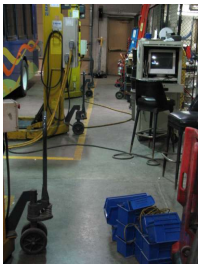
Fire Protection

- Fire extinguishers
  - Blocked, unmounted and/or unlabeled-marked fire extinguishers
  - Missing documentation for monthly visual inspections (inspection tags or document)

Walking and Working Surfaces

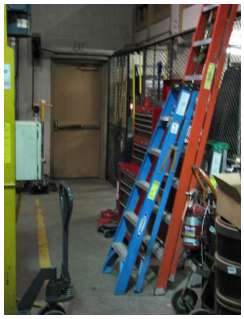
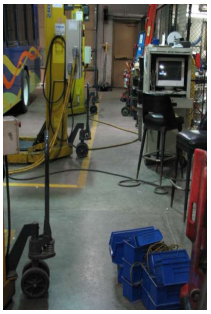
- Emergency Exits and Egress
  - Locked emergency exits when the building is occupied
  - Blocked or obstructed exits or means of egress
  - Unmarked emergency exits

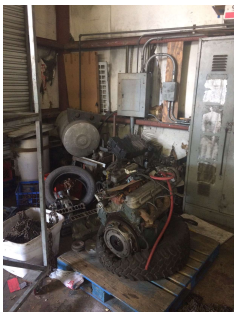




- Emergency Lighting
  - Periodic testing of emergency lighting
    - 30 second (monthly) and 90-minute (annual) testing: Self-diagnostic equipment can be setup to automatically perform routine tests (a visual inspection is still required).

- Housekeeping
  - Obstructions, clutter, slippery surfaces, damage, etc.

- Fall Protection
  - Open sided floor or platform above 4 feet not guarded with standard railing
    - A toe board or kickplate is required when falling materials could create a hazard
  - Covers, netting or other fall protection provided for service pits that are not in use



Electrical

- Outlets, junction boxes, switches and electrical panels
  - Missing covers, faceplates, knockouts, inserts (unused openings) or fixture canopies
  - Damaged or broken electrical hardware
  - Unlabeled electrical panels, circuits and switches
  - Blocked electrical panels and switches

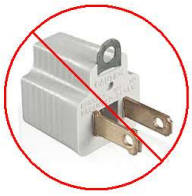


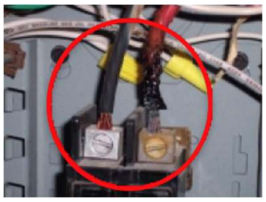


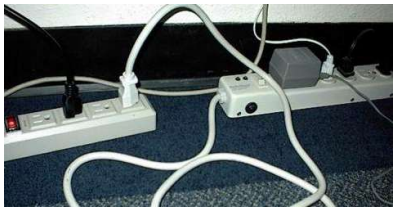




- Electrical wiring
  - Temporary wiring used as a substitute for fixed wiring of a structure
  - “Daisy chain” of power strips used at facility (connecting multiple power strips together)
  - A “cheater plug” used to cover a 3-prong plug to a 2-prong plug installed (or used improperly)
  - Damaged or spliced electrical cords (permanent/temporary wiring, tools and equipment, etc.)
  - Damaged plugs or removed grounded prongs



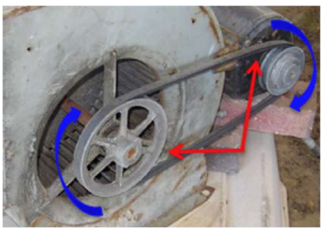





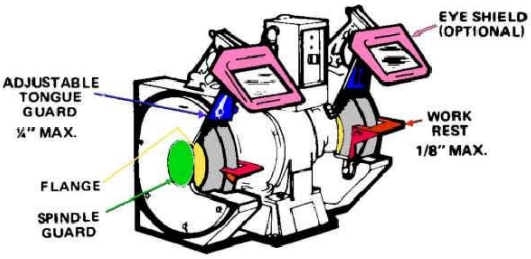

“Daisy Chain”

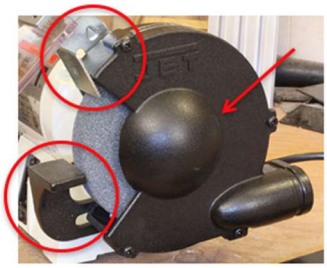
Machine Guarding

- Machine hazards
  - Guarding the point of operation, power transmission equipment (flywheels, pulleys, etc.) and other moving parts

- Bench Grinder
  - Work rest not adjusted to 1/8 inch of the wheel
  - Tongue guard not adjusted to ¼ inch of the wheel
  - Side guards not in place to cover the flange, spindle end and nut





Jacks and Jack stands

- Equipment and hardware
  - Jacks and jack stands missing capacity labels
  - Damaged jacks and jack stands





rabbittransit: WSP-03 OVERVIEW

CONTROL OF HAZARDOUS ENERGY: LOCKOUT/TAGOUT PROGRAM

What the program is and how it applies to our operation

The Control of Hazardous Energy: Lockout/Tagout Program pertains to procedures for affixing appropriate lockout devices or tagout notification devices to machines/equipment, and to otherwise disable machines/equipment to prevent the unexpected energization, start up, or release of stored energy to prevent injury to employees.

Essentially, the program requires employers implement systems designed to prevent worker injuries from the unexpected release of energy. In transit operations, it mostly applies to servicing vehicles and the tools used in the process. Many operations and maintenance personnel think this program, nicknamed Lockout/Tagout, simply means having a notification device when a machine or vehicle is out of service. However, it is much more complex than this as detailed below.

How to comply with the Control of Hazardous Energy: Lockout/Tagout Program

A Lockout/Tagout Program must be in writing, kept in the workplace, and available to employees for review. There are essentially three steps, which need to be taken to comply with the lockout/tagout program. The first step is to establish a program consisting of energy control procedures. The second step is to conduct employee training. And the third step is to conduct periodic reviews of the program and procedures.

Step One – Energy Control Procedures

A written program should be available and describe how the program will be implemented in the facility/operation. It is intended to be a blueprint for implementation of your program - an assurance that all aspects of the requirements have been addressed.

The program must have site specific lockout/tagout procedures that include notification devices and applicable equipment specifications, procedures for the application of the lockout devices/tagout notifications, procedures for the release from lockout/tagout, outside personnel procedures, employee training requirements, periodic program/procedure inspections, and indicate where and when written materials will be made available to employees.

The written program must describe how the control of energy procedures and employee training are going to be met in your facility/operations. Additionally, the program must indicate the standard requirements for periodic inspections of the control of energy program.

Step Two – Employee Communication and Training

The purpose of training and communication is to ensure that the functions of the energy control program are understood by the employees and that the knowledge and skills required for the safe application, usage, and removal of the energy controls are acquired by the employees.

Training must be conducted upon the initial hire/orientation of the employee and again thereafter if there are changes to an employee's job assignments, if a change is made in machines, equipment, or processes

that present a new hazard, or when there is a change in the energy control procedures. This training must be documented and updated as necessary.

Step Three – Periodic Inspections

The periodic inspection of the energy control procedures should be conducted annually to ensure that the procedures and requirements of the control of energy standards are being followed and continue to be effective. The inspections must be documented.

rabbittransit: WSP-05 OVERVIEW

PERSONAL PROTECTIVE EQUIPMENT PROGRAM

What the program is and how it applies to our operation

The Personal Protective Equipment (PPE) Program requires providing and maintaining protective equipment for employees wherever necessary due to hazards present which may cause injury or impairment through absorption, inhalation or physical contact.

How to comply with the PPE Program

There are essentially three steps that need to be taken to comply with the PPE Program. The first step is to assess the workplace and specific job tasks for hazards to which employees may be exposed. This step is commonly called Job Hazard Assessment or simply Hazard Assessment. The second step is to identify and acquire necessary PPE to protect employees from identified hazards. Generally, employers are required to provide designated PPE, though some items are excluded. The third and final step is to provide training to employees on PPE selection and use.

Step One – Job Hazard Assessment

This requires employers to conduct workplace hazard assessments to determine if hazards are present, or are likely to be present, which necessitates the use of PPE. The assessment must be documented and identify the workplace evaluation, the person conducting the evaluation, and the date the assessment was conducted.

Hazard assessments are often done by individual job categories or work area (i.e. mechanics, porter/servicepersons, etc.)

Step Two – PPE selection, acquisition, distribution and maintenance

Step two is usually done somewhat in conjunction with step one – that is, once a hazard is identified, the type of PPE to be provided and required to protect employees from the potential injurious effects of the hazard is also identified. The employer must select proper PPE to protect the employees, but also each affected employee must use the provided PPE to protect themselves from injury.

PPE selected by the employer must properly fit each affected employee, and defective or damaged PPE cannot be used and must be replaced.

In most cases, employers are required to pay for necessary PPE for employees. The only exceptions to this rule are the following situations where employers are not required to pay for:

- Non-specialty safety toe protective footwear (i.e., steel-toed boots) or prescription safety eyewear provided that the employer permits such items to be worn off the jobsite;
- Everyday clothing such as long sleeve shirts, long pants, street shoes, and normal work boots; and
- Ordinary clothing, skin creams, or other items used solely for protection from weather, such as winter coats, jackets, gloves, rubber boots, raincoats, and ordinary sunglasses

Employers must also pay for replacement PPE except when the employee has lost or intentionally damaged the PPE issued.

In situations where employees choose to provide and use adequate personal protective equipment they own, rather than company issued PPE, the employer is not required to reimburse the employee for that equipment.

Step Three – Training

The final step in complying with the PPE Program involves training of employees on PPE use and maintenance.

Employers are required to provide training to each employee who is required to use PPE to minimize exposure to identified hazards. The training must include the following topics:

- When PPE is necessary,
- What PPE is necessary,
- How to properly wear and adjust PPE assigned,
- Limitations of the PPE, if any, and;
- Proper care, maintenance, useful life and disposal of the PPE

Initial PPE training must be conducted with affected employees prior to them being assigned to work that requires the use of PPE.

Refresher training must be provided if:

1. Changes in the types of PPE used render previous training obsolete;

2. Changes in the workplace render previous training obsolete; or

3. An employee who has already been trained does not demonstrate the understanding and skill required to properly use provided PPE.

All training must be documented and include the name of each employee trained and the subject and date of the training provided.

Footnote

PPE covered by this program includes equipment designed to protect the eyes, face, head, feet, body, noise, and hands of employees. PPE to be used to protect employees from inhalation hazards, such as respirators, are covered under a different program.

However, the job hazard assessment described within this program can still be used to identify the need for PPE, such as respirators, to protect employees from these hazards.

rabbittransit: WSP-06 OVERVIEW
RESPIRATORY PROTECTION PROGRAM

What the program is and how it applies to our operation

The Respiratory Protection Program pertains to reducing the exposure of employees to hazardous occupational air contaminants that they might be exposed to in the workplace.

How to comply with the Respiratory Protection Program

There are essentially six steps that need to be taken to comply with the Respiratory Protection Program:

1. Develop a written Respiratory Protection Program.
2. Have all employees required to wear respirators medically evaluated.
3. Fit test all employees required to wear respirators.
4. Provide employee training based on the requirements of the written policy.
5. Evaluate the program to ensure that the program is being properly implemented and to consult employees to ensure that they are wearing their respirators properly.
6. Establish and retain documentation regarding various requirements of the respirator program.

Step One – Respiratory Protection Program

A Respiratory Protection Program must be in writing, kept in the workplace, and available to employees for review. The program requires worksite-specific procedures and elements for required respirator use.

The program requires that employers keep a written copy of the Respiratory Protection Program available onsite and available for employee review.

Program must be adapted to address the facility it covers. For example, the written program must indicate procedures for selecting respirators, medical evaluations for all employees required to wear respirators, fit testing procedures, procedures of the use of respirators, maintenance and care of respirators, training and information, program evaluations, and record keeping.

Step Two – Medical Evaluations

Medical evaluations are a requirement of this program designed to assure the employer (and employee) that each employee using a respirator is medically cleared to wear a respirator, and that by simply wearing the respirator the employee is not putting their health in danger. Medical evaluations are required of all employees who are exposed to conditions which require them to wear a respirator. Medical evaluations must be conducted prior to an employee's exposure to work conditions, which would require their use.

The purpose of the medical evaluation program is to ensure that any employee required to use a respirator can tolerate the physiological burden associated with such use, including the burden imposed by the respirator itself; musculoskeletal stress; limitations on auditory, visual, and odor sensations; and isolation from the workplace environment. There are specific requirements surrounding the medical qualification; additional medical qualifications are only necessary under specific circumstances.

Step Three – Fit Testing

Another element that is imperative to the success of the respiratory protection program is the process of fit testing. Fit testing is a test that the employee undergoes to ensure that the respirator the employee is going to be using fits the employee comfortably while maintaining its effectiveness.

Before an employee is required to use any respirator with a face piece, the employee must be fit tested with the same make, model, style, and size of respirator that will be used. The employer must ensure that employees using a tight-fitting face piece respirator pass an appropriate qualitative fit test (QLFT) or quantitative fit test (QNFT). Fit testing must be conducted prior to first use and at least biennial thereafter.

Step Four – Respiratory Protection Program Training

Training of employees required to use respirators is required by the program. Training must be provided upon initial employee orientation/prior to the initial use of a respirator, and at least biennial thereafter. The training requires that each employee can demonstrate knowledge of at least the following:

A. Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;
B. What the limitations and capabilities of the respirator are;
C. How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;
D. How to inspect, put on and remove, use, and check the seals of the respirator;
E. What the procedures are for maintenance and storage of the respirator;
F. How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators;
G. The general requirements of the respiratory protection program.

Step Five - Program Evaluation

The program requires the company to conduct evaluations of the workplace to ensure that the respiratory protection program is being properly implemented and to consult employees to assess their views on effectiveness and ensure they are using the respirators properly. These evaluations are to be done as necessary to ensure that the respiratory protection program is being implemented effectively and continues to be effective.

Step Six – Recordkeeping

This step requires that documentation regarding medical evaluations, fit testing, and the respirator program be retained by the employer.

rabbittransit: WSP-08 OVERVIEW

WHEEL RIM MAINTENANCE PROGRAM

What the program is and how it applies to our operations

The Wheel Rim Maintenance Program pertains to the servicing of multi-piece and single piece rim wheels used on large vehicles such as buses, trucks, tractors, trailers, and off-road machines. It does not apply to the servicing of rim wheels used on automobiles, or pickup trucks and vans utilizing automobile tires or truck tires designated "LT" (Light Truck).

How to comply with the Wheel Rim Maintenance Program

There are three steps that need to be taken to comply with the Wheel Rim Maintenance Program.

Step One – Servicing Procedures

Employers must establish servicing procedures for multi-piece and single piece rim wheels used on large vehicles such as buses, trucks, tractors, trailers, and off-road machines.

rabbittransit exclusively uses single-piece rim wheels on all revenue and non-revenue vehicles. No multi-piece (split-rim, lock-ring, or multi-piece flange) wheels are in service or serviced by employees. Therefore, all procedures, training, and equipment requirements specific to multi-piece rim wheels are not applicable.

Step Two – Employee Training

Employers must provide a program to train all employees who service rim wheels in the hazards involved in servicing those rim wheels and the safety procedures to be followed.

- Employers must ensure that no employee services any rim wheel unless the employee has been trained and instructed in correct procedures of servicing the type of wheel being serviced, and in the applicable safe operating procedures.

- At a minimum, the training program must include the contents of the program and information in the manufacturer's rim manuals and charts.

- The instruction must be conducted in an intelligible way. Employees who are unable to read the charts or rim manuals must be trained in the subject matter. The employer must ensure that each worker demonstrates and then maintains the ability to service rim wheels safely by correctly performing the following tasks:

    - Demounting tires, including deflation
    - Inspection and identification of the rim wheel components
    - Mounting tires, including inflating them with a restraining device or other safeguard
    - Use of restraining device, barrier or other equipment
    - Handling rim wheels
    - Inflating tires when single piece rim wheels are mounted on a vehicle
    - Understanding the necessity of standing outside the trajectory during inflation of tires and of inspecting the rim wheels following inflation

- Employers must regularly evaluate each employee's performance and provide additional training, as necessary, to ensure that each employee maintains his or her proficiency.

Step Three – Servicing Equipment

Employers must furnish a restraining device for inflating a tire on a multi-piece wheel and must provide a restraining device or barrier for inflating a tire on a single-piece wheel unless the single piece rim wheel is bolted onto a vehicle during inflation.

- The restraining device can be a cage, rack or an assemblage of bars and other parts that will constrain all rim wheel components during an explosive separation of the multi-piece rim wheel or during the sudden release of the contained air of a single-piece rim wheel.

- A barrier can be a fence, wall, or other structure or object placed between a single-piece rim wheel and an employee during tire inflation to contain air. Each barrier or restraining device must be able to withstand the maximum force of an explosive rim wheel separation or release of the pressurized air occurring at 150 percent of the maximum tire specification pressure for the rim wheel being serviced.

- Restraining devices showing any of the following defects must be immediately removed from service:

    - Cracks at welds
    - Cracked or broken components
    - Bent or sprung components caused by mishandling, abuse, tire explosion, or rim wheel separation
    - Component pitted due to corrosion or other structural damage that would decrease its effectiveness

- Restraining devices or barriers removed from service must not be returned to service until they are repaired and re-inspected. Restraining devices or barriers requiring structural repair such as component replacement or re-welding must not be returned to service until they are certified by either the manufacturer or a Registered Professional Engineer as meeting the strength requirements as stated above (the force of 150 percent of the maximum tire specification pressure).

- Current chart or rim manuals containing instructions for the types of wheels being serviced must be available in the service area, including a mobile service unit.

- Only tools that are recommended in the rim manual may be used for the type of wheel being serviced.

- Employers must also supply airline equipment with a clip-on chuck with sufficient length of hose between the chuck and in-line valve or regulator to allow the employee to stand outside the trajectory, as well as an in-line valve with a pressure gauge or a pre-settable regulator.

Wheel component acceptability

- Multi-piece wheel components must not be interchanged except as indicated in the applicable charts or rim manuals.

- Multi-piece wheel components and single-piece wheels must be inspected prior to assembly. Any wheel or wheel component that is bent out of shape, pitted from corrosion, broken, or cracked must be marked or tagged "unserviceable" and removed from the service area. Damaged or leaky valves must be replaced.

- Rim flanges, rim gutters, rings, and the bead-seating areas of wheels must be free of any dirt, surface rust, scale, or loose or flaked rubber buildup prior to tire mounting and inflation.

- The size (bead diameter and tire/wheel width) and type of both the tire and wheel must be checked for compatibility prior to assembly of the rim wheel. Mismatching of half sizes such as 16-inch and 16.5-inch tires and wheel must be avoided.

Charts and Posters

Information for the charts is available on three posters, or in a manual containing the three charts, entitled:

- Demounting and Mounting Procedures for Tubeless Truck and Bus Tires
- Demounting and Mounting Procedures for Tube-Type Truck and Bus Tires
- Multi-Piece Rim Mounting Chart

The “Multi-Piece Rim Mounting Chart” and the “tube-type” chart are not applicable as multi-piece rim wheels are not serviced.

When used by the employer at a worksite to provide information to employees, printed posters must be at a minimum 2 feet wide by 3 feet long.

rabbittransit: WSP-04
EMERGENCY ACTION AND FIRE PREVENTION PLAN

The purpose of the emergency action and fire prevention plan is to coordinate actions by employers and employees during workplace emergencies, prevent fires at the workplace, and give guidance on how to prevent injuries and property loss during emergency situations. This plan covers all Rabbittransit facilities.

Policy

The emergency action and fire prevention plan is available for review to all employees upon request and is in Paylocity. The written program will be updated as necessary by the Safety, Security and Training Officer who is the Emergency Coordinator.

Education and training will be provided upon initial employee orientation, and when any changes are made to the program and/or employee responsibilities. Training will cover all elements of this policy.

Employees will be informed upon initial job assignment of potential fire hazards which they may be exposed to, and the employer will review with the employee those parts of the emergency action and fire prevention plan necessary for self-protection.

Incident Command and Chain of Command

Incident Commander until first responders arrive:

1. Safety, Security and Training Officer (Richard Trout)
2. Safety and Training Manager (Fred Wadlinger)
3. Chief Maintenance Officer (Trevor Manahan)
4. Facilities Manager (Paul Mathis)
5. Most senior supervisor/manager on site

The Incident Commander is responsible for overall coordination, personnel accountability, liaison with 911, and authorizing re-entry only after the Fire Department declares the facility safe.

Reporting Fires and Other Emergencies

In order to provide a safe working environment for employees and visitors at the facility, it is important to have an early detection system for reporting and alerting others of fires and other emergencies. It is imperative that all emergencies are reported to the department supervisor immediately or per the procedures of this policy so that the necessary actions can be taken to minimize injuries, reduce property damage, and preserve life.

Only employees who have received hands-on fire extinguisher training and who have a clear escape route may attempt to extinguish an incipient-stage fire. All other employees must evacuate immediately.

In the event of a fire or other emergency requiring evacuation, follow these steps:

1. CALL 911 IMMEDIATELY (or activate a panic button if the situation involves security, violence or medical emergency). Provide exact address, nature of emergency, and location inside the facility.

2. Activate the nearest manual fire alarm pull station (if it is safe to do so and you are in the immediate area) and/or verbally alert employees in the area to evacuate the facility. If possible, use the PA system and make an "all call" announcement.

3. If safe and you have been trained, attempt to extinguish an incipient-stage fire only. If the fire is larger than a small wastebasket or you have any doubt, evacuate immediately.

4. Evacuate the building using the nearest safe exit. Close doors behind you if you are the last person out of a room.

5. Proceed directly to your facility's designated meeting area/muster point.

6. Do not re-enter the building until the Fire Department or Incident Commander declares it safe.

   * All other emergencies should be immediately reported to supervisors

The York facility is equipped with a panic button system. This system is designed to alert key locations in the event of an emergency requiring immediate attention such as security threats or medical emergencies. Panic Button Procedures are outlined in Appendix A of this program.

Fire Prevention

A vital element in providing a safe working environment for employees and visitors as well as to reduce property damage is the use of fire suppression/prevention systems along with fire alarms. Listed below are procedures to help prevent the possibility of a fire and/or minimize the danger to people and equipment.

A. Supervisors and employees will strive daily to maintain a facility that minimizes the potential for fire hazards. Supervisors must ensure that safe work practices are being followed to prevent fire hazards and employees will follow these safe work practices. Areas will be checked frequently for any potential fire hazards and removed if discovered.

B. In addition to all Maintenance Managers and Supervisors, the Safety Department and Facilities Department members will conduct routine facility inspections to identify any potential fire hazards and correct as necessary.

C. General housekeeping of the facility will be conducted to reduce the amount of flammable and combustible waste materials accumulating at the facility.

D. All fire protection equipment will be inspected on a regular basis to ensure that it will be in proper working order if an emergency does occur.

E. Proper handling and storage procedures for hazard materials:
   - Flammable and combustible materials are stored away from potential ignition sources and/or in approved cabinets.
   - Oily rags are placed in metal containers with self-closing lids.
   - Used oil is stored in tanks/containers away from potential ignition sources.

   - Oxygen and acetylene tank storage areas are separated by at least 20 feet and away from ignition sources. Tanks are secured with protective valve caps in place when not in use.
   - LPG and propane tanks are stored in designated areas away from potential ignition sources.

Major Fire Hazards

- Compressed Gas Cylinders and LPG Tanks
    - York
    - Harrisburg
    - Northumberland
    - Adams
- 55 Gallon Drums and totes of Flammable and Combustible Liquids
    - York
    - Harrisburg
    - Northumberland
    - Adams
- Aboveground Storage Tanks – Motor Oil, Used Oil, Diesel, and Gasoline
    - York
    - Harrisburg
    - Northumberland
    - Adams
- CNG storage tanks/stations (see Appendix)
    - York
    - Adams
- Bulk propane tank
    - Northumberland County Facility

Fire Protection Equipment

The following fire protection equipment is available at the facilities:

- Fire Extinguishers
- Sprinkler Systems (see Appendix B)

Potential Ignition sources and Controls

Welder – Welding is conducted in a designated area away from flammable and combustible materials. If there is a need to conduct welding in an area where flammable and combustible materials may be present, those materials will be protected from sparks/heat.

Bench Grinders – Bench grinders are located in areas away from flammable and combustible materials.

Torch/Cutter – Torching/cutting are conducted in designated areas aware from flammable and combustible materials. Spark arrestors with back flow valves are installed on units. Valves are closed and lines are blanked after use.

*Fire extinguishers should be readily available during use of equipment listed above.

Employees responsible for maintaining equipment to prevent/control source ignition or fires and control fuel source hazards.

- Maintenance Managers and Supervisors
- Facilities Manager
- Site Managers

Emergency Evacuation Procedures

The policies and procedures of this section of the emergency action and fire prevention plan will assist employees in the event of an emergency at the facility that would require evacuation. This section covers employee responsibilities during an emergency situation, procedures for evacuation, exit routes, designated meeting areas/muster points, and all other aspects of this policy that will prevent and minimize injuries to employees and visitors during emergency evacuations.

If an emergency does occur at the facility that requires employees to evacuate the facility, they should take the designated route to the nearest exit. If the primary exit of the working area at the facility is impassable the employee should then proceed to a secondary exit and evacuate the facility. During an evacuation, employees should verbally alert or notify any employees in their area of an emergency and that evacuation is required.

Once outside of the building the employee should proceed to the designated meeting area/muster point which is listed for each facility in this plan. Once the supervisor has accounted for all the personnel that are assigned to them, the supervisor should then report the status of personnel to the emergency coordinator. The supervisor should report all the employees that are accounted for and the names of any personnel that are missing. Employees must never re-enter a building that has been evacuated for any reason. Rescue and medical care will be performed by professional responders.

The front desk assistant or person responsible for admitting visitors will bring the visitor log to the designated meeting area/muster point to account for all visitors. The supervisor will report the status of visitors to the emergency coordinator.

All evacuations, regardless of the nature (fire, severe weather, security issues, chemical spill) will be treated in the same manner at this facility. In the event of an evacuation, employees should close any doors behind them if they are the last employee out of an area. If an alternate method to/than evacuation is preferred, this will be communicated by the emergency coordinator.

Emergency Contacts

Designated Officials/Emergency Contacts – All Facilities		
Richard Trout	Safety, Security and Training Officer	717-324-5025
Fred Wadlinger	Safety and Training Manager	717-609-3584
Trevor Manahan	Chief Maintenance Officer	717-668-4483
Paul Mathis	Facilities Manager	717-329-6896

*Emergency Services – Dial 911 for Police, Fire or Ambulance

Information and Training

Employees will be given training and provided with information on the emergency action and fire prevention plan to ensure that the policies of this plan are clearly understood and followed during times of emergencies. The training that is provided will be a combination of lecture/instruction/online and on-the-job training. The objective of this training program is:

A. Ensure that employees are knowledgeable on the potential for emergency situations that could occur at the facility and to abide by the elements of the emergency action and fire prevention plan

B. Instruct employees on procedures for reporting fires and emergency situations that may occur at the facility and to inform them of their responsibilities during those situations

C. Instruct employees on the emergency evacuation procedures and inform them of their responsibilities during emergency situations

D. Inform employees of potential fire hazards that may exist at the facility and teach fire prevention procedures to minimize the potential of fires.

Training will also include initial and annual fire extinguisher training for designated personnel and documented evacuation drills at least annually.

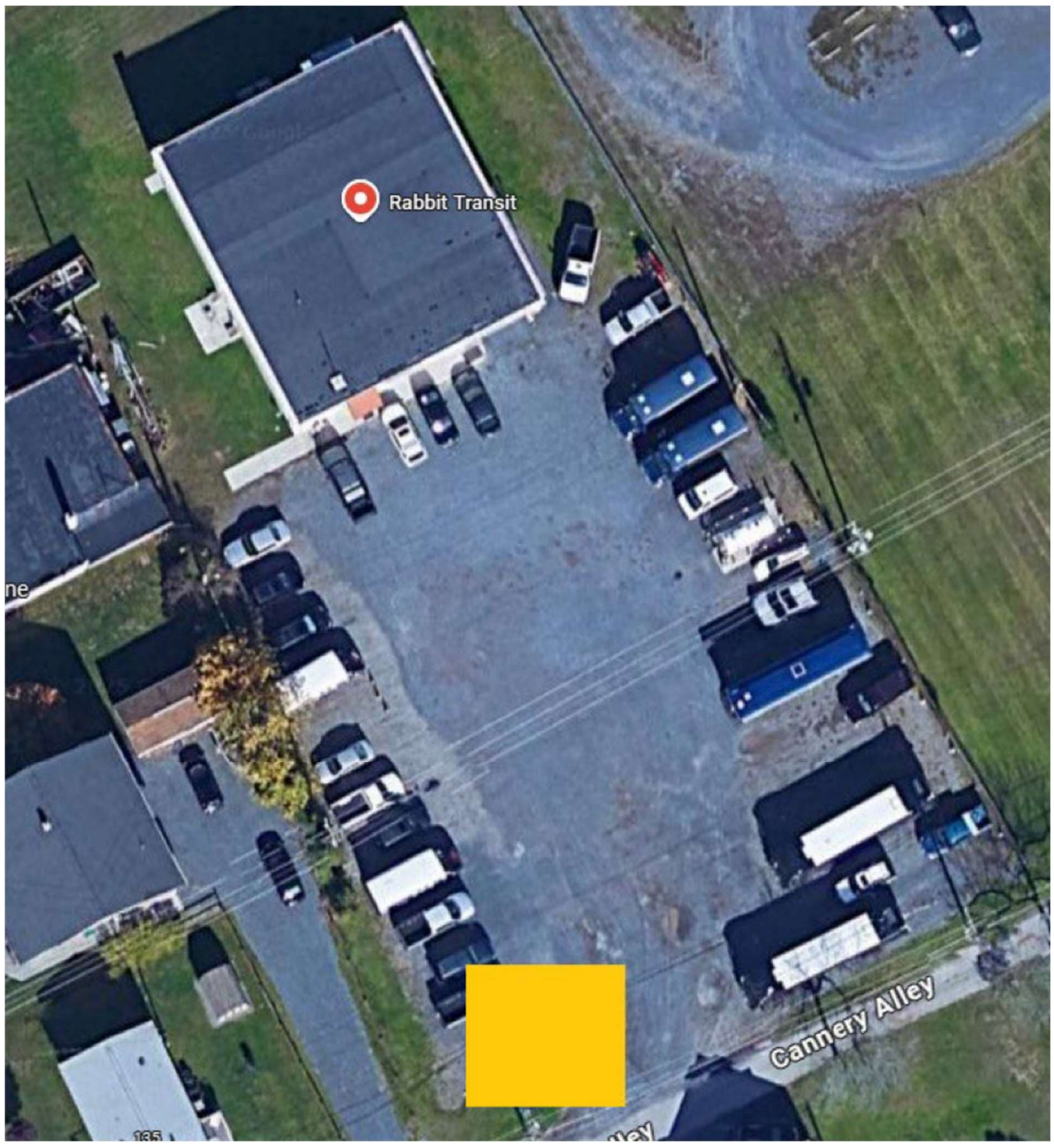
APPENDIX A – Panic Button Procedures

APPENDIX B – Facility Quick-Reference Table

Emergency Evacuation Map

rabbittransit: Adams County Facility
Facility Description: Administrative office and outdoor bus storage
Address: 257 N. 4th Street, Gettysburg, PA 17325
Gettysburg Borough, Adams County

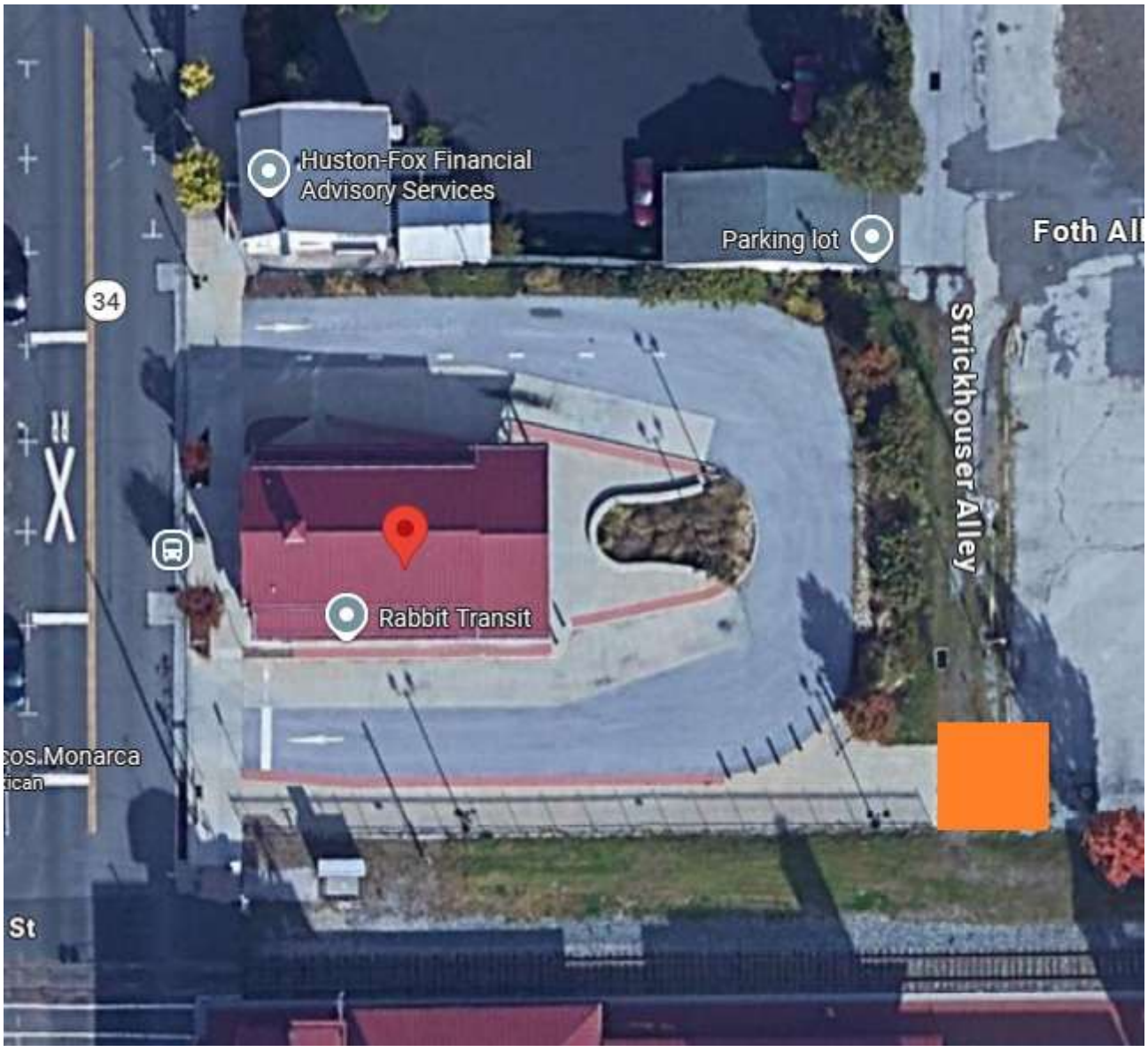
Designated Meeting Area/Muster Point: Front southwest corner of parking lot



Emergency Evacuation Map

rabbittransit:	Adams County Gettysburg Transit Center
Facility Description:	Bus Transit Center and Building
Address:	103 Carlisle St., Gettysburg, PA 17325 Gettysburg Borough, Adams County

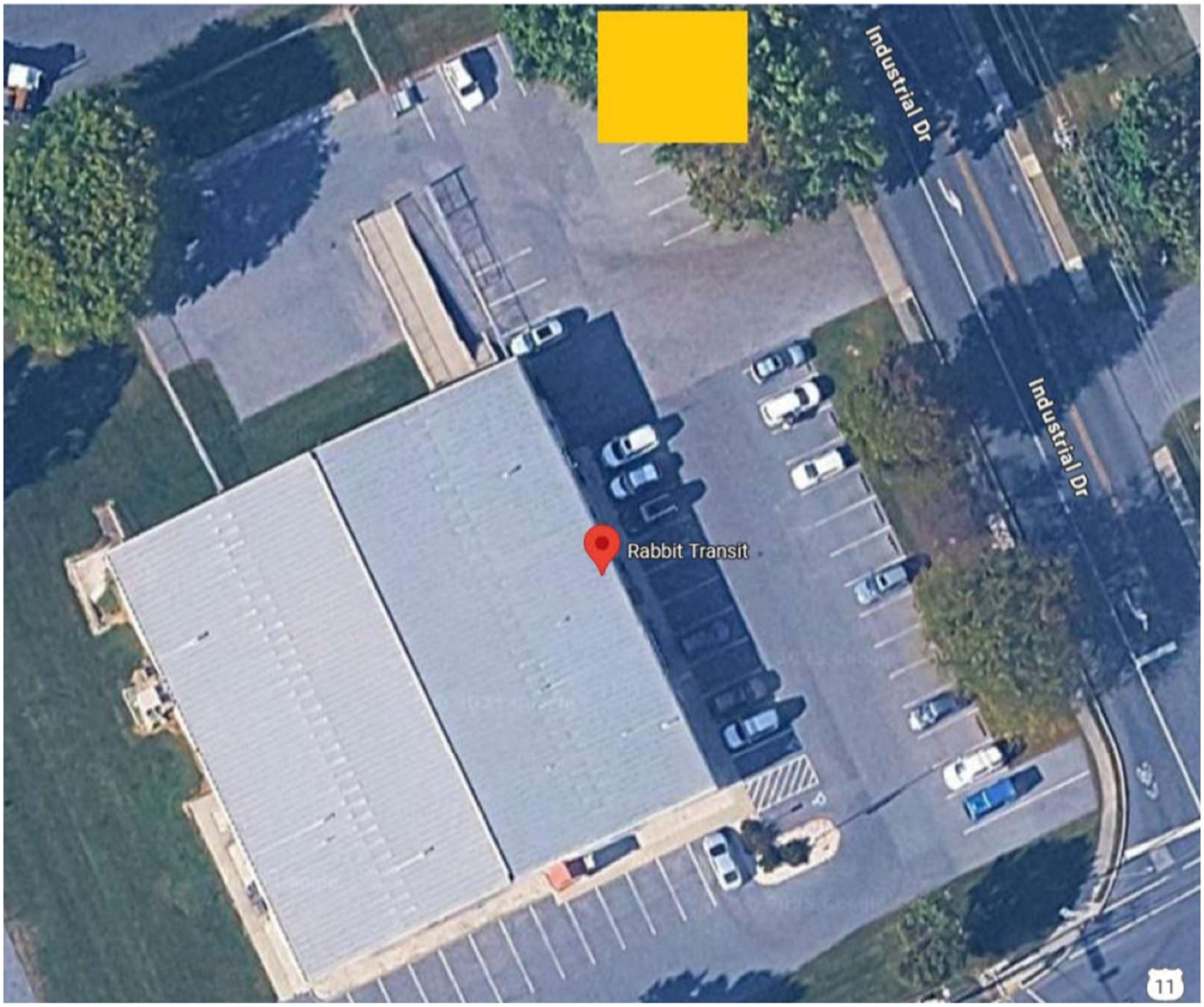
Designated Meeting Area/Muster Point: Rear southeast corner of property



Emergency Evacuation Map

rabbittransit:	Cumberland County Facility
Facility Description:	Administrative office and outdoor bus storage
Address:	1615 Ritner Highway, Carlisle, PA 17013 Carlisle Borough, Cumberland County

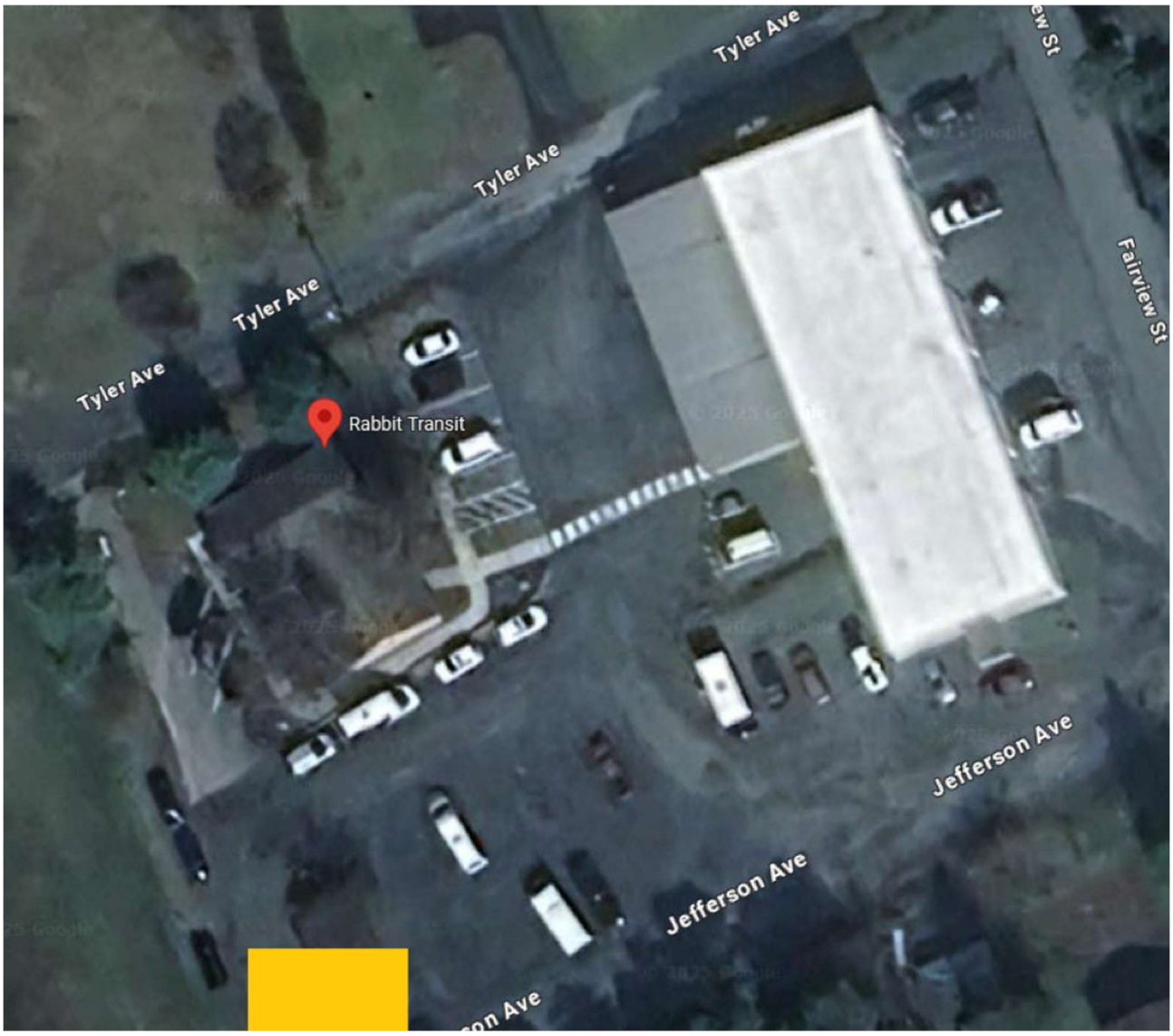
Designated Meeting Area/Muster Point: Front northeast corner of parking lot



Emergency Evacuation Map

rabbittransit:	Northumberland Facility
Facility Description:	Administrative office, maintenance facility and outdoor bus storage
Address:	61 Tyler Avenue, Elysburg, PA 17824 Ralpho Township, Northumberland County

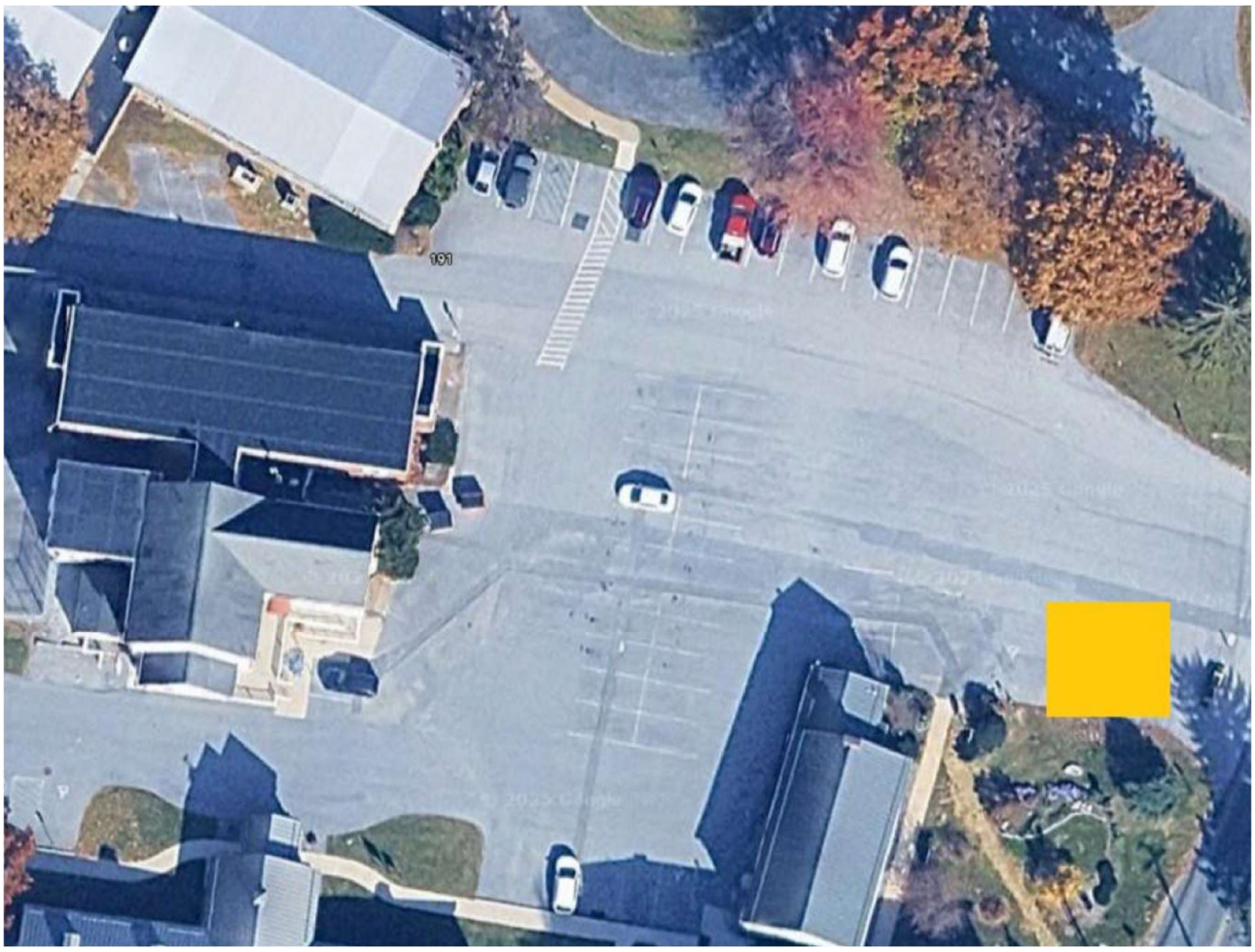
Designated Meeting Area/Muster Point: West corner of the parking lot



Emergency Evacuation Map

rabbittransit:	Franklin County Facility
Facility Description:	Administrative office and outdoor bus storage
Address:	201 Franklin Farm Lane, Chambersburg, PA 17202 Guilford Township, Franklin County

Designated Meeting Area/Muster Point: Front of parking lot near Franklin Farm Lane



Emergency Evacuation Map

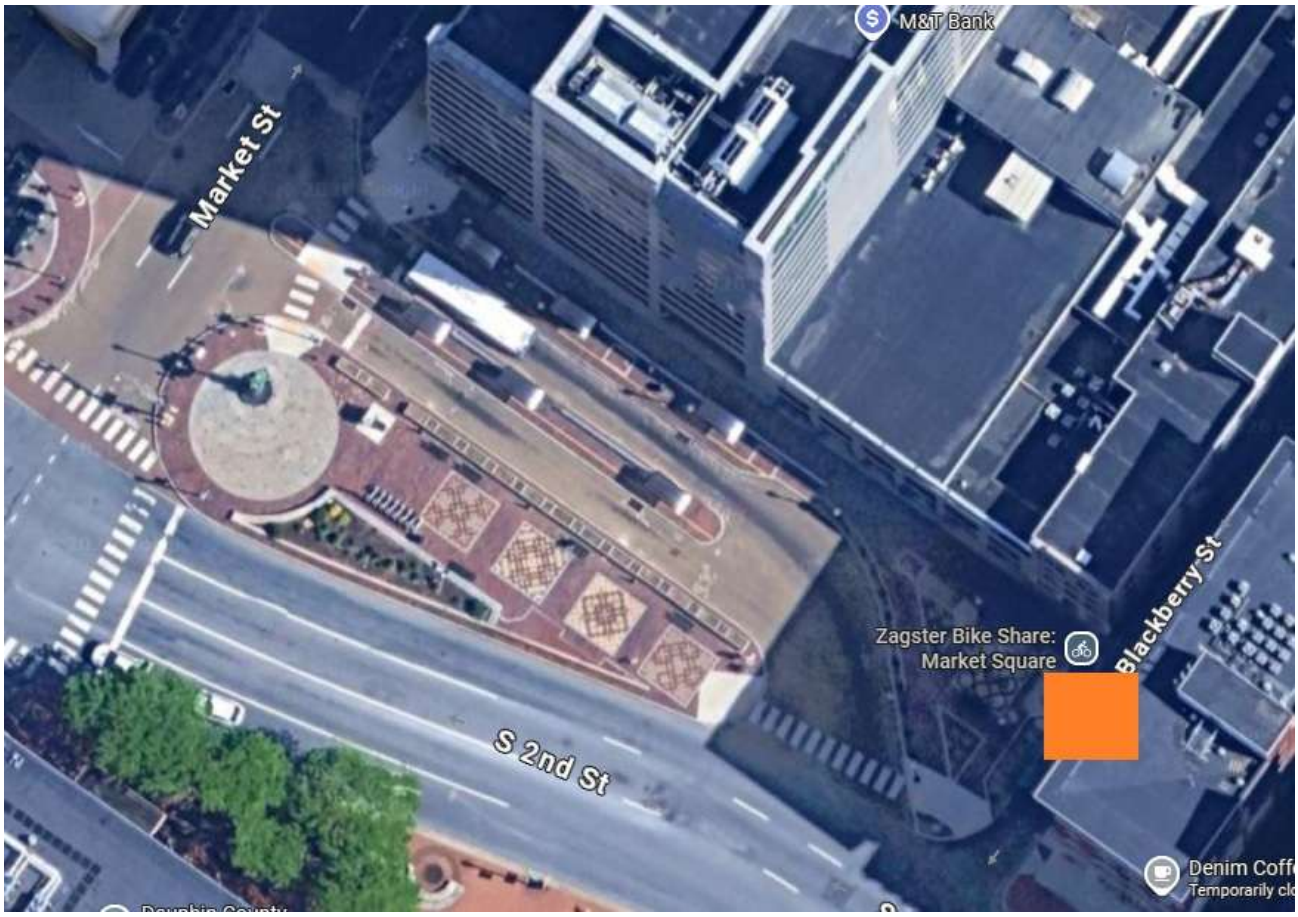
rabbittransit:	Harrisburg Facility
Facility Description:	Administrative office, maintenance facility and indoor bus storage
Address:	901 N. Cameron Street, Harrisburg, PA 17101 City of Harrisburg, Dauphin County

Designated Meeting Area/Muster Point: East of the property at Sunshine Park Basketball Court

Emergency Evacuation Map

rabbittransit:	Harrisburg Market Square Transfer Center
Facility Description:	Bus Transfer Center
Address:	N. 2nd Street and Market St., Harrisburg, PA 17101 City of Harrisburg, Dauphin County

Designated Meeting Area/Muster Point: South of Transfer Center on Blackberry Street



Emergency Evacuation Map

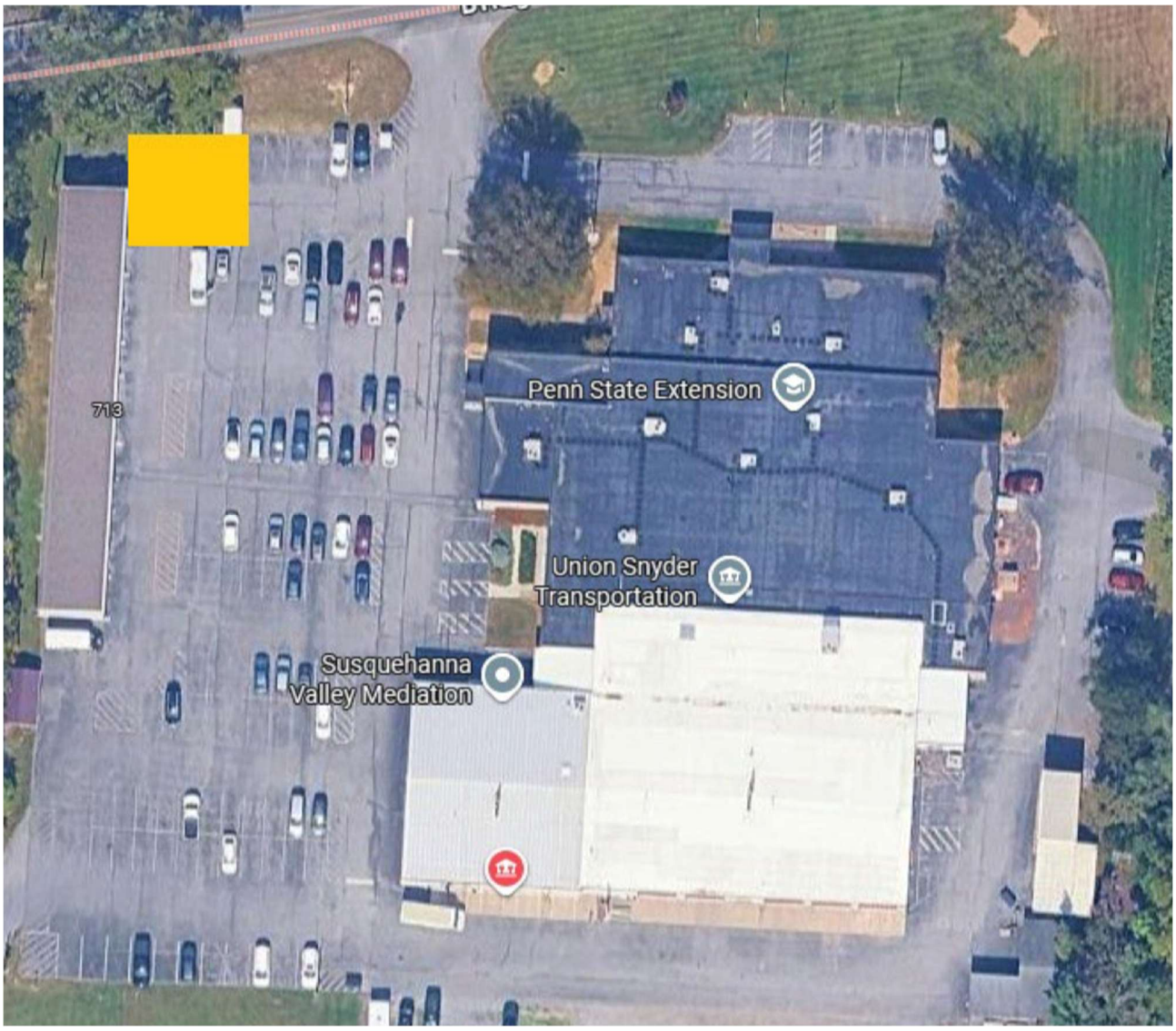
rabbittransit:	Perry County Facility
Facility Description:	Administrative office and outdoor bus storage
Address:	151 Red Hill Road, Newport, PA 17074 Howe Township, Perry County

Designated Meeting Area/Muster Point: West front corner of property

Emergency Evacuation Map

rabbittransit:	Union Snyder Facility
Facility Description:	Administrative office and outdoor bus storage
Address:	713 Bridge Street, Selinsgrove, PA 17870 Selinsgrove Borough, Snyder County

Designated Meeting Area/Muster Point: Rear corner of parking lot near bus shelter



Emergency Evacuation Map

rabbittransit: York Zarfoss Facility
Facility Description: Administrative office, maintenance facility and indoor bus storage
Address: 415 N. Zarfoss Drive, York, PA 17404
West Manchester Township, York County

Designated Meeting Area/Muster Point: Front corner of employee parking lot

Emergency Evacuation Map

rabbittransit:	York Transfer Center – King Street Station
Facility Description:	Bus Transfer Center and Building
Address:	213 W. King St., York, PA 17401 City of York, York County

Designated Meeting Area/Muster Point: Northwest corner of lot at the Rail Trail

APPENDIX A

YORK ZARFOSS FACILITY PANIC BUTTON PROCEDURES

The York Zarfoss facility is equipped with a panic button system.

Purpose

This procedure outlines the activation, operation, and response protocols for the panic button system in the building. The system is designed to alert key locations in the event of an emergency requiring immediate attention, such as security threats or medical emergencies.

System Overview

Activation Point

- Front Desk
- Dispatch Office – Fixed Route Position

Alert Locations

1. Second Floor Lobby
2. Chief Maintenance Officer's Office
3. Safety, Security, and Training Officer's Office
4. Dispatch Office
5. Front Desk

Alert Signals

- Audio: A distinct audible alarm designed to be recognizable and attention-grabbing and a different sound than the fire alarm system.

- Visual: A flashing white light.

- Color Code: Panic Alert devices are white to differentiate them from the fire alarm system, which uses red devices.

Activation Procedures

1. Identifying an Emergency: Assess the situation. Activate the panic button only for situations requiring immediate emergency assistance, such as security breaches, violent incidents, or critical medical emergencies.

2. Activating the Panic Button: Press the panic button located at the Front Desk or in the Dispatch Office. Ensure the button is pressed firmly until activation is confirmed (audible and visual signals will begin immediately).

Response Protocol for Alerted Locations

- Immediate Attention: Upon hearing the panic alarm or seeing the flashing white light, pause current activities to assess the situation.

- Emergency Response: Site Manager, Chief Maintenance Officer and Safety, Security, and Training Officer will respond to the Dispatch Office and Front Desk to confirm the nature of the emergency and take the appropriate action.

  Upon hearing the panic alarm, designated responders will evaluate the emergency and stage in a safe location. They will communicate via radio/phone with the Dispatch Office and Front Desk to confirm the nature of the emergency and then summon the appropriate resources. Designated responders will guide police/fire/EMS when they arrive. No other employees should move toward the threat area.

- Emergency Procedures: Depending on the situation, take one or more of the following actions:
  - Secure the area.
  - Provide assistance as necessary.
  - Follow evacuation or shelter-in-place protocols as directed.

Shelter-in-Place Protocol (active threat only)

1. Identify a Safe Location: Move to the nearest locked room with no windows. If a room without windows is unavailable, select a room with covered windows to minimize visibility.

2. Secure the Room: Lock all doors and barricade them if necessary. Turn off lights and silence all electronic devices.

3. Stay Low and Quiet: Keep noise to a minimum. Position yourself and others away from the door and out of sight.

4. Wait for Instructions: Remain sheltered until you receive an "all-clear" notification from authorities or emergency personnel.

Designated Meeting Area/Muster Point

- Location: The designated muster point is located at the front of the employee parking lot, adjacent to the driveway.

- Organized Assembly: Employees will assemble by department. Supervisors are responsible for organizing their teams and ensuring order during the assembly.

- Accountability: Supervisors will take a roll call and verify that all employees are accounted for. Any missing individuals must be reported immediately to emergency personnel.

Cancellation of a Panic Button Activation

Cancellations must be handled promptly to avoid unnecessary response.

- Access and confirm: Immediately verify if the activation was accidental and contact the Safety, Security, and Training Officer and Chief Maintenance Officer.
- An all-page announcement should be made – "ALL CLEAR"

Training

Conduct training sessions annually for all staff. Training will include:

- Proper use of the panic button system.
- Emergency response protocols for different scenarios.
- Shelter-in-place and evacuation procedures.
- Differentiation between the panic button system and the fire alarm system.

Testing and Maintenance

- Monthly Testing: The panic button system should be tested monthly by the Facilities Department to ensure functionality. Testing should involve:
  - Notifying all employees by email and an all-page announcement that we are conducting a test and there is no emergency.
  - Activating the system from both the Front Desk and the Dispatch Office.
  - Verifying the audio and visual signals in all alert locations.
  - Resetting the system after testing.
- Maintenance Schedule: Inspect and clean the devices to ensure proper functionality. Replace any faulty equipment immediately.

Documentation

- Log each activation, test, and maintenance activity. Include details such as:
  - Date and time.
  - Reason for activation or testing.
  - Results of the system check.
  - Any corrective actions taken.

By adhering to this procedure, employees can ensure a coordinated and efficient response during emergencies, enhancing the safety and well-being of everyone in the building.

APPENDIX B
FACILITY QUICK REFERENCE TABLE

Facility	Sprinkler System	CNG	Designated Meeting Area/Muster Point
Adams County	None	Yes	Front southwest corner of parking lot
Cumberland County	None	No	Front northeast corner parking lot
Franklin County	None	No	Front of parking lot near Franklin Farm Lane
Gettysburg Transfer Center	None	No	Rear southeast corner of Property
Harrisburg	Partial	No	East of property at Sunshine Park BB Court
Harrisburg Transfer Center	None	No	Blackberry St. East of 2nd Street
Northumberland	None	No	West corner of parking lot
Perry County	None	No	West front corner of property
Union Snyder	None	No	Rear corner of parking lot near bus shelter
York	Full	Yes	Front corner of employee parking lot
York Transfer Center	None	No	Northwest corner by the Rail Trail

Shelter-in-Place Locations for Severe Weather

Choose areas that are:

- On the lowest level of the building
- In the center of the building – away from exterior walls, windows, skylights, and glass doors.
- Inside interior room with no windows
- Away from hazards

rabbittransit: WSP-01
BLOODBORNE PATHOGENS & EXPOSURE CONTROL PLAN

The intent of the bloodborne pathogens plan is to prevent bloodborne pathogen infections by eliminating or minimizing employee exposure to blood and other potentially infectious materials.

The plan will be reviewed and updated when necessary to reflect new or modified procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

A. Exposure Determination

(1) Employees' Risk Determination

In normal, daily operations and fulfillment of job duties, only the following employees have been determined to have reasonably anticipated skin, eye, mucous membrane, open wound or parenteral contact (substance introduced into body by other routes than the digestive tract) with blood or other potentially infectious material:

- Porters/Servicepersons responsible for cleaning service vehicles after use and in preparation for future use.

No employees are designated first aid providers and any contact with blood or other potentially infectious materials while providing assistance to fellow employees and passengers is strictly considered a collateral duty.

rabbittransit has determined that, in rare occasions, some employees may come into contact with bloodborne pathogens. These employees are:

- Operators and Mechanics who may clean up blood, vomit or other bodily fluids while conducting excursions or transportation services or provide first aid services to injured passengers or employees. These services are usually performed by the afflicted person and would rarely be the responsibility of the driver.

Instances where these employees may come into unexpected contact with bloodborne pathogens involve Good Samaritan assistance acts performed on injured passengers or in the cleanup of unknown liquids, which could conceivably contain blood.

B. Methods of Implementation

(1) Universal Precautions

Engineering and work practice controls are in place to eliminate or minimize employee exposure to blood or other infectious material.

Regular exposure to BBPs is not expected during normal operations. However, Universal Precautions, including the use of provided protective equipment, are mandated by rabbittransit to minimize exposure potential.

Hand washing facilities are appropriately located throughout rabbittransit facilities.

Hand sanitizer and/or antiseptic towelettes are provided for drivers and others who do not have running water for hand washing readily available.

The following Universal Precautions will be followed when encountering blood and other potentially infectious bodily fluids:

a) All blood, bodily fluids and otherwise un-identifiable fluids encountered will be assumed to contain bloodborne pathogens and proper procedures will be followed to limit exposure.

b) In the event of an exposure to blood or other potentially infectious materials, those affected will wash their hands and other areas which came into contact with the potentially infectious materials as soon as practical.

c) If sharps are encountered (e.g., from passengers), they should be disposed of immediately in a puncture resistant labeled sharp container.

(2) Personal Protective Equipment

Personal protective equipment is available for use and provided to reduce any potential for exposure to BBPs.

a) Gloves shall be worn during all cleaning/clean up processes where employees may have hand contact with unknown liquids or potentially infectious materials, and when handling or touching contaminated items or surfaces.

b) Disposable gloves shall be replaced as soon as practical when contaminated, torn, or punctured. Disposable gloves shall not be washed or decontaminated for reuse.

rabbittransit ensures that personal protective equipment in the appropriate sizes is readily accessible or is issued to the employees.

a) rabbittransit shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

(3) Housekeeping

Procedures are in place to ensure that the worksite is maintained in a clean and sanitary condition.

Regulated waste is not generated during regular business operations. However, if items become saturated with blood or other potentially infectious material, they should be placed in a closable, leak-proof bag or container with the biohazard symbol and disposed of by a medical waste vendor.

Contaminated clothing, uniforms, or reusable cleaning materials shall be placed in designated leak-proof bags and either laundered by a commercial service or disposed of as regulated waste if disposable.

(4) Labeling and Containers

Any container used to store, transport, or dispose of potentially infectious material (e.g., red bags, sharps containers) shall be labeled with the universal biohazard symbol and the word "BIOHAZARD."

C. Hepatitis B Vaccination

(1) Vaccine availability

a) Hepatitis B vaccinations are offered or provided to identified employees (Porters/Servicepersons) due to potential exposure to infectious materials during the performance of regular job duties.

   Affected employees who have been previously vaccinated for the virus or have declined vaccination will complete a Vaccination Declination Form.

(2) Exposure Incidents

a) Hepatitis B vaccination is available to all unvaccinated employees who have rendered assistance in any situation involving the presence of blood or other potentially infectious materials and have reported the potential exposure incident to management.

b) Hepatitis B vaccination is available to all unvaccinated employees who report an incident where contact with blood or other potentially infectious materials occurs during the performance of their duties and an exposure incident is reported to management.

c) The Hepatitis B vaccination record (or declination statement if the employee declines) shall be completed.

d) Information about Hepatitis B vaccine is included in employee training. Incident reporting procedures are explained during that training.

D. Post Exposure Evaluation and Follow-up

(1) Incident follow-up will be documented with the completion of the Exposure/Employee Bloodborne Pathogens Report.

- This form will be used to report incidents involving blood or other potentially infectious material. The incident description must include a determination of whether or not, in addition to the presence of blood or other potentially infected materials, an "exposure incident," as defined by the standard, could have occurred.

- The determination is necessary in order to ensure that the proper post-exposure evaluation, disease prevention and follow-up procedures are made available immediately if there has been an exposure incident as defined by the standard: A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (substance is introduced into body by other routes than the digestive tract) contact with blood or other potentially infections materials that results from the performance of an employee's duties.

(2) A Hepatitis B vaccination record or declination statement shall be completed.

(3) Afflicted employee will be sent to a designated healthcare professional for post-exposure incident follow-up. Information provided to the healthcare professional who evaluates the employee includes:

a) A description of the employees' duties as they relate to the exposure incident;

b) Documentation of the route of exposure and circumstances under which exposure occurred;

c) Results of the source individual's blood testing, if available;

d) Any medical records relevant to the appropriate treatment of the employee, including vaccination status, if known.

(4) The healthcare professional's written opinion for Hepatitis B vaccination is limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.

(5) The healthcare professional's written opinion for post-exposure evaluation and follow-up is limited to the following information:

a) That the employee has been informed of the results of the evaluation; and

b) That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation and/or treatment.

c) All other findings/diagnoses remain confidential and are not included in the written report.

E. Communication of Hazards to Employees

(1) Information and training

a) rabbittransit ensures that all employees identified as having risk of occupational exposure participate in a training program.

b) Training is provided at the time of initial assignment to tasks where occupational exposure may exist.

c) rabbittransit will provide additional training when changes such as modifications of tasks or procedures affect the employees' occupational exposure. The additional training may be limited to addressing the new exposures created.

F. Record Keeping

(1) Records of Exposure - Medical

rabbittransit has established and maintains an accurate medical record for each employee with occupational exposure. This record includes:

a) Name and social security number of employees;

b) Copy of employee's Hepatitis B vaccination record or declination form and any additional medical records relative to reported exposure incidents Hepatitis B;

c) If exposure incident(s) have occurred, a copy of the healthcare professional's written opinion;

d) If exposure incident(s) have occurred, a copy of information provided to the healthcare professional (i.e., exposure incident report form and results of the source individual's blood testing, if available).

rabbittransit ensures that the employees' medical records are kept confidential and are not disclosed or reported without the employee's expressed written consent to any person within or outside of this workplace, except as required by law.

These medical records will be maintained for the duration of employment.

(2) Training records

rabbittransit ensures that all required training records will be maintained for the duration of employment.

rabbittransit: WSP-07

POWERED INDUSTRIAL TRUCK: FORKLIFT REQUIREMENTS

The Powered Industrial Truck: Forklift Program identifies specific markings and labels that are required to be on approved forklifts/PIT including capacity requirements and powered industrial truck data. There are also operational requirements. You should be familiar with these requirements and ensure that any forklift/PIT used in your operation meets these and other requirements listed below:

The following are requirements pertaining to forklifts/powered industrial trucks:

- Manufacturer nameplates and markings are to be in place and maintained in a **legible** condition prior to truck operations.
- An approved truck must bear a label or some other identifying mark indicating approval by the (UL) testing laboratory.
- Every truck must be equipped with an operator-controlled horn, whistle, gong, or other sound producing device(s).
- The truck must be marked to identify the attachment(s), show the weight of the truck and attachment combination, and show the capacity of the truck with attachment(s) at maximum elevation.
- Forklifts must be fitted with an overhead guard (roof above operator position). An overhead guard is intended to offer protection to the operator from falling objects but cannot protect against every possible impact.
    - A user may operate a truck without an overhead guard, provided the following conditions are met:
        - Vertical movement of the lifting mechanism is restricted to 72 inches or less from the ground
        - The truck will operate only in an area where (a) the bottom of the top tiered load is not higher than 72 inches and (b) the top is not more than 120 inches from the ground
- Forklifts that have a sit-down, non-elevating operator position must have a restraint device, system, or enclosure that is intended to assist the operator in reducing the risk of entrapment of the operator's head and/or torso between the truck and ground in the event of a tip-over (fancy description of a seat belt meant to keep the operator in place).
- Batteries used in electric trucks must comply with the minimum/maximum battery weight range shown on the truck nameplate.

The following are requirements pertaining to operation of forklifts/PITs:

- Only trained and authorized people are permitted to operate a powered industrial truck.

    - Personnel who have not been trained to operate powered industrial trucks may operate a truck for the purposes of training only, and only under the direct supervision of the trainer. This training should be conducted in an area away from other trucks, obstacles, and pedestrians.

- Maintenance and inspection of all powered industrial trucks must be performed in conformance with the following practices.

    - Any powered industrial truck/forklift must be examined before being placed in service.

    - A scheduled planned maintenance, lubrication, and inspection system must be followed and documented; consult the manufacturer's recommendations.

    - Only trained and authorized personnel are permitted to maintain, repair, adjust, and inspect industrial trucks, and in accordance with manufacturer's specifications.

- Modifications and additions, which affect the capacity and safe operation of a PIT are not permitted for use without the manufacturer's written approval.

rabbittransit: WSP-07

POWERED INDUSTRIAL TRUCK: FORKLIFT PRE-USE INSPECTION

Location _____ Forklift # _____

	✓ – Satisfactory N – Unsatisfactory	Date / /	Date / /	Date / /	Date / /	Date / /	Date / /	Date / /
Visual Inspection – Engine Off	Forks/attachment							
	Carriage & load backrest							
	Mast assembly							
	Lift chains/pulleys							
	Hydraulic cylinders & hoses							
	Wheels & tires							
	Overhead guard							
	Engine oil level							
	Engine coolant level							
	Battery condition							
	Fuel system							
	Lights							
	Seat and seatbelt							
	Data plate legible							
Engine Running	Warning indicators/gauges							
	Audible device/horn							
	Hydraulic functions							
	Drive and brakes							
	Steering							
	Operator initials							

Comments

*Check each of the items prior to use or before the start of each shift. If the forklift is found to be unsafe, the condition must be reported immediately to your supervisor. Do not operate a faulty truck.

Education and training will be provided for all employees who may be or potentially may be exposed to hazardous substances in the workplace. A hazardous substance is defined as any substance that is a physical hazard or a health hazard (i.e. compressed gases, explosives, flammables, oxidizers, carcinogens, toxins, irritants, or corrosives).

Training will be conducted prior to first exposure to the chemical (during on-the-job orientation and training) and whenever a new hazardous chemical is introduced into the workplace. All employees will be informed of the location of the written hazard communication program, chemical listing, and SDS location/accessibility.

CONTAINER LABELING

rabbittransit will verify that all containers received for and used by rabbittransit are clearly labeled as to the contents and the appropriate hazard warnings. No chemicals will be released for use until the above data is verified.

Existing labels on incoming containers of hazardous chemicals will not be removed or defaced, unless the container is immediately marked with the required information. Shipping labels on containers will not be removed until all residues have been removed from the container.

All employees who transfer hazardous chemicals into portable containers (such as bottles, spray bottles, parts cleaning cans, etc.) will ensure the containers are appropriately labeled and the contents identified so that potential hazards associated with the chemical can be properly identified. Portable containers that are intended for immediate use only are not required to be labeled.

LIST OF HAZARDOUS CHEMICALS

A chemical inventory list, which identifies current hazardous chemicals present in the workplace, will be maintained, updated, and periodically reviewed. The current list will be available online at all times via the SDS Manager link below.

The current chemical inventory list is attached to the end of this program document.

SAFETY DATA SHEETS

Safety Data Sheets (SDS's) are maintained on all chemicals listed on the chemical inventory list. SDS forms are located in the digital database accessible by QR code or URL. Employees will have access to SDS's at all times.

SDS Manager rabbittransit URL = https://inventory.sdsmanager.com/my-sds/?qr_login_token=eyJhbGciOiJIUzI1NiIsInR5cCI6IkpXVCJ9.eyJ1c2VyX2lkIjo0NDkwOCwidXNlcm5hbWUiOiJxci5sb2dpbi5lbWFpbEA0NDkwOC5jb20iLCJleHAiOjI1MzQwMjMwMDc5OSwiZW1haWwiOiJxci5sb2dpbi5lbWFpbEA0NDkwOC5jb20iLCJvcmlnX2lhdCI6MTc3MzA0NjY5OH0.pnhASTaO6XDdaEqxyZUAg0GFfozCPXzwXFka7UrsUfo

SDS Manager rabbittransit QR Code to SDS URL =

Subcontractors working on the jobsite are required to bring copies of all SDS's for hazardous materials they are bringing on the jobsite to the authorized representative of rabbittransit, so the information is accessible to all employees. It is preferable to have each subcontractor bring their hazardous communication program and SDSs in a binder labeled with the contractor's name and identified as a hazardous communication program. Upon leaving the jobsite and the removal of all hazardous materials, they may take their information with them.

A recommendation is for employees to take a copy of the applicable SDSs to the medical facility if emergency treatment is necessary due to exposure.

INFORMATION AND TRAINING

Employees will be provided with information on these training requirements, any operations in their work area where hazardous chemicals are present, and the location of the written hazard communication program, chemical listing, and safety data sheets.

Training will be a combination of lecture/instruction/online and on-the-job training and will be presented prior to first exposure to hazardous chemicals. Information and training will be designed to cover all categories of hazards. Chemical-specific information will always be available through labels and SDS's.

Training will include the Globally Harmonized System (GHS) label elements (pictograms, signal words, hazard statements, and precautionary statements) and the standardized 16-section Safety Data Sheet (SDS) format.

NON-ROUTINE HAZARDOUS TASKS

Tasks not done on a routine basis (for example, replacing hazardous chemical piping), will be handled through specific pre-task actions and training. Before performing non-routine tasks, the authorized representative of rabbittransit in charge will review applicable SDS's; instruct employees in the associated hazards; and ensure all essential personal protective equipment and emergency equipment are available and operational. The authorized representative of rabbittransit will notify all other employees working in the area that non-routine tasks are scheduled/being performed.

SUBCONTRACTORS AND OTHER EMPLOYEES

Any contractors working in a rabbittransit facility/jobsite will be informed of the written hazardous communication program and where to locate SDSs. It will be the responsibility of that employer to properly train his employees in avoidance or emergency procedures for these materials.

5-11-2026 rabbittransit Chemical List

Product name	Supplier	Revision date
CLEAN ON THE GO hdqC2	Spartan Chemical Company, Inc	2015-08-14
SD-20 ALL PURPOSE CLEANER	Spartan Chemical Company, Inc	2022-01-21
Spectracide Wasp & Hornet Killer,	Spectrum Group, Division of United Industries	2018-09-05
Spectracide Bug Stop Home Barrier	Spectrum Group, Division of United Industries C	2019-09-13
Crew Clinging Toilet Bowl Cleaner	Diversey Canada, Inc	2025-12-04
ON YOUR MARK-ORIGINAL	Drummond American Corporation	2006-06-27
TUFF STUFF Foam Cleaner	The Armor All/STP Products Company	2012-09-17
So Drox	Drummond American Corporation	2006-06-28
ARMOR ALL Extreme Wheel and Tire Cleaner	The Armor All/STP Products Company	2015-04-11
Drummond Sleet De-Icer	Drummond, A Lawson Brand	2019-01-17
BLASTER ENGINE DEGREASER	The Blaster Corporation	2021-06-30
Drummond Engage High Tech Lubricant with PTFE	Drummond, A Lawson Brand	2018-07-25
Air Tool Lubricant	The Blaster Corporation	2016-12-01
SPIRIT 126	DuBois Chemicals, Inc	2015-02-23
WHITE LITHIUM GREASE	The Blaster Corporation	2020-10-20
BZK Antiseptic Towelette	Dynarex Corporation	2015-09-16
Dynatemp 134a HVAC and Dynatemp 134a AUTO	Dynatemp Refrigerants Company	2019-08-03
Clorox Commercial Solutions Clorox Urine Remover For Stains & Odors	The Clorox Company	2019-03-29
Dynatex 49594 White Lithium Grease	Dynatex a division of Soudal Accumetric	2015-12-21
Clorox Toilet Bowl Cleaner	The Clorox Company	2016-03-12
DEKA Battery Cleaner Spray 15 oz	East Penn Manufacturing Co	2025-03-01
DEKA BATTERY TERMINAL PROTECTION SPRAY 10 OZ	East Penn Manufacturing Co	2025-01-03
LIME-A-WAY	Ecolab Co	2024-02-02
KEYSTONE FURNITURE POLISH AEROSOL	Ecolab Inc	2019-10-18
Armor All Tire Foam	Energizer Trading Ltd	2022-02-21
EnvirOx LLC P.O. Box 2327, 1938 E. Fairchild St., Danville, IL	EnvirOx LLC	2020-03-13
Artic Flo	E-ZOIL Products, Inc	2020-06-01
D-Gel	E-ZOIL Products, Inc	2020-06-01
Bio-Blast	E-ZOIL Products, Inc	2018-10-01
E-Z Kleen	E-ZOIL Products, Inc	2023-03-15
SPLASH Original Blue Windshield Wash +22oF	FMP	2022-10-19
Gold Concentrated Antifreeze/Coolant	Ford Motor Company	2025-11-13
6515 BATTERY CLEANER-□□□□12 PK	Imperial Supplies LLC	2018-08-23
N/C BRAKE CLEANER BLEND A	Imperial Supplies LLC	2016-12-30
6540 HEAVY DUTY GLASS CLEANER	IMPERIAL SUPPLIES LLC	2014-02-21
6530 H.D. SILICONE LUBE-12 PK	Imperial Supplies LLC	2015-05-18
6544 VANDAL MARK REMOVER	Imperial Supplies LLC	2018-11-26
6510 WHITE GREASE	Imperial Supplies LLC	2024-09-10
BATTERY PROTECTOR - 6528	IMPERIAL SUPPLIES LLC	2021-01-15
6730 CONTACT CLEANER	Imperial Supplies LLC	2018-04-30
NANOSKIN WASH N' WAX Carnauba Wash & Wax	Total Import Solutions, Inc	2015-12-24
Imperial White RTV Silicone	Imperial Supplies LLC	2019-06-03
Imperial Blue RTV Silicone	Imperial Supplies LLC	2019-06-03
SSS Blue Glass Cleaner	Triple S	2018-05-11
PREMIUM RUBBERIZED UNDERCOAT	IMPERIAL SUPPLIES LLC	2025-05-22
Mint Bowl Cleaner	Triple S	2016-07-13
6536 Degreaser and Brake Parts Cleaner III	IMPERIAL SUPPLIES LLC	2018-04-30
SSS Odor Neutralizer TD (05269)	Triple S	2010-11-12
Imperial Penetrating Oil	Imperial Supplies LLC	2021-04-17
SSS Foam Disinfectant Cleaner & Deodorizer	Triple S	2015-05-30
SSS Glass Cleaner	Triple S	2015-05-20
Ingersoll Rand Ultra Coolant	INGERSOLL RAND	2018-05-01
Zip Wax Car Wash & Wax	Turtle Wax, Inc	2024-02-08

Tiger Hair	a division of Illinois Tool Works Inc	2015-12-14
AIR FRESHENER SPRAY - CUCUMBER MELON S-21352	ULINE INC	2019-10-03
Uline Air In A Can	Uline, Inc	2024-01-01
NO TOUCH ORIGINAL TIRE CARE	ITW Permatex Canada	2021-03-23
PC SILVER ANTI-SEIZE LUBE 4 GR	ITW Permatex	2016-10-27
Spray Nine Grez-Off	ITW Permatex, Inc	2024-04-05
Premium Blue SAE 15W-40 Diesel Engine Oil	Valvoline Global Operations	2023-06-29
765-1226 NAPA COPPER SPRAY-A-GASKET 9 OZ. (PTX80697)	ITW Permatex	2015-04-22
Valvoline FULL SYNTHETIC SAE 75W-140 GEAR OIL	Valvoline LLC	2018-11-19
DECAL & ADHESIVE REMOVER	ITW Permatex	2018-05-01
Valvoline Multi-Vehicle Multi-Purpose Grease	Valvoline Global Operations	2025-10-01
98D HIGH TACK GASKET SEALANT 16 FL.OZ	ITW Permatex, Inc	2025-05-02
Valvoline PREMIUM PROTECTION 15W40 MOTOR OIL	Valvoline Global Operations	2025-07-17
DIELECTRIC TUNE-UP GREASE 3 OZ	ITW Permatex, Inc	2024-06-14
Spray Nine 32 fl.oz	ITW Permatex, Inc	2024-10-09
Germ-X Hand Sanitizer2	Vi-Jon Inc.	2016-10-07
THE RIGHT STUFF GASKET MAKER	ITW Permatex, Inc	2024-07-18
Goof Off Graffiti Remover	W. M. Barr	2025-02-25
CERAMIC EXTREME BRAKE PARTS LUBRICANT 8 FL.OZ	ITW Permatex, Inc	2024-06-25
COPPER ANTI-SEIZE LUBRICANT 8OZ	ITW Permatex, Inc	2025-03-04
Bulldog Adhesion Promoter	W. M. Barr	2014-04-29
Service Pro Hi-Temp Grease	Warren Oil Company	2020-08-10
THREAD SEALANT W/PTFE 4 FL.OZ	ITW Permatex, Inc	2023-09-20
PX BLUE THREADLOCKER 36 ML	ITW Permatex, Inc	2025-06-12
SENSOR SAFE ULTRA GREY RTV 3 OZ	ITW Permatex, Inc	2024-10-03
Permatex Ultra Disc Brake Caliper Lube	ITW Polymers & Fluids	2024-03-12
Permatex Battery Cleaner Aerosol	ITW Polymers & Fluids	2022-12-23
WOLF'S HEAD SUPER UNIV SYN ATF	WOLF'S HEAD Oil Company	2018-05-15
Permatex Battery Protector & Sealer	ITW Polymers & Fluids	2024-03-13
PERMATEX Ultra Red Hi Temp Gasket Maker	ITW Polymers & Fluids (Aust)	2025-05-30
Stainless Steel Cleaner and Polish	ITW Pro Brands	2016-01-27
CLR CALCIUM, LIME & RUST REMOVER	Jelmar, LLG	
Power Kleen, Air Filter Cleaner	K&N Engineering, Inc	2021-11-18
KROIL	Kano Laboratories, Inc.	2020-07-01
Zep 45 Dual Force	ZEP Inc	2014-06-05
CHERRY BOMB	ZEP Inc	2009-11-20
Great Value Bleach 1	KIK International LLC	2015-04-26
Top Job Basic Bleach	KIK International LLC	2017-10-11
ZEP ICE MELT	Zep Inc	2023-10-01
METER MIST PEACH	ZEP Inc	2011-02-05
80-1301 TORQ "CB" III Advanced Formula "Corrosion Blasting " PENETRATING OIL	Kimball Midwest	2015-01-08
> ZEP BATTERY COAT 20N16 12CT	Zep Inc	2023-10-01
A07332 ZEP TRUE BLITZ 003801 20N14	Zep Inc	2018-07-12
Zep Formula 50	Zep Inc	2015-04-20
ZEP 75 INDUSTRIAL DEGREASER 20N13 12CT	Zep Inc	2023-10-01
DefendAL Heavy Duty Pre-Charged Antifreeze/Coolant 50/50	KOST USA, Inc	2016-02-10
ZEP ENVIROEDGE BLUE MARVEL CAR & TRUCK WASH 5GL	Zep Inc	2024-01-19
ZEP MVP QT	Zep Inc	2017-08-03
A07291 ZEP LEMON FURN POLSH R04401 20N16	Zep Inc	2020-03-05
ZEP ALL-PURPOSE CLEANER & DEGREASER 946ML	Zep Inc	2023-10-01
KRYLON Fluorescent Paint	Krylon Products Group	2025-09-14
ZEP FOAMING GLASS CLEANER 538G 12CT	Zep Inc	2025-12-21
KRYLON ColorMaxx Primer Black	Krylon Products Group	2025-10-23
ZEP AIR & FABRIC ODOR ELIMINATOR	Zep Inc	2023-10-01

VETO	Zep, Inc	2012-01-25
K-Seal	K-Seal International Ltd	2019-09-02
Boardwalk White Lotion Soap	LAGASSE, Inc	2015-02-18
Drummond Open and Shut - Nut and Bolt Loosener and Rust Penetrant	Lawson Products, Inc	2025-12-03
Lawson Tefseal Pipe Sealant with PTFE	Lawson Products, Inc	2020-02-06
Lawson Battery and Terminal Cleaner	Lawson Products, Inc	2022-08-25
BLUE GREASE	Lawson Products, Inc	2015-03-23
1509224 GLOSS BLACK	Lawson Products, Inc	2016-12-19
Lawson Metallic Chrome Aluminum High Solids Paint	Lawson Products, Inc	2022-11-07
Lawson Lubri-Temp Multipurpose Anti Seize	Lawson Products, Inc	2025-11-25
Lawson Silicone Lubricant	Lawson Products, Inc	2022-11-07
Lawson White Lube Grease	Lawson Products, Inc	2023-07-06
Lawson Rubber Undercoat Rubberized Undercoating	Lawson Products, Inc	2022-11-07
Stainless Steel Cleaner	Lawson Products, Inc	2011-03-15
Lawson Citrus Lotion Hand Cleaner	Lawson Products, Inc	2019-08-23
Windshield De-Icer	Lawson Products, Inc	2014-10-30
Lawson Battery Terminal Protector Yellow	Lawson Products, Inc	2022-11-07
Lawson Powr Off Plus Electrical Contact Cleaner	Lawson Products, Inc	2022-11-07
Lawson Tef Gel Penetrating Gel Lubricant with PTFE	Lawson Products, Inc	2022-11-07
Lawson The Stripper Gasket Remover	Lawson Products, Inc	2019-01-17
ROTANIUM ETP Gold Cutting Fluid	Lawson Products, Inc	2015-02-06
Lucas Diesel Deep Clean	Lucas Oil Products UK Ltd	2024-08-21
Lucas DOT 3 Brake Fluid	Lucas Oil Products, Inc	2014-06-15
Engine Oil Stop Leak Top Off Additive	Lucas Oil Products, Inc	2025-12-18
NAPA PREMIUM CONVENTIONAL SAE 10W-40 MOTOR OIL	Ashland	2015-05-22
Solution 2000 Premium Copper Anti-Seize	MRO Solutions, LLC	2015-05-14
3M Scotch-Brite Radial Bristle Disc, Scotch-Brite Radial Bristle Brush	3M Canada Company	2025-06-12
3M Brand Super Trim Adhesive, PN 08090	3M	2018-08-03
11.5 OZ MACS DEICER 7000 LT 12PK	NAPA BALKAMP	2018-01-26
MAC"S SILICONE SPRAY	NAPA BALKAMP	2019-01-10
AVISTAT-D Ready-To-Use Spray Disinfectant Cleaner	National Chemical Laboratories of PA, Inc	2015-06-01
RSC 1 Earth Sense Glass & Window Cleaner (Concentrate)	National Chemical Laboratories of PA, Inc	2012-11-26
FORTRESS Spray Disinfectant Deodorant	National Chemical Laboratories of PA, Inc	2024-08-02
REFRIGERANT R134A	National Refrigerants Ltd	2018-02-26
FLEXWIPES Disinfectant Wipes	National Towelette Company, Inc	2018-06-15
Expo White Board (Care) Cleaner, Expo White Board (Care) Cleaning Wipes,	Newell-Rubbermaid (Sanford LP)	
Truck Lite NYK 77 Lubricant	Niagara Lubricant Co., Inc	2017-12-07
3M Super Trim Adhesive, PN 08090	3M	2022-07-27
Tef Lube	North Woods	2017-06-10
NU-BRITE (4891)	Nu-Calgon	2011-08-15
3M Rubber and Gasket Adhesive 4799	3M	2025-06-25
3M Machine Polish PN05996 Plus	3M Philippines	2024-11-15
937 Tef-Lube	Aervoe industries Incorporated	2020-02-03
Heavy Duty Tire Mounting Compound	Patch Rubber Tyre & Tube	2024-02-10
PEAK AD BLUE DIESEL EXHAUST FLUID	Peak Lubricants Pty Ltd	2023-01-31
Pneumatic Tool Oil	Penrite Oil Company Pty Ltd	2024-04-12
MEDIUM STRENGTH THREADLOCKER BLUE GEL	Permatex Europe	2009-03-03
3% Hydrogen Peroxide	PL Developments LLC	2014-06-04
Cascade Dishwasher Cleaner	PROCTER & GAMBLE	2015-03-26
Mr. Clean Wood Surface Cleaner	PROCTER & GAMBLE	2017-06-09
Freeze-It	QuestSpecialty Corporation	2016-07-28
ALPHA RA-32 Flux Solder Wire Cored 60Sn/40Pb Alloy	Alpha Assembly Solutions Inc	2023-09-20
AMALIE UNIV SYNTHETIC CVT FLUID	AMALIE OIL COMPANY	
FINISH Powerball Quantum Ultimate (Canada)	Reckitt Benckiser (Canada) Inc	2022-07-14

ABC Dry Chemical Fire Extinguishant	AMEREX CORPORATION	2021-06-16
Misty Glass and Mirror Cleaner RTU	Amrep, Inc	2009-04-27
Misty Penetrating Lubricant	Amrep, Inc	2010-09-24
Professional LYSOL Disinfectant Spray - Original	Reckitt Benckiser LLC	2023-03-17
Professional Resolve Stain Remover Carpet Cleaner	Reckitt Benckiser LLC	2014-10-10
Lysol Disinfectant Spray	Reckitt Benckiser LLC	2023-11-03
Nu Finish Scratch Doctor	Reed-Union Corporation	2015-04-28
Pre-Buff Cleaner (Liquid)	Rema Tip Top	2015-07-15
Tip Top OTR Special Cement (Flammable)	Rema Tip Top	2017-02-22
Bar"s Leaks Radiator Stop Leak Pellitized	Bar"s Products	2012-12-07
Repair Sealant	Rema Tip Top	2017-01-18
Radiator Stop Leak and 720 West Rose Street Conditioner	Bar’s Leaks	2007-06-05
BAYER ADVANCED HOME PEST CONTROL INDOOR & OUTDOOR	Bayer Environmental Science	2014-11-06
Woolite Oxy Deep Stain & Odor Remover, Pet Stain & Odor Remover + Oxy, Advan	BISSELL Homecare, Inc	2023-06-20
Dry Lube	Blaster LLC	2022-06-09
Castrol GTX 10W-30	BP Castrol K.K	2024-04-23
Motor Medic Thrust Starting Fluid	RSC Chemical Solutions	2016-11-29
Raid Ant & Roach Killer 27	S.C. Johnson & Son, Inc	2018-10-15
RAID EARTH OPTIONS FLYING INSECT KILLER I	S.C. Johnson & Son, Inc	2015-02-23
RAID DOUBLE CONTROL SMALL ROACH BAITSUse of the : Insecticide	S.C. Johnson & Son, Inc	2013-06-11
CHAMPION SPRAYON SPRAY DISINFECTANT FORMULA 3	Chase Products Co	2023-10-24
RED Z	Safetec of America, Inc	2015-02-23
Red Z, 1% Chlorine	Safetec of America, Inc	2024-02-28
SaniZide Plus Germicidal Solution	Safetec of America, Inc	2024-02-05
SC Johnson Professional Glade Aerosol - Pacific Breeze	SC Johnson Professional GmbH	2023-01-13
39337 Door Skin and SMC Adhesive	SEM Products Inc	2018-03-14
42013 HIgh Build Primer Gray	SEM Products Inc	2018-03-14
61023 Multimax Semi-Gloss Black	SEM Products Inc	2018-03-14
41807 Quick-Set 180	SEM Products Inc	2018-03-14
40502, 40507 QUICK SET 50 Adhesive	SEM Products Inc	2018-10-09
38391, 38398 Scuff and Clean	SEM Products Inc	2018-03-14
ULTRA PALMOLIVE ANTIBACTERIAL DISH LIQUID / ULTRA PALMOLIVE ANTIBACTER	Colgate-Palmolive Co	2019-06-17
Plastic & Leather Prep	SEM Products, Inc	2025-12-28
SOFTSOAP ANTIBACTERIAL LIQUID SOAP - HAND CRISP CLEAN	Colgate-Palmolive Co	2016-04-05
Bar Keepers Friend Soft Cleanser	Servaas Laboratories, Inc	2024-09-03
AJAX PALMOLIVE REGULAR DISH WASHING LIQUID & ANTIBACERIALHAND SOAP O	COLGATE-PALMOLIVE COMPANY	2009-02-16
DIMENSION PRO Reducer Moderate	Compania Sherwin-Williams S.A. de C.V	2019-11-28
STRIPE WHITE INVERTED TIP MARKER	SEYMOUR OF SYCAMORE	2004-01-07
CRC 5098 Battery Terminal Protector (NZ)	CRC Industries	2023-03-10
Viro-Stat	Share Corporation	2016-02-17
CRC Mass Air Flow Sensor Cleaner	CRC Industries	2023-03-10
Shell Gadus S3 V220C 2	Shell Oil Products US	2024-12-10
CRC Brakleen Water Based	CRC Industries	2020-02-05
CRC 5503 Penetr8 Freeze Off Aerosol	CRC Industries	2019-11-01
CRC 5080 DE-SQUEAK	CRC INDUSTRIES (AUST) PTY LIMITED	2024-12-11
MOBIL 600 W SUPER CYLINDER OIL	Mobil Korea Lube Oil Inc	2025-08-26
PTFE Thread Seal Tape	AA Thread Seal Tape, Inc	2020-01-01
PEAK ATF Multi-Vehicle Synthetic	Old World Industries, LLC	2015-04-09
5 Minute Bed Bug Killer Foaming Spray	P.F. Harris Manufacturing Company, LLC	2023-08-23
Gas Leak Locator	Parker Hannifin Corporation - Sporlan Division	2024-10-17
NAPA Lock-Ease Aerosol 765-1384	AGS Company	1990-06-20
Purple Power Concentrated Industrial Strength Cleaner/Degreaser	Aiken Chemical Company, Inc	2015-03-30
Acetylene	AIRGAS INC	2011-05-11
refrigerated liquid; LOX; OXYGEN, COMPRESSED	Airgas USA, LLC	2025-12-03

DIESEL FUEL SUPPLEMENT +CETANE BOOST	Power Service Products, Inc	2025-08-11
DIESEL 9•1•1	Power Service Products, Inc	2022-03-23
Prime Source Germicidal Ultra Bleach	Prime Source	2016-07-25
Joy	Procter & Gamble Professional	2012-06-14
Mr. Clean Magic Eraser	PROCTER & GAMBLE	2017-07-07
Mr. Clean Multi-Purpose Cleaner with Febreze Meadows and Rain	PROCTER & GAMBLE	2016-08-05
AirX 79+ Hospital Spray Disinfectant & Odor Counteractant	AIRX LABORATORIES	2016-11-15
MR. CLEAN TOP JOB All-Purpose Cleaner (Professional Line)	Procter & Gamble	2000-10-27
Aquaox Disinfectant 275	Aquaox LLC	
Mid-Temp (Med)	Axalta Coating Systems, LLC	2017-12-20
Bar"s Leaks Head Gasket Fix	Bar"s Products	2022-02-03
Liqua-Gel	Legend Brands	2016-04-18
WEITRON-134A	REPACKAGER: Weitron, Inc	
FLOURESCENT ORANGE SPRAY PAINT	ROC Sales Inc	2003-10-09
Member"s Mark Disinfecting Wipes1	Rockline Industries	2020-07-21
Motor Medic De-Icer for Auto & Truck	RSC Chemical Solutions	2016-04-19
Gunk Tar-n-Bug Remover	RSC Chemical Solutions	2015-05-15
BP Autran ATF +3	BP Lubricants USA Inc	2006-10-23
CASTROL TRANSMAX S AUTOMATIC TRANSMISSION FLUID	CASTROL NORTH AMERICA AUTOMOTIVE INC	2002-06-27
CERTANIUM 34C	CERTANIUM ALLOYS & RESEARCH CO.	1998-06-09
GLADE SPRAY - HAWAIIAN BREEZE	S.C, Johnson & Son, Inc	2012-03-28
RAID MAX ANT & ROACH	S.C. Johnson & Son, Inc	2015-05-27
RAID MAX BED BUG & FLEA KILLER	S.C. Johnson & Son, Inc	2015-02-24
OFF! FAMILYCARE INSECT REPELLENT IV(UNSCENTED)	S.C. Johnson & Son, Inc	2015-02-23
Champion SprayOn GREEN WORLD N STAINLESS STEEL CLEANER AND POLISH	Chase Products Co	2011-10-10
SW-3 OzzyJuice Truck Grade Degreasing Solution	ChemFree Corporation (A subsidiary of CRC Ind	2016-03-02
MURPHY OIL SOAP LIQUID ORIGINAL B02983950000	Colgate-Palmolive Co	2023-09-06
YIELD	Chemsearch Australia	2015-02-01
VOLTZ II RED	CHEMSEARCH FE DIV. OF NCH CORP	2020-11-24
Hot Shot Bedbug & Flea Killer Powder	Chemsico Division of United Industries Corp	2016-02-24
46V PAG OIL WITH UV DYE	Cliplight Manufacturing	2015-05-07
Clorox Commercial Solutions Clorox Disinfecting Spray	Clorox Professional Products Company	2019-07-22
Clorox Commercial Solutions Clorox Professional Floor Cleaner & Degreaser Conce	Clorox Professional Products Company	2015-01-05
Equa-Torque Differential Friction Modifier	CRC Industries, Inc	2005-02-21
NAPA/CRC Brakleen Non-Chlorinated Brake Parts Cleaner (aerosol)	CRC Industries, Inc	2009-01-06
Nonflammable Contact Cement	DAP Global Inc	2022-04-12
SaniGuard	DEM Technology, LLC	2014-01-30
Spectracide One-Shot Weed & Grass Killer 2	Spectrum Group, Division of United Industries C	2022-04-15
Perfect Data Eco II Duster	Spray Products Corporation	2017-03-12
GLASS CLEANER	SPRAYWAY INC	2015-11-11
ARMOR ALL Original Protectant	The Armor All/STP Products Company	2015-01-31
CRC De-Squeak	CRC Industries, Inc	2004-02-23
Mass Air Flow Sensor Cleaner	CRC Industries, Inc	2017-08-07
CRC Brake Caliper Synthetic Grease, 8 Wt Oz	CRC Industries, Inc	2025-03-24
BLACK OUT Rubberized Undercoat Stock No. : AB-O	Crest Industries, Inc	2018-04-09
DRI	State Chemical Ltd	
Lub	State Industrial Products	
INVISILUBE	State Industrial Products	
Simple Green All-Purpose Cleaner	Sunshine Makers Inc	2023-07-07
Johnsens De-Icer	Technical Chemical Company	2011-06-27
Johnsens Brake Parts Cleaner	Technical Chemical Company	2009-03-11
GOOD SENSE ODOR ELIMINATOR	Diversey, Inc.	2013-12-17
Clorox Bleach Wipes	The Clorox Company	2015-01-05
Clorox Scentiva Disinfecting Multi-Surface Cleaner	The Clorox Company	2018-07-16

Great Stuff	The Dow Chemical Company	2026-03-25
Gorilla Clear Grip	Hours (800) 420-7186	2017-03-22
Penray Air Brake Antifreeze	The Penray Companies, Inc	2016-09-09
Tile Master TM Shield	The Tile Master Global Ltd	2016-11-11
MERCON LV Automatic Transmission Fluid	Ford Motor Company	2015-08-18
Orange Antifreeze/Coolant Prediluted	Ford Motor Company	2015-02-02
PAG Refrigerant Compressor Oil	Ford Motor Company	2023-04-05
MOTORCRAFT SAE 5W-20 SYNTHETIC MOTOR OIL	Ford Motor Company of Canada	2014-01-15
Wave	Fresh Products, LLC	2023-06-03
ANTIBACTERIAL HANDSOAP	GB: The Country Range Group Ltd	2021-08-17
GLO GERM	Glo Germ Company	2018-07-03
GOJO POWER GOLD HAND CLEANER	GOJO Industries, Inc	2010-09-29
PURELL Instant Hand Sanitizer	GOJO Industries, Inc	2015-01-13
LOCTITE 243 MEDIUM STRENGTH THREADLOCKER known as 243 Threadlock250MI	Henkel Australia Pty Ltd	2025-01-17
LOCTITE SI 595 LOCTITE	Henkel Corporation	2025-08-19
Loctite(R) 515 Gasket Eliminator(R) Flange	Henkel Loctite Corporation	2004-02-03
Compressor Oil	Thermo King Corporation	2015-07-15
Freeze-Up	Tifco	2017-10-19
No-Scrape	Tifco Industries, Inc	2015-02-13
SSS LOTION SKIN CLEANSER (CLEAR PINK) / ELOQUENCE PINK LOTION	Triple S	2015-01-20
Lubegard Limited Slip Supplement	International Lubricants, Inc	2019-09-20
EVERCOAT FIBERGLASS-AUTO RESIN	ITW Evercoat	2021-04-26
EVERCOAT BLUE CREAM HARDENER	ITW Evercoat	2020-04-09
EVERCOAT RAGE GOLD	ITW Evercoat	2019-10-07
TURTLE WAX BUG & TAR AND TREE SAP REMOVER	Turtle Wax, Inc	2013-09-01
Turtle Wax Quick & Easy Dash & Glass Interior Cleaner	Turtle Wax, Inc	2015-05-18
DURAGLAS FIBERGLASS REINFORCED FILLER	U.S. CHEMICAL & PLASTICS	2025-01-13
Heavy Duty Rubbing Compound	ITW Evercoat a Division of Illinois Tool Works In	2012-03-28
HIGH TEMPERATURE SLEEVE RETAINER 36ML	ITW Permatex	2020-05-08
OIL-ESTER 100	UView Ultraviolet System Inc., division of, CPS P	2016-10-21
Valvoline GEO SNG-6	Valvoline (Australia) Pty Ltd	2022-12-05
Zerex G-05 FORMULA 50/50 Antifreeze Coolant	Valvoline LLC	2017-05-22
WD-40	WD-40 Company	2006-01-25
3-IN-ONE Professional Garage Door LubeHMIS Rating	WD-40 Products [Canada] LTD	2012-02-27
Wolf"s Head DX III-H/M ATF	WOLF"S HEAD Oil Company	2023-05-05
WOLF’S HEAD SD SEMI SYN 5W30	WOLF’S HEAD LUBRICANTS	2015-07-17
WOLF’S HEAD DEXRON VI SYN ATF	WOLF’S HEAD Oil Company	2018-05-15
WOLF’S HEAD RED GREASE	Wolf’s Head Oil Company	2016-02-20
Yellow Jacket SuperEvac Premium Vacuum Pump Oil	Ritchie Engineering	2018-07-13
Zecol 0° Power Blast Windshield Washer	ZECOL PRODUCTS COMPANY	2016-05-10
Ultra-Clear Glass Cleaning Towels	Kimball Midwest	2018-02-23
Hard-Kut Hi-Performance Metal-working Lubricant	Kimball Midwest	2025-08-10
80-722 MOLY-GUARD DRY MOLY LUBE	Kimball Midwest	2018-06-26
ZEP COMMERCIAL ANTIBACTERIAL DISINFECTANT & CLEANER 1GL_4CT : 02238452	Zep Inc	2023-10-01
Drummond Brr-Eaker Rust Breaking Penetrant	Drummond, A Lawson Brand	2018-05-21
Moly Coat	Lawson Products, Inc	2014-05-02
Lawson Brake Klean Non-Flammable Brake Parts Cleaner	Lawson Products, Inc	2023-03-06
Lawson Moly Coat Dry Film Lubricant	Lawson Products, Inc	2018-04-24
HSP OSHA Safety Yellow	Lawson Products, Inc	2013-09-27
Ecologic Bed Bug Killer Aerosol	Liquid Fence	2016-08-25
133K Anti-Seize Lubricant	LOCTITE CORPORATION	1997-07-23
Silicone Lubricant	LOCTITE CORPORATION	1999-01-27
7500 MONOLEC POWER FLUID	Lubrication Engineers Inc	2020-05-15
Lucas RED "N" TACKY Grease	Lucas Oil Products, Inc	2023-07-17

Goo Gone Pro-Power Goo & Adhesive Remover	Manitoulin Warehouse and Distribution	2025-03-18
MIRACLE-GRO LEAF SHINE	Miracle-Gro Lawn Products Inc	2015-07-10
MEDIUM REDUCER	PPG Industries, Inc	2022-12-02
SINGLE STAGE HARDENER	PPG Industries, Inc	2025-11-05
2.1 VOC EPOXY PRIMER - GRAY	PPG Industries, Inc	2026-02-04
STANDARD ACTIVATOR	PPG Industries, Inc	2025-12-24

rabbittransit: WSP-03

CONTROL OF HAZARDOUS ENERGY: LOCKOUT/TAGOUT PROGRAM

The purpose of this program is to establish procedures for affixing appropriate lockout or tagout devices to energy isolating devices, and to otherwise disable machines or equipment to prevent the unexpected start up, or release of stored energy to prevent injury to employees.

The Control of Hazardous Energy: Lockout/Tagout Program is available for review to all employees upon request. The written program will be reviewed and updated as necessary by the Maintenance Manager to ensure the program remains effective.

Training will be completed to ensure that the functions of the energy control program are understood by the employees and that the knowledge and skills required for the safe application, usage, and removal of the energy controls are acquired by the employees.

Energy Control Procedures

1. Protective Materials and Hardware

Lockout/tagout hardware and equipment will be provided by Rabbit Transit for isolating, securing, or blocking of machines or equipment from the energy sources. These devices will be the only devices used to control energy, will not be used for other purposes, singularly identified, durable enough to handle the elements of the working environment, standardized by color and format, and be substantial devices to prevent removal without the use of excessive force, unique removal, or accidental/inadvertent removal. The lockout/tagout devices will be used universally and tracked in a manner that specifies who applied the device.

- Red and White – Steering wheel covers/laminated placards, padlocks, tags, hasps, and lockouts for plugs, breakers & valves.

2. Program Inspections and Review

An inspection of the energy control procedures will be conducted as necessary to ensure the procedures of this program are being followed and to verify the effectiveness of the energy control procedures. The inspections will be conducted by the Maintenance Manager and include observations of the energy control procedures. Any deviations or inadequacies to the energy control procedures will be corrected immediately. Re-training will be conducted if the inspection process reveals that current procedures are ineffective or if specific employees are deficient in the knowledge of established procedures.

Training

Training will be conducted upon the initial orientation of the employee. Thereafter, training will be conducted if there are changes to an employee's job assignments, if a change is made in machines, equipment, or processes present a new hazard, or when there is a change in the energy control procedures. Training will also be conducted if the regular program review/inspection process reveals that the current program is ineffective. All training will be documented.

Authorized Employees will receive training in the recognition of applicable hazardous energy sources, the type and magnitude of the energy that is available at the workplace, and the methods and means necessary for energy isolation and control.

Affected Employees will be instructed in the purpose and use of the energy control procedures.

- **Authorized employee**: A person who locks out or tags out machines or equipment to perform servicing or maintenance on that machine or equipment. An affected employee becomes an authorized employee when that employee's duties include performing servicing or maintenance covered under the standard.

- **Affected employee**: An employee whose job requires them to operate or use a machine or equipment on which servicing or maintenance is being performed under lockout or tagout, or whose job requires them to work in an area in which such service or maintenance is performed.

* Training will include a review of the limitations of the tags used in the tag out system.

Application of Controls

The procedures in this section are for the operation of hazardous energy control and application of the lockout/tag out devices. The procedures that are listed below are only to be applied by an authorized employee and must be completed in the listed sequence.

General lockout/tagout procedures for machine/equipment maintenance

1. Equipment shutdown/isolation of energy
    a. Shutdown the system by using its operating controls (standard operation procedures)
    b. Operate all energy isolating devices: this includes secondary power supplies

2. Application of lockout/tagout devices
    a. All energy isolation devices are to be locked, tagged or both according to machine specific procedures
    b. Only standardized lockout/tagout devices are to be used

3. Release of stored energy
    a. Guard against energy left in the equipment after it has been isolated from its energy source (e.g., bleed, blank, block, brace, etc.)

4. Verification of isolation
    a. Prior to starting any work on machines or equipment that has been locked out or tagged out, the authorized employee will verify that isolation and de-energization have been accomplished

Universal release from lockout/tagout procedures for machine/equipment maintenance

Listed below are the procedures performed by an authorized employee to release the lockout/tagout and reenergize the machine or equipment for operational use.

1. Replace any guards or critical equipment on the machine
2. Inspect the working area and clear all items and tools from the working area

3. Ensure that all employees are safely positioned away from the machine
4. Ensure that all parts of the machine are lubricated and set up for proper operations
5. Ensure that the controls are set in the neutral position
6. Remove all lockout/tagout devices
    a. Only the authorized employee (or in their absence a Supervisor or Manager can remove the device) who applied the lockout/tagout device is allowed to remove that same lockout/tagout device
7. The equipment can then be energized

*Please refer to the machine-specific lockout/tagout procedures outlined in the manufacturer's manual or the written machine-specific LOTO procedures outlined in this program.

Cord and Plug Equipment

Equipment that can be unplugged from an outlet and has no other hazardous energy sources does not fall under the requirements of this program as long as the plug is under the exclusive control of the employee performing service or maintenance. If the employee is unable to maintain exclusive control of the plug, then a plug lock or other suitable energy isolation device must be used in accordance with this program.

Employee Absenteeism/Sickness

The procedure in this section applies to an authorized lockout/tagout employee, who has applied a lockout/tagout device without removing the device after their shift and has not returned to work the following workday. Before the lockout/tagout device can be removed; the Maintenance Manager or Maintenance Supervisor must verify that the employee who has applied the lockout/tagout device is not at the facility, inform or make a reasonable effort to inform that employee the lockout/tagout device is being removed, and ensure the employee has knowledge of the device removal before he/she returns to work.

* The Maintenance Manager or Maintenance Supervisor is authorized to remove a lockout/tagout device.

Lockout/Tagout Shift Change Procedures

If a machine or equipment is locked out or tagged out at the end of a shift, the lockout/tagout device of the off-going employee cannot be removed until an oncoming employee or supervisor lockout/tagout device is immediately attached to the machine or equipment that is being locked or tagged out.

Group Lockout/Tagout

If more than one person is required to lockout/tagout equipment or machinery, each shall place their personal lockout device or tag on the energy isolation device. If the equipment or machine will not accept multiple locks, a hasp may be used.

Outside Contractors

If outside servicing personnel are to be engaged in activities that involve the use of lockout/tagout on machinery or equipment, the outside servicing personnel must submit their energy control procedures, in writing, to the Maintenance Manager before any work can be started. The outside servicing personnel's energy control procedures must meet rabbittransit standards.

rabbittransit: WSP-05
PERSONAL PROTECTIVE EQUIPMENT PROGRAM

rabbittransit has developed a personal protective equipment program to enhance the safety of our employees. The purpose of this program is to establish procedures for the assessment of hazards, selection, provision, use, inspection, maintenance, and training related to personal protective equipment (PPE) at all rabbittransit facilities and operations.

The program applies to all employees, contractors and visitors when on Rabbittransit property or performing work on behalf of rabbittransit and covers the following PPE categories.

- Eye and Face Protection
- Hand Protection
- Head Protection
- Foot Protection
- Body Protection
- Noise Protection
- Respiratory Protection

The Safety, Security and Training Officer (Program Administrator) will periodically assess the PPE Program's effectiveness, and after any significant workplace changes, and update the program as needed.

Job Hazard Assessment

A workplace hazard assessment shall be conducted by the safety and maintenance department. The assessment will identify hazards in the following categories.

- Impact
- Penetration
- Compression
- Chemical
- Heat/cold
- Harmful dust
- Noise
- Light (optical) radiation
- Other recognized hazards

The Job Hazard Assessment is outlined in Appendix A of this program.

PPE Selection Guidelines

PPE is selected based on the hazards identified in the assessment. All required PPE listed in Appendix A of this program will be provided by rabbittransit at no cost to the employee, with the following exceptions:

- Non-specialty safety-toe footwear or non-specialty prescription safety eyewear (if items are permitted to be worn off-site).

Employees may use personal PPE only if it meets or exceeds rabbittransit standards and is approved by the supervisor and/or safety department.

Provision, Care, Maintenance, Inspection and Storage of PPE

Employees are responsible for keeping their PPE clean, functional, and ready for immediate use. Before each use, employees must inspect their PPE for damage, excessive wear, tears, cracks, missing parts, or contamination.

Employees must immediately report damaged, lost, or contaminated PPE to their supervisor. Damaged or defective PPE will be immediately removed from service and replaced at no cost to the employee. PPE that has been contaminated with blood, chemicals, or other hazardous substances shall be disposed of or decontaminated according to manufacturer instructions.

Employees shall store PPE in a manner to prevent damage and to maintain its protective integrity.

PPE Training

Every affected employee will receive initial PPE training before performing work requiring PPE. Training will cover, at a minimum:

- Information from the job hazard assessment.
- When and what PPE is necessary.
- How to properly don, doff, adjust and wear PPE.
- Limitations of the PPE.
- Proper care, maintenance, useful life, and disposal of PPE.

Retraining will be provided for employees who either demonstrate lack of knowledge, understanding, or skill with respect to PPE, whose job requirements for PPE have changed since their most recent training session, or new hazards are introduced.

PPE Enforcement

Failure to wear required PPE or properly maintain it will result in progressive discipline. Supervisors will visually monitor daily and document non-compliance. Willful or egregious violations may result in immediate removal from duty.

Visitors and Contractors

Visitors and contractors on rabbittransit property must wear, at minimum, safety glasses, closed-toe shoes, and a high visibility vest in the shop and maintenance areas. Contractors must provide their own PPE unless prior arrangements are made.

APPENDIX A – Job Hazard Assessment

APPENDIX A
Job Hazard Assessment

Worksite Assessed All rabbittransit locations

Assessment Date May 11, 2026

Person(s) responsible for conducting assessment: Safety Department & Maintenance Department

Scope: This analysis applies to any employee performing the listed job or tasks.

Definition
Job Hazard is any duty, tool, machine, material or supply encountered by an employee during the performance of their job duties, which could cause harm or injury. The following hazards have been identified after a detailed review of regular tasks performed by employees in the various work categories.

General PPE Requirements

- High-visibility vests or maintenance uniforms are mandatory any time employees are in the shop, yard or bus movement areas.
- Slips and Falls – All employees are required to wear non-slip sole footwear

Job Hazard Assessments

Job or Task Steps: Equipment **Operation, Hand & Power Tool Use**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals, burns	Safety glasses, face shield when required
Foot Injury	Impact/compression, electrical, puncture, chemicals, burns	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact, burns	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires; (no loose gloves near rotating parts)
Body Injury	Chemicals, cuts/abrasions, burns	Full length pants, work shirt (no sleeveless)
Noise Exposure	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Preventative **Maintenance, Vehicle Servicing & Inspections**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals	Safety glasses, face shield when required
Foot Injury	Impact/compression, electrical, puncture, chemicals	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires
Body Injury	Chemicals, cuts/abrasions	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Fall from height	Working on bus roof	Fall-restraint harness
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Equipment **Repair, Installation & Fabrication**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals, burns, light radiation	Safety glasses, face shield when required; welding helmet, tinted goggles when required
Foot Injury	Impact/compression, electrical, puncture, chemicals, burns	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact, burns	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires
Body Injury	Chemicals, cuts/abrasions, burns	Full length pants, work shirt (no sleeveless), flame-retardant clothing when required
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust, fumes	N95 or higher when needed; local exhaust, ventilation
Fall from height	Working on bus roof	Fall-restraint harness
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Vehicle **Painting**

Hazard	**Hazard Assessment**	**Personal Protective Equipment**
Eye and Face Injury	Flying debris, chemicals	Safety glasses, face shield when required
Foot Injury	Impact/compression, puncture	Work boot, steel toed boot
Hand Injury	Chemicals	Latex, nitrile, or rubber gloves as task requires
Body Injury	Chemicals	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Chemicals	Respiratory protection required for painting; local exhaust, ventilation
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Welding **and Torch Cutting**

Hazard	**Hazard Assessment**	**Personal Protective Equipment**
Eye and Face Injury	Flying debris, burns, light radiation	Welding helmet, tinted goggles when required
Foot Injury	Impact/compression, electrical, puncture, burns	Work boot, steel toed boot
Hand Injury	Puncture, cut/abrasion, electrical, impact, burns	Leather gloves as task requires
Body Injury	Cuts/abrasions, burns	Full length pants, work shirt (no sleeveless), flame-retardant clothing, jacket or sleeves
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust, fumes	N95 or higher when needed; local exhaust, ventilation
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Bench **Grinder**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, burns	Safety glasses, face shield when required
Foot Injury	Impact/compression, puncture, burns	Work boot, steel toed boot
Hand Injury	Puncture, cut/abrasion, electrical, impact, burns	Cut resistant gloves as task requires (no loose gloves near rotating parts)
Body Injury	Cuts/abrasions, burns	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Vehicle **Fueling**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Chemicals	Safety glasses
Foot Injury	Impact/compression, puncture	Work boot, steel toed boot
Hand Injury	Chemicals	Latex, nitrile, or rubber gloves
Body Injury	Chemicals	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Vehicle **Washing (Manual)**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals	Safety glasses
Foot Injury	Impact/compression, puncture	Work boot, steel toed boot
Hand Injury	Chemicals	Latex, nitrile, rubber gloves as task requires
Body Injury	Chemicals	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Shop**/Yard Clean up (Facility Maintenance)**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals, burns	Safety glasses, face shield when required
Foot Injury	Impact/compression, electrical, puncture, chemicals, burns	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact, burns	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires
Body Injury	Chemicals, cuts/abrasions, burns	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust, fumes	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

rabbittransit: WSP-06
RESPIRATORY PROTECTION PROGRAM

The purpose of the respiratory protection program is to establish a written program with site-specific procedures and elements for required respiratory use. The program is designed to reduce the exposure of employees to hazardous occupational air contaminants that they might be exposed to in the workplace.

Policy

The Respiratory Protection Program is available for review to all employees upon request. The written program will by audited and updated as needed by the Safety, Security and Training Officer to ensure the program remains effective.

Education and training will be provided prior to the initial use of a respirator, with accordance to the retraining criteria of this program, and if changes are made to the respiratory protection program. Training will cover all elements of this program and be comprehensive and in a manner understandable to employees.

Selection of Respirators

The selection of respirators that are used in this facility was based on an evaluation of respiratory hazards in the workplace that employees may be exposed to, and on workplace and user factors that affect respirator performance and reliability. Only respirators that are issued by rabbittransit are permitted to be used in the workplace. The respirators chosen are NIOSH-certified and will be used in compliance with the conditions of its certification.

The list of respirators used at this Authority will be maintained at each site where they are used.

Medical Evaluations of Employees Required to Use Respirators

Before an employee is fit tested and required to use a respirator, the employee will be required to complete the medical questionnaire contained in Appendix A or be examined by a primary care physician (PCP). Employees who refuse to undergo a medical evaluation or complete the questionnaire are not permitted to work in areas that require a respirator.

If the questionnaire is completed in lieu of a personal examination, it will be reviewed and approved by a PCP before the employee is permitted to wear the respirator. Once the questionnaire is completed, it will be sent to the selected company physician for review and evaluation.

Follow-up visits will be granted to all employees when deemed necessary by the PCP. Employees will be granted an opportunity to speak with the designated company physician about their medical evaluation if they request.

Additional medical evaluations will be granted if:

A. An employee reports medical signs or symptoms that are related to ability to use a respirator.

B. A physician or other licensed health professional, supervisor, or the respiratory program administrator informs the employee that the employee needs to be reevaluated.

C. Information from the respiratory protection program, including observations made during fit testing and program evaluation, indicates a need for employee reevaluation.

D. If a change occurs in workplace conditions that may result in a substantial increase in the physiological burden placed on an employee.

Fit Testing Procedures for Tight-Fitting Face piece Respirators

Before an employee is required to use any respirator with a negative or positive pressure tight-fitting face piece, the employee will be fit tested with the same make, model, style, and size of respirator used.

rabbittransit will ensure that employees using a tight-fitting facepiece respirator pass an appropriate qualitative fit test (QLFT) as outlined in Appendix B – Qualitative Fit Test Protocol.

Fit testing must be completed prior to initial use of the respirator and at least annually thereafter.

Additional fit testing will be conducted:

1. Upon notification by an employee that the fit of the respirator is unacceptable;

2. Whenever a different respirator face piece (size, style, model, or make) is used, and on a biennial basis thereafter.

3. Upon notification or observation of changes in the employees' physical condition that could affect respirator fit. Such conditions include, but are not limited to, facial scarring, dental changes, cosmetic surgery, or an obvious change in body weight.

Use of Respirators

The proper use of respirators is critical to the success of the respiratory protection program. Employees that are required to wear respirators must follow the proper procedures for wearing a respirator including: wearing the respirator properly to prevent facepiece seal leakage; not removing the respirator in hazardous environments; conduct seal checks before every use when wearing tight-fitting respirators; and to wear the respirator correctly during the duration of the operation that requires the use of the respirator.

Tight-fitting facepiece respirators will not be permitted to be worn under the following conditions;

1. Facial hair that comes between the sealing surface of the face piece and the face or that interferes with valve functions.

2. Any condition that interferes with the face-to-facepiece seal or valve function.

* The use of a self-contained breathing apparatus or supplied air respirators are not permitted.

Seal Check Procedures

Employees using tight-fitting facepiece respirators are to perform a user seal check to ensure an adequate seal is achieved each time the respirator used. Either a positive or negative pressure check is acceptable.

Positive pressure check

Close off the exhalation valve and exhale gently into the face piece. The face fit is considered satisfactory if a slightly positive pressure can be built up inside the face piece without any evidence of outward leakage of air at the seal.

Negative pressure check

Close off the inlet opening of the canister or cartridge(s) by covering with palms of the hands(s) or by replacing the filter seal(s), inhale gently so that the face piece collapses slightly, and hold breath for ten seconds. If the face piece remains in its slightly collapsed condition and no inward leakage of air is detected, the tightness of the respirator is considered satisfactory.

Maintenance and Care of Respirators

Proper maintenance and care of the respirator is important to maintain its effectiveness. Cleaning and disinfecting, storage, inspection, and repair of respirators used by the employees will be conducted as necessary as part of the respiratory protection program.

Cleaning and Disinfecting

Each employee using a respirator will be provided with a respirator that is clean, sanitary, and in good working order. Cleaning procedures defined by manufacturers will be followed.

Respirators will be cleaned according to the following schedule:

1. Respirators issued for the exclusive use of an employee shall be cleaned and disinfected as often as necessary to be maintained in a sanitary condition.

2. Respirators issued to more than one employee shall be cleaned and disinfected before being worn by the different individual.

3. Respirators used in fit testing and training shall be cleaned and disinfected after each use.

Storage

Respirators must be stored to protect them from damage, contaminants, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals. They will be packed and stored in a manner to prevent deformation of the facepiece and exhalation valve.

Inspection

Respirators are to be inspected before use and during cleaning. It is important to inspect the respirator prior to use so the employee is assured to be using a respirator that is working properly. All respirators that fail an inspection or are otherwise found to be defective are to be removed from service and disposed of properly. Inspection of the respirator will include:

- a check of respirator function;
- tightness of connections;
- condition of various parts including the facepiece, head straps, valves, filters and elastomeric parts for signs of deterioration.

Training and Information

Training on respirator use and information on the respiratory protection program will be provided prior to requiring the employee to use a respirator in the workplace.

Training will encompass proper use, inspection, maintenance and other information related to respirator use. Employees must demonstrate understanding of the training and basic knowledge.

Re-training will be administered when the following situations occur:

A. Changes in the workplace or the type of respirator render previous training obsolete,

B. Inadequacies in the employee's knowledge or use of the respirator indicate that the employee has not retained the requisite understanding or skill,

C. Any other situation arises in which retraining appears necessary to ensure safe respirator use.

Employee information when wearing respirator when not required

If employees choose to wear a respirator even when it is not required, important information about the use of respirators will be provided. Training will include information that:

1. The employee should read and comply with all instructions provided by the manufacturer.

2. Choose respirators that are certified to use to protect against the contaminant of concern.

3. Do not wear the respirator into atmospheres containing contaminants for which the respirator is not designed to protect against.

Program Evaluation

The Respiratory Protection Program will be reviewed as necessary to ensure that the program is functioning properly and that the program continues to be effective.

Periodic evaluations of the workplace will be conducted to ensure that the provisions of the written program are being properly implemented, and to confirm employees are using the respirators properly. Any problems that are identified during these evaluations will be corrected.

Recordkeeping

Medical Records

All medical evaluation documentation and records will be maintained by the designated physician or other licensed health care professional. If an employee would like to obtain a copy of their medical records a written request must be submitted to the Human Resources department.

Fit Testing

Records will be maintained of the employee qualitative fit tests administered. These records will include:

- The name or identification of the employee tested
- Date tested
- Type of fit test performed
- Specific make, model, style, and size of respirator tested
- The pass/fail results of the qualitative fit tests

* Fit test records will be maintained for respirator users until the next fit test is administered.

APPENDIX A – Respirator Medical Evaluation Questionnaire

APPENDIX B – Qualitative Fit Test Protocol

APPENDIX C – Annual Fit Test Form

APPENDIX A
RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE
For Employees Required to Use Respirators (Mandatory)

Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it. Upon request to your employer, employees will be granted an opportunity to speak with the designated Company Physician about their medical evaluation if they request.

Part A. Section 1. (Mandatory)

The following information must be provided by every employee who has been selected to use any type of respirator (please print).

Today's Date: _____

Your Name: _____

Your Age: _____ Sex: M ☐ F ☐ Height: _____ Weight: _____

Your Job Title: _____

Phone Number: _____

The best time to phone you at this number: _____

Has your employer told you how to contact the health care professional who will review this questionnaire?..... Yes ☐ No ☐

Check the type of respirator you will use (you can check more than one category):

a. _____ N, R, or P disposable respirator (filter-mask, non-cartridge type only)

b. _____ Other type (for example, half or full-mask type, powered-air purifying, supplied-air, self-contained breathing apparatus).

Have you worn a respirator?..... Yes ☐ No ☐

If "yes," what type(s): _____

Part A. Section 2. (Mandatory)

Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month? ..... Yes ☐ No ☐

2.	Have you ever had any of the following conditions?	Yes	☐	No	☐
	a. Seizures (fits)	Yes	☐	No	☐
	b. Diabetes (sugar disease)	Yes	☐	No	☐
	c. Allergic reactions that interfere with your breathing	Yes	☐	No	☐
	d. Claustrophobia (fear of closed-in places)	Yes	☐	No	☐
	e. Trouble smelling odors	Yes	☐	No	☐
3.	Have you ever had any of the following pulmonary or lung problems?				
	a. Asbestosis	Yes	☐	No	☐
	b. Asthma	Yes	☐	No	☐
	c. Chronic bronchitis	Yes	☐	No	☐
	d. Emphysema	Yes	☐	No	☐
	e. Pneumonia	Yes	☐	No	☐
	f. Tuberculosis	Yes	☐	No	☐
	g. Silicosis	Yes	☐	No	☐
	h. Pneumothorax (collapsed lung)	Yes	☐	No	☐
	i. Lung cancer	Yes	☐	No	☐
	j. Broken ribs	Yes	☐	No	☐
	k. Any chest injuries or surgeries	Yes	☐	No	☐
	l. Any other lung problem that you've been told about	Yes	☐	No	☐
4.	Do you currently have any of the following symptoms of pulmonary or lung illness?				
	a. Shortness of breath	Yes	☐	No	☐
	b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline	Yes	☐	No	☐
	c. Shortness of breath when walking with other people at an ordinary pace on level ground	Yes	☐	No	☐
	d. Have to stop for breath when walking at your own pace on level ground	Yes	☐	No	☐
	e. Shortness of breath when washing or dressing yourself	Yes	☐	No	☐
	f. Shortness of breath that interferes with your job	Yes	☐	No	☐
	g. Coughing that produces phlegm (thick sputum)	Yes	☐	No	☐
	h. Coughing that wakes you early in the morning	Yes	☐	No	☐
	i. Coughing that occurs mostly when you are lying down	Yes	☐	No	☐
	j. Coughing up blood in the last month	Yes	☐	No	☐
	k. Wheezing	Yes	☐	No	☐
	l. Wheezing that interferes with your job	Yes	☐	No	☐
	m. Chest pain when you breathe deeply	Yes	☐	No	☐
	n. Any other symptoms that you think may be related to lung problems	Yes	☐	No	☐
5.	Have you ever had any of the following cardiovascular or heart problems?				
	a. Heart attack	Yes	☐	No	☐
	b. Stroke	Yes	☐	No	☐
	c. Angina	Yes	☐	No	☐
	d. Heart failure	Yes	☐	No	☐
	e. Swelling in your legs or feet (not caused by walking)	Yes	☐	No	☐
	f. Heart arrhythmia (heart beating irregularly)	Yes	☐	No	☐
	g. High blood pressure	Yes	☐	No	☐
	h. Any other heart problem that you've been told about	Yes	☐	No	☐

6. Have you ever had any of the following cardiovascular or heart symptoms?
   a. Frequent pain or tightness in your chest..... Yes ☐ No ☐
   b. Pain or tightness in your chest during physical activity..... Yes ☐ No ☐
   c. Pain or tightness in your chest that interferes with your job..... Yes ☐ No ☐
   d. In the past 2 years, have you noticed your heart skipping or missing a beat.. Yes ☐ No ☐
   e. Heartburn or indigestion that is not related to eating..... Yes ☐ No ☐
   f. Any other symptoms that you think may be related to heart or circulation problems..... Yes ☐ No ☐

7. Do you currently take medication for any of the following problems?
   a. Breathing or lung problems..... Yes ☐ No ☐
   b. Heart trouble..... Yes ☐ No ☐
   c. Blood pressure..... Yes ☐ No ☐
   d. Seizures (fits)..... Yes ☐ No ☐

8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator continue to question 9)
   a. Eye irritation..... Yes ☐ No ☐
   b. Skin allergies or rashes..... Yes ☐ No ☐
   c. Anxiety..... Yes ☐ No ☐
   d. General weakness or fatigue..... Yes ☐ No ☐
   e. Any other problem that interferes with your use of a respirator..... Yes ☐ No ☐

9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire?..... Yes ☐ No ☐

Questions 10 to 15 must be answered if you will use either a full-face respirator or a self-contained breathing apparatus (SCBA).

10. Have you ever lost vision in either eye (temporarily or permanently)?..... Yes ☐ No ☐

11. Do you currently have any of the following vision problems?
   a. Wear contact lenses..... Yes ☐ No ☐
   b. Wear glasses..... Yes ☐ No ☐
   c. Color blind..... Yes ☐ No ☐
   d. Any other eye or vision problem..... Yes ☐ No ☐

12. Have you ever had an injury to your ears, including broken ear drum?..... Yes ☐ No ☐

13. Do you currently have any of the following hearing problems?
   a. Difficulty hearing..... Yes ☐ No ☐
   b. Wear a hearing aid..... Yes ☐ No ☐
   c. Any other hearing or ear problem..... Yes ☐ No ☐

14. Have you ever had a back injury?..... Yes ☐ No ☐

15. Do you currently have any of the following musculoskeletal problems?
   a. Weakness in any of your arms, hands, legs, or feet..... Yes ☐ No ☐
   b. Back pain..... Yes ☐ No ☐

c. Difficulty fully moving your arms and legs..... Yes ☐ No ☐
d. Pain or stiffness when you lean forward or backward at the waist..... Yes ☐ No ☐
e. Difficulty fully moving your head up or down..... Yes ☐ No ☐
f. Difficulty fully moving your head side to side..... Yes ☐ No ☐
g. Difficulty bending at your knees..... Yes ☐ No ☐
h. Difficulty squatting to the ground..... Yes ☐ No ☐
i. Climbing a flight of stairs or a ladder carrying more than 25 lbs..... Yes ☐ No ☐
j. Any other muscle or skeletal problem that interferes with using a respirator Yes ☐ No ☐

Part B. Section 1.

Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen?..... Yes ☐ No ☐

   If "yes," do you have feelings of dizziness, shortness of breath, pounding in your chest, or other symptoms when you're working under these conditions: Yes ☐ No ☐

2. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals?..... Yes ☐ No ☐

   If "yes," name the chemicals if you know them: _____

3. Have you ever worked with any of the materials, or under any of the conditions, listed below?
   a. Asbestos..... Yes ☐ No ☐
   b. Silica (**e.g.**, in sandblasting) ..... Yes ☐ No ☐
   c. Tungsten/cobalt (e.g., grinding or welding this material)..... Yes ☐ No ☐
   d. Beryllium..... Yes ☐ No ☐
   e. Aluminum..... Yes ☐ No ☐
   f. Coal (for example, mining)..... Yes ☐ No ☐
   g. Iron..... Yes ☐ No ☐
   h. Tin..... Yes ☐ No ☐
   i. Dusty environments..... Yes ☐ No ☐
   j. Any other hazardous exposures..... Yes ☐ No ☐

   If "yes," describe these exposures: _____

4. List any second jobs or side businesses you have:

   _____

5. List your previous occupations:

   _____

   _____

6. List any current and previous hobbies

_____

7. Were you ever in the military services? ..... Yes ☐ No ☐

   If "yes," were you exposed to biological or chemical agents (either training or combat)? ..... Yes ☐ No ☐

8. Have you ever worked on a HAZMAT team? ..... Yes ☐ No ☐

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications)? ..... Yes ☐ No ☐

   If "yes," name the medications if you know them: _____

Part B. Section 2.

Supplemental information for the health care professional filled out by the employer.

10. Will you be using any of the following items with your respirator(s)?
    a. HEPA Filters ..... Yes ☐ No ☐
    b. Canisters (for example, gas masks) ..... Yes ☐ No ☐
    c. Cartridges ..... Yes ☐ No ☐

11. How often are you expected to use the respirator(s)? (Mark "yes" or "no" for all answers that apply.)
    a. Escape only ..... Yes ☐ No ☐
    b. Emergency rescue only ..... Yes ☐ No ☐
    c. Less than 5 hours **per week** ..... Yes ☐ No ☐
    d. Less than 2 hours **per day** ..... Yes ☐ No ☐
    e. 2 to 4 hours per day ..... Yes ☐ No ☐
    f. Over 4 hours per day ..... Yes ☐ No ☐

12. When the employee uses the respirator(s), is their effort:
    a. Light (less than 200 kcal per hour) ..... Yes ☐ No ☐

    If "yes," how long does this period last during the average shift? hrs. _____ mins. _____

    *Examples of a light work effort are **sitting** while writing, typing, drafting, or performing light assembly work; or **standing** while controlling machines.*

    b. Moderate (200 to 250 kcal per hour) ..... Yes ☐ No ☐

    If "yes," how long does this period last during the average shift? hrs. _____ mins. _____

    *Examples of moderate work effort are **sitting** while nailing or filing; **driving** a truck or bus; **standing** while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; **walking** on a level surface about 2 mph or down a 5 degree grade about 3 mph; or **pushing** a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.*

    c. Heavy (above 350 kcal per hour) ..... Yes ☐ No ☐

    If "yes," how long does this period last during the average shift? hrs. _____ mins. _____

*Examples of heavy work are **lifting** a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; **shoveling; standing** while bricklaying or chipping castings; **walking** up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).*

13. Will the employee be wearing protective clothing and/or equipment (other than the respirator) when using their respirator?..... Yes ☐ No ☐

    If "yes," describe this protective clothing and/or equipment: _____

14. Will they be working in hot conditions (temperature more than 77 deg. F)?..... Yes ☐ No ☐

15. Will you be working under humid conditions?..... Yes ☐ No ☐

16. Describe the work they will be doing while using their respirator(s):

    _____

17. Describe any special or hazardous conditions they might encounter when using respirator(s) (for example, confined spaces, life-threatening gases):

    _____

18. Provide the following information, if you know it, for each toxic substance that they will be exposed to when using their respirator(s):

    Name of the first toxic substance: _____

    Estimated maximum exposure level per shift: _____

    Duration of exposure per shift: _____

    Name of the second toxic substance: _____

    Estimated maximum exposure level per shift: _____

    Duration of exposure per shift: _____

    Name of the third toxic substance: _____

    Estimated maximum exposure level per shift: _____

    Duration of exposure per shift: _____

    Name of any other toxic substance that they will be exposed to while using a respirator:

    _____

19. Describe any special responsibilities they will have while using their respirator(s) that may affect the safety and well-being of others (for example, rescue, security):

    _____

APPENDIX B
QUALITATIVE FIT TESTING PROTOCOL

General Requirements

1. Provide a sufficient number of respirator models and sizes for the employees to choose from to ensure a correct fit.
2. Ensure the employee does not have any hair growth between the skin and the face-piece.
3. Demonstrate to the employee donning and adjustment of the respirator.
4. The employee will then select a respirator that if fitted and used properly will provide adequate protection.
5. The employee will then perform a seal check with the respirator.

Test Exercises

Each test exercise will be performed for one minute. The respirator cannot be adjusted once the fit test exercises begin. If the respirator becomes unacceptable another respirator must be tried.

1. Normal Breathing
    a. In normal standing position, without talking, the subject should breathe normally.

2. Deep Breathing
    a. In a normal standing position, the subject should breathe slowly and deeply, taking caution so as not to hyperventilate.

3. Turning Head Side to Side
    a. Standing in place, the subject will slowly turn his/her head side to side. The head should be held at each extreme momentarily so the subject can inhale at each side.

4. Moving Head Up and Down
    a. Standing in place, the subject should slowly move his/her head up and down. The subject will be instructed to inhale in the up position.

5. Talking
    a. The subject should talk out loud slowly and loud enough so as to heard clearly by the test conductor. The subject should read the Rainbow Passage.

Rainbow Passage: When the sunlight strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many different beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond reach, his friends say he is looking for the pot of gold at the end of the rainbow.

6. Bending Over
    a. The test subject should bend at the waist as if they were to touch their toes. Jogging in place may be substituted for cases that do not permit bending over at the waist.

7. Normal Breathing
    a. Same as exercise 1.

Qualitative Fit Test Protocol: Saccharin Solution Aerosol Protocol

The entire screening and testing procedure will be explained to the test subject prior to the conduct of the screening test.

<u>Saccharin Solution Aerosol Fit Test Procedure</u>

1. The test subject may not eat, drink (except water), smoke, or chew gum for 15 minutes before test.

2. Before fit testing the subject, a saccharin taste screen should be performed without wearing a respirator to determine if the individual can detect the taste of saccharin.
    (a) With the subject breathing normally and wearing the testing enclosure, 10 squeezes of the saccharin should be sprayed into the apparatus. If the subject reports a sweet taste the screening is completed.
    (b) If the subject does not taste the saccharin, 10 more squeezes should be dispensed and the subjected asked if they can taste the saccharin. If a negative response is given, this process should be repeated until a total of the 30 squeezes are administered.
    (c) If the saccharin is not tasted after 30 squeezes, the test subject may not perform the saccharin fit test.

3. After the taste test is successfully administered, the test subject will don the enclosure while wearing the selected respirator. The respirator should be properly adjusted and equipped with a particulate filter(s).

4. An initial concentration of saccharin fit test solution is then sprayed into the enclosure using the same number of squeezes (either 10, 20 or 30 squeezes) based on the number of squeezes required to elicit a taste response as noted during the screening test. A minimum of 10 squeezes is required.

5. Then the test subject will be instructed to perform the test exercises listed above.

6. Every 30 seconds the aerosol concentration should be replenished using one half the original number of squeezes used initially (e.g., 5, 10 or 15).

7. The test subject should indicate to the test conductor if at any time during the fit test the taste of saccharin is detected. If the test subject does not report tasting the saccharin, the test is passed.

8. If the taste of saccharin is detected, the fit is deemed unsatisfactory and the test is failed. A different respirator must be tried and the entire test procedure is repeated.

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QUALITATIVE FIT TESTING FORM

Employee Name: _____ Date: _____

Signature: _____

	Model 1	Model 2
Respirator Type (Model #) (Can test up to 2 on this form)		
Compatible with eye glasses	☐ Yes ☐ No	☐ Yes ☐ No
Pressure/Seal Fit Check	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Pressure/Seal check type (Circle one)	Positive Negative	Positive Negative
Head Stationary Normal Breathing (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Stationary Deep Breathing (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Turning Side to Side (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Moving Up and Down (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Talking (Reciting the Rainbow Passage or Counting Backwards)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Bending Over (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Stationary Normal Breathing (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Respiratory Fit Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Based on the information provided on this form, I certify that the employee named on this form can wear the respiratory protective equipment listed above.

Test Administrator: _____ Date: _____

Signature: _____

rabbittransit: WSP-08
SAFE OPERATING PROCEDURES: RIM MAINTENANCE

Single-Piece Rim Wheels

Employers must instruct employees to use the following steps for safe operating procedures:

1. The tire must be completely deflated by removal of the valve core before demounting.

2. Mounting and demounting of the tire must be performed only from the narrow ledge side of the wheel. Care must be taken to avoid damaging the tire beads, and the tire must be mounted only on a compatible wheel of mating bead diameter and width.

3. A nonflammable rubber lubricant must be applied to bead and wheel mating surfaces before assembling the rim wheel, unless the tire or wheel manufacturer recommends against the use of any rubber lubricant.

4. If a tire changing machine is used, the tire may be inflated only to the minimum pressure necessary to force the tire bead onto the rim ledge and create an airtight seal before removal from the tire changing machine.

5. If a bead expander is used, it must be removed before the valve core is installed and as soon as the rim wheel becomes airtight (when the tire bead slips onto the bead seat).

6. The tire may be inflated only when contained within a restraining device, positioned behind a barrier, or bolted on the vehicle with the lug nuts fully tightened.

7. The tire must not be inflated when any flat, solid surface is in the trajectory and within 1 foot of the sidewall.

8. Employees must stay out of the trajectory when a tire is being inflated.

9. The tire must not be inflated to more than the inflation pressure stamped in the sidewall unless a higher pressure is recommended by the manufacturer.

10. The tire must not be inflated above the maximum pressure recommended by the manufacturer to seat the tire bead firmly against the rim flange.

11. Heat must not be applied to a single-piece wheel.

12. Cracked, broken, bent, or otherwise damaged wheels must not be reworked, welded, brazed, or otherwise heated.

Multi-Piece Rim Wheels

rabbittransit exclusively uses single-piece rim wheels on all revenue and non-revenue vehicles. No multi-piece (split-rim, lock-ring, or multi-piece flange) wheels are in service or serviced by employees. Therefore, all procedures, training, and equipment requirements specific to multi-piece rim wheels are not applicable.

rabbittransit: WSP-08

EMPLOYEE PROFICIENCY: SERVICING RIM WHEELS

Servicing Single Piece Rim Wheels

Name: _____ Date: _____

Required Task	**Satisfactory (✓)**
Demounting tires, including deflation	
Inspecting and identifying rim wheel components	
Installing, handling and removing rim wheels	
Inflating tires when single piece rim wheels are mounted on a vehicle	
Mounting tires, including inflating with a restraining device or other safeguard	
Use of restraining device, barrier and other equipment	
Understanding trajectory	
Inspecting the rim wheel following inflation	

Comments

_____

_____

_____

The following comments have been reviewed with the employee _____ (Employee Initials)

Employee Signature _____

Trainer Signature _____

rabbittransit: WSP-08A

SAFE OPERATING PROCEDURES: LIGHT DUTY TIRE SERVICING

Light Duty Tire Servicing Safe Practices
(Applies to all passenger cars, pickups, SUVs, vans, and any tire marked “P” or “LT”)

All employees who change or repair these tires must follow these minimum safe practices:

1. Completely deflate the tire by removing the valve core before breaking the bead.
2. Use a clip-on chuck with enough hose length (or remote inflation) so the employee is never in the trajectory.
3. Never inflate a tire against a flat wall, workbench, or vehicle if any part of your body is in the trajectory.
4. Never exceed the maximum pressure molded into the tire sidewall.
5. Never use ether/starting fluid or any flammable substance to seat beads.
6. Inspect rims for cracks, bends, or rust-through before mounting. Remove damaged rims from service.
7. Always use a tire cage or inflation shield when inflating off the vehicle if available.

Tire Changing Machine (Rim Mounting Machine) Use

All employees must follow these additional rules when using any Coats, Hunter, or other make/model tire changing machine:

1. The machine must be bolted to the floor or otherwise secured per manufacturer’s instructions.
2. Daily pre-use inspection is required: check turntable clamps, bead breaker, mount/demount head, air lines, and foot pedals for damage or wear.
3. Never place any body part under the mount/demount head or arm while the machine is operating.
4. Always use the correct size clamp adapters for 19.5", 22.5", or 24.5" wheels.
5. Lubricate tire beads and rim liberally with approved tire lube before mounting.
6. When using the “bead seating” or “blast” function, the wheel must remain on the machine turntable, and the operator must stand to the side — never in front of the tire.
7. Never exceed 40 psi while the tire is still on the machine (even if more pressure is needed later to fully seat beads — finish seating inside the safety cage).

8. After the tire is removed from the machine, all final inflation must be done inside the safety cage or on the vehicle with lug nuts fully torqued.

9. Only trained and authorized technicians may operate the tire changing machine.

Wheel Balancer Operation

All employees must follow these rules when using any wheel balancer (Hunter, Coats, etc.):

1. Perform a daily pre-use inspection: check wing nut, cone, shaft, hood latch, and mounting cup for cracks or damage.

2. Always clean the back of the wheel and remove all old wheel weights and debris before mounting.

3. Select the correct cone or adapter and ensure the wheel is centered and seated firmly against the back flange.

4. Tighten the wing nut by hand plus ¼-turn with the provided tool only — never use cheater pipes or impact guns.

5. Close and latch the protective hood before starting the spin cycle (hood must remain closed during the entire cycle).

6. Never walk away from a spinning wheel or leave the balancer unattended while spinning.

7. Never place hands or any body part inside the hood while the wheel is spinning or coasting down.

8. Maximum spin speed for truck/bus wheels is 100 mph (most machines default to this for 22.5"/24.5"). Do not override unless specifically instructed by the manufacturer.

9. After balancing, re-check wing-nut tightness on the vehicle with a calibrated torque wrench (never trust the balancer wing nut alone).

10. Only trained and authorized technicians may operate the wheel balancer.

rabbittransit: WSP-08A

EMPLOYEE PROFICIENCY: TIRE CHANGING MACHINE

Tire Changing Machine Proficiency

Coats, Hunter or Equivalent Rim-Clamp Tire Changer

Name: _____ Date: _____

Required Task	Satisfactory (✓)
1. Performed pre-use inspection of the machine (bolted to floor, air lines, pedals, clamps, bead breaker, mount/mount head)	
2. Correctly selected and installed proper adapters/clamps for a 22.5" or 24.5" wheel	
3. Safely placed wheel on turntable and securely clamped from the inside (rim-clamp style)	
4. Applied approved tire lubricant to both beads and rim mating surfaces	
5. Correctly positioned and used the bead breaker without damaging tire or rim	
6. Safely used the mount/demount head and bar to remove tire without damaging bead or rim	
7. Inspected rim for damage, rust, cracks, or bent areas before re-mounting	
8. Properly mounted new/existing tire on rim using the machine (narrow ledge side first)	
9. Used bead seating/blast function correctly while standing to the side of the tire	
10. Inflated tire on the machine only to the minimum pressure needed to seat beads (≤ 40 psi)	
11. Removed wheel from machine safely after beads were seated	
12. Demonstrated understanding that final inflation must be done in the safety cage or on vehicle	

Comments

_____

_____

The following comments have been reviewed with the employee _____ (Employee Initials)

Employee Signature _____

Trainer Signature _____

rabbittransit: WSP-09

WORKPLACE HAZARD ASSESSMENT - HARRISBURG

Location Name: Harrisburg, Pennsylvania **Date:** _____

Inspector(s): _____

Check "X" under the Y for Satisfactory Condition observed; N for Improvement Recommended Condition observed. For each N, comment on what was observed.

Housekeeping	Yes	No	Comments
Shop layout and appearance reasonably neat and orderly			
Floors & stairways free of liquids, debris and tripping hazards			
Work areas clear of debris, tools & parts not in use			
Tires stored safely			
New and used batteries are properly stored			

Fire Protection	Yes	No	Comments
Extinguishers mounted, accessible and designated with a sign			
Extinguishers inspected/checked monthly			
Extinguishers inspected/serviced annually			
Is the maximum travel distance between extinguishers 50'			
Emergency lighting available and operative			
Sprinkler system tested annually			

Flammable and Combustible Materials	Yes	No	Comments
All chemical containers in shop correctly labeled			
Flammable & combustible materials stored in proper locations and/or flammable storage cabinets			
Oily rags & other combustible materials stored in covered containers			
"Open top" containers emptied after use			

Exits	Yes	No	Comments
Doors free and clear of obstructions and easily open outside			
Exit signs at each exit and illuminated by a reliable light source			
Exit doors are not locked when the building is occupied			

Compressed Gas Cylinders	Yes	No	Comments
Cylinders stored with valve caps on and properly secured			
Cylinders are legibly marked to identify contents			
Cylinders stored or protected from heat/ignition sources			
Spare oxygen and acetylene tanks separated by at least 20'			
Areas identified for both full and empty cylinders			
Spark arrestors properly installed on each torch unit			
Cylinder lines are bled with no pressure reading after use			
Welding & torch carts are in good condition with extinguisher			

Electrical	Yes	No	Comments
Electrical panels and circuit breakers have 3’ clearance			
Panels, disconnect switches, and breakers clearly labeled			
Unused openings enclosed with appropriate covers			
Switches, receptacles and junction boxes provided with covers & face plates			
Electrical cords free of splices, damage or excessive tape			
No temporary wiring *i.e. permanently fixed power strips, etc.*			

Hand/Power Tools, Equipment and Machinery	Yes	No	Comments
Hand and Power tools in good working condition			
Machinery and equipment clean and properly maintained			
Machinery, tools & equipment have proper guards in place			
Bench grinder equipped with tool rest, tongue guard and flange guard. Guards and tool rest properly adjusted.			
Stationary machines and equipment securely anchored			
Paint booth ventilation system operational			
Floor jacks & stands in good condition and labeled for capacity			
Ladders in good condition with no visible damage			
Vehicle maintenance lifts inspected annually			

Fueling Area	Yes	No	Comments
Spill control kit marked, stocked and accessible			
Emergency shutoff clearly labeled and accessible			
Safety glasses, rubber gloves and extinguisher available			
Extinguishers mounted, accessible and designated with a sign			

Personal Protective Equipment, Eyewash and First Aid	Yes	No	Comments
PPE is available, clean and in good condition			
First aid and body fluid kits stocked and available			
Eyewash station in good condition, unobstructed and labeled			

Additional Comments:

rabbittransit: WSP-09

WORKPLACE HAZARD ASSESSMENT - NORTHUMBERLAND

Location Name: Northumberland, Pennsylvania **Date:** _____

Inspector(s): _____

Check "X" under the Y for Satisfactory Condition observed; N for Improvement Recommended Condition observed. For each N, comment on what was observed.

Housekeeping	Yes	No	Comments
Shop layout and appearance reasonably neat and orderly			
Floors & stairways free of liquids, debris and tripping hazards			
Work areas clear of debris, tools & parts not in use			
Tires stored safely			
New and used batteries are properly stored			

Fire Protection	Yes	No	Comments
Extinguishers mounted, accessible and designated with a sign			
Extinguishers inspected/checked monthly			
Extinguishers inspected/serviced annually			
Is the maximum travel distance between extinguishers 50'			
Emergency lighting available and operative			

Flammable and Combustible Materials	Yes	No	Comments
All chemical containers in shop correctly labeled			
Flammable & combustible materials stored in proper locations and/or flammable storage cabinets			
Oily rags & other combustible materials stored in covered containers			
"Open top" containers emptied after use			

Exits	Yes	No	Comments
Doors free and clear of obstructions and easily open outside			
Exit signs at each exit and illuminated by a reliable light source			
Exit doors are not locked when the building is occupied			

Compressed Gas Cylinders	Yes	No	Comments
Cylinders stored with valve caps on and properly secured			
Cylinders are legibly marked to identify contents			
Cylinders stored or protected from heat/ignition sources			
Spare oxygen and acetylene tanks separated by at least 20'			
Areas identified for both full and empty cylinders			
Spark arrestors properly installed on each torch unit			
Cylinder lines are bled with no pressure reading after use			
Welding & torch carts are in good condition with extinguisher			

Electrical	Yes	No	Comments
Electrical panels and circuit breakers have 3’ clearance			
Panels, disconnect switches, and breakers clearly labeled			
Unused openings enclosed with appropriate covers			
Switches, receptacles and junction boxes provided with covers & face plates			
Electrical cords free of splices, damage or excessive tape			
No temporary wiring *i.e. permanently fixed power strips, etc.*			

Hand/Power Tools, Equipment and Machinery	Yes	No	Comments
Hand and Power tools in good working condition			
Machinery and equipment clean and properly maintained			
Machinery, tools & equipment have proper guards in place			
Bench grinder equipped with tool rest, tongue guard and flange guard. Guards and tool rest properly adjusted.			
Stationary machines and equipment securely anchored			
Floor jacks & stands in good condition and labeled for capacity			
Ladders in good condition with no visible damage			
Vehicle maintenance lifts inspected annually			

Personal Protective Equipment, Eyewash and First Aid	Yes	No	Comments
PPE is available, clean and in good condition			
First aid and body fluid kits stocked and available			
Eyewash station in good condition, unobstructed and labeled			

Additional Comments:

rabbittransit: WSP-09

WORKPLACE HAZARD ASSESSMENT - YORK

Location Name: YORK, PA **Date:** _____

Inspector(s): _____

Check "X" under the Y for Satisfactory Condition observed; N for Improvement Recommended Condition observed. For each N, comment on what was observed.

Housekeeping	Yes	No	Comments
Shop layout and appearance reasonably neat and orderly			
Floors & stairways free of liquids, debris and tripping hazards			
Work areas clear of debris, tools & parts not in use			
Tires stored safely			
New and used batteries are properly stored			

Fire Protection	Yes	No	Comments
Extinguishers mounted, accessible and designated with a sign			
Extinguishers inspected/checked monthly			
Extinguishers inspected/serviced annually			
Is the maximum travel distance between extinguishers 50'			
Emergency lighting available and operative			
Sprinkler system tested annually			

Flammable and Combustible Materials	Yes	No	Comments
All chemical containers in shop correctly labeled			
Flammable & combustible materials stored in proper locations and/or flammable storage cabinets			
Oily rags & other combustible materials stored in covered containers			
"Open top" containers emptied after use			

Exits	Yes	No	Comments
Doors free and clear of obstructions and easily open outside			
Exit signs at each exit and illuminated by a reliable light source			
Exit doors are not locked when the building is occupied			

Compressed Gas Cylinders	Yes	No	Comments
Cylinders stored with valve caps on and properly secured			
Cylinders are legibly marked to identify contents			
Cylinders stored or protected from heat/ignition sources			
Spare oxygen and acetylene tanks separated by at least 20'			
Areas identified for both full and empty cylinders			
Spark arrestors properly installed on each torch unit			
Cylinder lines are bled with no pressure reading after use			

Welding & torch carts are in good condition with extinguisher			

Electrical	**Yes**	**No**	**Comments**
Electrical panels and circuit breakers have 3' clearance			
Panels, disconnect switches, and breakers clearly labeled			
Unused openings enclosed with appropriate covers			
Switches, receptacles and junction boxes provided with covers & face plates			
Electrical cords free of splices, damage or excessive tape			
No temporary wiring *i.e. permanently fixed power strips, etc.*			

Hand/Power Tools, Equipment and Machinery	**Yes**	**No**	**Comments**
Hand and Power tools in good working condition			
Machinery and equipment clean and properly maintained			
Machinery, tools & equipment have proper guards in place			
Bench grinder equipped with tool rest, tongue guard and flange guard. Guards and tool rest properly adjusted.			
Stationary machines and equipment securely anchored			
Floor jacks & stands in good condition and labeled for capacity			
Ladders in good condition with no visible damage			
Vehicle maintenance lifts inspected annually			

Fueling Area	**Yes**	**No**	**Comments**
Spill control kit marked, stocked and accessible			
Emergency shutoff clearly labeled and accessible			
Safety glasses, rubber gloves and extinguisher available			
Extinguishers mounted, accessible and designated with a sign			

Personal Protective Equipment, Eyewash and First Aid	**Yes**	**No**	**Comments**
PPE is available, clean and in good condition			
First aid and body fluid kits stocked and available			
Eyewash station in good condition, unobstructed and labeled			

Additional Comments:

Pennsylvania Workers and Community Right to Know Act Policy

Pennsylvania Worker and Community Right to Know Act (the "Act") (Act 159 of 1984) is a policy that provides employees, communities, and emergency responders with information about hazardous substances in the workplace. It requires employers to provide access to documents like the Hazardous Substance Survey Form (HSSF), Environmental Hazard Survey Form (EHSF), and Material Safety Data Sheets (MSDS/SDS), which detail the hazards and safe handling procedures for chemicals. The following sets forth the Authority's policies and procedures for the implementation of the Act.

I. Policy Statement

It is the policy of the Authority to provide all employees and the community with access to information on hazardous materials present in our workplace, in compliance with the Pennsylvania Worker and Community Right to Know Act (the "Act") (Act 159 of 1984). We are committed to informing employees of potential health hazards and ensuring safe handling procedures are understood and followed.

II. Rights under the Policy

- **Access to records:** Employees have the right to access records related to their exposure to hazardous substances.
- The Authority will post the necessary posting of employee rights and complaint information at the workplace in designated posting areas.

III. Procedures

The following procedures detail how the Authority fulfills its obligations under the Act:

- **Hazard Communication Program**: We maintain a written hazard communication program that addresses potential hazards, control methods, and a comprehensive list of all known hazardous chemicals in the workplace.
- **Chemical Inventory and Labeling**:
    - A complete inventory of hazardous chemicals is maintained and updated regularly.

- All containers and ports of pipeline systems containing hazardous or non-hazardous chemicals are prominently labeled to identify contents and hazards.

- **Work Area:** The employer shall prepare a list of all hazardous substances used or produced in a specific area in the workplace. The work area list should be updated annually. Copies should be provided to employees upon request and must be offered to newly assigned to that employee assigned to that work area.

- **Information Access (MSDS/SDS and HSSF)**:
  - **Material Safety Data Sheets (MSDS)/Safety Data Sheets (SDS)** for all hazardous substances are collected, maintained on-site, and made available to employees without the need for supervisor intervention.
  - A **Hazardous Substance Survey Form (HSSF)** is completed and posted annually by April 1, and provided to the Department of Labor & Industry upon request.
  - An **Environmental Hazard Survey Form (EHSF)** is completed, if requested by the department, and made available to employees and the community.

- **Employee Training**:
  - An annual training program is provided for all employees who may be exposed to hazardous substances.
  - Employees who work with or are near hazardous substances must be trained on the chemicals, their location, potential health effects, and how to handle them safely.
  - Training covers employee rights under the Act, the location of required postings and information sheets, and proper handling/emergency procedures.
  - New employees receive this training within 120 days of employment.

- **Health and Exposure Records**:
  - Employee chemical exposure records are maintained securely and confidentially for at least 30 years beyond an employee's termination.
  - Employees have the right to access their own exposure records.

- **Non-Discrimination**: The company will not discharge, discipline, retaliate, or discriminate against any employee for exercising their rights under the PA Worker and Community Right to Know Act.

IV. Information Availability:

Information Requests/Complaints: Employees or community members can use the PA Department of Labor & Industry Request for Information/Complaint Form to request information.

- **Information Access:** Employers must make documents about hazardous substances readily available to employees, who can request them without management intervention.
- **Required Documents:** Information is provided through documents such as:
    - **Hazardous Substance Survey Form (HSSF):** Lists hazardous substances present in the workplace.
    - **Environmental Hazard Survey Form (EHSF):** Details any environmental hazards emitted, discharged, or disposed of from the workplace.
    - **Material Safety Data Sheets (MSDS/SDS):** Provide detailed information on chemical properties, hazards, and safe handling procedures.
    - **Workplace Postings:** Employers must post a notice that summarizes the act to inform employees of their rights.

pennsylvania
DEPARTMENT OF LABOR & INDUSTRY
BUREAU OF WORKERS' COMPENSATION

EMPLOYEE WORKPLACE NOTICE PUBLIC SECTOR

Pennsylvania Worker and Community Right To Know Act

The Pennsylvania Worker and Community Right to Know Act requires that information about hazardous substances in the workplace and in the environment is available to public sector employees and employees of private sector workplaces not covered by the Federal Occupational Safety and Health Administration (OSHA) Hazard Communication Standard and to all persons living or working in the state. Employee rights listed below are further defined in the Worker and Community Right to Know Act (P.L. 734, No. 159) and Regulations. For additional information, contact the Department of Labor & Industry, Bureau of Workers' Compensation, Health & Safety Division, 1171 S. Cameron Street, Room 324, Harrisburg, Pennsylvania 17104-2501; Phone: 717-772-1635; Fax: 717-783-6365; E-mail: RA-LI-BWC-SAFETY@pa.gov.

Employee Workplace Notice:

Public sector employers (including state and local government agencies and public schools and public universities) and private sector employers not covered by the OSHA Hazard Communication Standard must post this notice informing employees of their rights under the law. This notice must be posted prominently in the workplace at a location where employee notices are normally posted.

Training:

Public sector employers and private sector employers not covered by the OSHA Hazard Communication Standard must provide an annual education and training program to employees exposed to hazardous substances. The training program may be presented either in written form or in training sessions.

Hazardous Substance Survey Form:

The Hazardous Substance Survey Form (HSSF) provides an inventory of the hazardous substances found in the workplace during the prior calendar year. All employers must complete a workplace HSSF annually. Public sector employers and private sector employers not covered by OSHA must post the HSSF prominently in the workplace and must provide a copy to any employee upon request.

Work Area List:

The Work Area List names the hazardous substances used or produced in a specific work area in the workplace. Public sector employers and private sector employers not covered by the OSHA Hazard Communication Standard must update a Work Area List at least annually, must provide a copy to any employee of the work area upon request, and must offer a copy to any employee newly assigned to that work area.

Material Safety Data Sheet/Safety Data Sheet:

The Material Safety Data Sheet (MSDS)/Safety Data Sheet (SDS) provides detailed information about a hazardous substance. In public sector workplaces and private sector workplaces not covered by the OSHA Hazard Communication Standard, an MSDS/SDS must be accessible in the work area where the hazardous substance it describes is used. MSDSs/SDS must be readily available to employees without the intervention or permission of management or supervisors, and any employee may obtain and examine an MSDS/SDS for any hazardous substance in the workplace. If an employee's request to obtain a copy of an MSDS/SDS is made to the employer in writing and, after five working days from the date the request is made, the employer fails to furnish the employee with an MSDS/SDS in the employer's possession or fails to provide the employee with proof of the employer's effort to obtain the requested MSDS/SDS from the manufacturer, importer, supplier or distributor and from the Department of Labor & Industry, the requesting employee may refuse to work with the substance.

Environmental Hazard Survey Form:

The Environmental Hazard Survey Form (EHSF) provides information about any environmental hazards emitted, discharged or disposed of from the workplace. All employers are required to complete an EHSF when and if requested to do so by the Department of Labor & Industry. If an EHSF has been completed by a public sector employer or a private sector employer not covered by the OSHA Hazard Communication Standard, a copy must be provided to any employee upon request.

Labeling:

All containers and ports of pipelines of hazardous and non-hazardous substances in public sector workplaces and private sector workplaces not covered by the OSHA Hazard Communication Standard must be properly labeled. Employers must ensure that each label, sign, placard or other operating instruction is prominently affixed and displayed on the container or port of a pipeline system so that employees can easily identify the contents.

Health and Exposure Records:

Public sector employers and private sector employers not covered by the OSHA Hazard Communication Standard must maintain and allow employee access to records of employee chemical exposure to the extent required by OSHA (under 29 CFR 1910.1200) or by the Mine Safety Health Administration (under 30 CFR 70.210 and 71.210).

Non-discrimination:

If a public sector employee or an employee of a private sector workplace not covered by the OSHA Hazard Communication Standard believes that he or she has been discharged, disciplined or discriminated against by an employer for exercising his or her rights granted under the Pennsylvania Worker and Community Right to Know Act, that employee has 180 days from the date of the alleged violation to file a written complaint with the Department of Labor & Industry, Bureau of Workers' Compensation, Health & Safety Division.

Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program

APPENDIX A

YORK ZARFOSS FACILITY PANIC BUTTON PROCEDURES

The York Zarfoss facility is equipped with a panic button system.

Purpose

This procedure outlines the activation, operation, and response protocols for the panic button system in the building. The system is designed to alert key locations in the event of an emergency requiring immediate attention, such as security threats or medical emergencies.

System Overview

Activation Point

- Front Desk
- Dispatch Office – Fixed Route Position

Alert Locations

1. Second Floor Lobby
2. Chief Maintenance Officer's Office
3. Safety, Security, and Training Officer's Office
4. Dispatch Office
5. Front Desk

Alert Signals

- Audio: A distinct audible alarm designed to be recognizable and attention-grabbing and a different sound than the fire alarm system.

- Visual: A flashing white light.

- Color Code: Panic Alert devices are white to differentiate them from the fire alarm system, which uses red devices.

Activation Procedures

1. Identifying an Emergency: Assess the situation. Activate the panic button only for situations requiring immediate emergency assistance, such as security breaches, violent incidents, or critical medical emergencies.

2. Activating the Panic Button: Press the panic button located at the Front Desk or in the Dispatch Office. Ensure the button is pressed firmly until activation is confirmed (audible and visual signals will begin immediately).

Response Protocol for Alerted Locations

- Immediate Attention: Upon hearing the panic alarm or seeing the flashing white light, pause current activities to assess the situation.

- Emergency Response: Site Manager, Chief Maintenance Officer and Safety, Security, and Training Officer will respond to the Dispatch Office and Front Desk to confirm the nature of the emergency and take the appropriate action.

  Upon hearing the panic alarm, designated responders will evaluate the emergency and stage in a safe location. They will communicate via radio/phone with the Dispatch Office and Front Desk to confirm the nature of the emergency and then summon the appropriate resources. Designated responders will guide police/fire/EMS when they arrive. No other employees should move toward the threat area.

- Emergency Procedures: Depending on the situation, take one or more of the following actions:
  - Secure the area.
  - Provide assistance as necessary.
  - Follow evacuation or shelter-in-place protocols as directed.

Shelter-in-Place Protocol (active threat only)

1. Identify a Safe Location: Move to the nearest locked room with no windows. If a room without windows is unavailable, select a room with covered windows to minimize visibility.

2. Secure the Room: Lock all doors and barricade them if necessary. Turn off lights and silence all electronic devices.

3. Stay Low and Quiet: Keep noise to a minimum. Position yourself and others away from the door and out of sight.

4. Wait for Instructions: Remain sheltered until you receive an "all-clear" notification from authorities or emergency personnel.

Designated Meeting Area/Muster Point

- Location: The designated muster point is located at the front of the employee parking lot, adjacent to the driveway.

- Organized Assembly: Employees will assemble by department. Supervisors are responsible for organizing their teams and ensuring order during the assembly.

- Accountability: Supervisors will take a roll call and verify that all employees are accounted for. Any missing individuals must be reported immediately to emergency personnel.

Cancellation of a Panic Button Activation

Cancellations must be handled promptly to avoid unnecessary response.

- Access and confirm: Immediately verify if the activation was accidental and contact the Safety, Security, and Training Officer and Chief Maintenance Officer.
- An all-page announcement should be made – "ALL CLEAR"

Training

Conduct training sessions annually for all staff. Training will include:

- Proper use of the panic button system.
- Emergency response protocols for different scenarios.
- Shelter-in-place and evacuation procedures.
- Differentiation between the panic button system and the fire alarm system.

Testing and Maintenance

- Monthly Testing: The panic button system should be tested monthly by the Facilities Department to ensure functionality. Testing should involve:
  - Notifying all employees by email and an all-page announcement that we are conducting a test and there is no emergency.
  - Activating the system from both the Front Desk and the Dispatch Office.
  - Verifying the audio and visual signals in all alert locations.
  - Resetting the system after testing.
- Maintenance Schedule: Inspect and clean the devices to ensure proper functionality. Replace any faulty equipment immediately.

Documentation

- Log each activation, test, and maintenance activity. Include details such as:
  - Date and time.
  - Reason for activation or testing.
  - Results of the system check.
  - Any corrective actions taken.

By adhering to this procedure, employees can ensure a coordinated and efficient response during emergencies, enhancing the safety and well-being of everyone in the building.

APPENDIX A
RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE
For Employees Required to Use Respirators (Mandatory)

Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it. Upon request to your employer, employees will be granted an opportunity to speak with the designated Company Physician about their medical evaluation if they request.

Part A. Section 1. (Mandatory)

The following information must be provided by every employee who has been selected to use any type of respirator (please print).

Today's Date: _____

Your Name: _____

Your Age: _____ Sex: M ☐ F ☐ Height: _____ Weight: _____

Your Job Title: _____

Phone Number: _____

The best time to phone you at this number: _____

Has your employer told you how to contact the health care professional who will review this questionnaire?..... Yes ☐ No ☐

Check the type of respirator you will use (you can check more than one category):

a. _____ N, R, or P disposable respirator (filter-mask, non-cartridge type only)

b. _____ Other type (for example, half or full-mask type, powered-air purifying, supplied-air, self-contained breathing apparatus).

Have you worn a respirator?..... Yes ☐ No ☐

If "yes," what type(s): _____

Part A. Section 2. (Mandatory)

Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month? ..... Yes ☐ No ☐

2.	Have you ever had any of the following conditions?	Yes	☐	No	☐
	a. Seizures (fits)	Yes	☐	No	☐
	b. Diabetes (sugar disease)	Yes	☐	No	☐
	c. Allergic reactions that interfere with your breathing	Yes	☐	No	☐
	d. Claustrophobia (fear of closed-in places)	Yes	☐	No	☐
	e. Trouble smelling odors	Yes	☐	No	☐
3.	Have you ever had any of the following pulmonary or lung problems?				
	a. Asbestosis	Yes	☐	No	☐
	b. Asthma	Yes	☐	No	☐
	c. Chronic bronchitis	Yes	☐	No	☐
	d. Emphysema	Yes	☐	No	☐
	e. Pneumonia	Yes	☐	No	☐
	f. Tuberculosis	Yes	☐	No	☐
	g. Silicosis	Yes	☐	No	☐
	h. Pneumothorax (collapsed lung)	Yes	☐	No	☐
	i. Lung cancer	Yes	☐	No	☐
	j. Broken ribs	Yes	☐	No	☐
	k. Any chest injuries or surgeries	Yes	☐	No	☐
	l. Any other lung problem that you've been told about	Yes	☐	No	☐
4.	Do you currently have any of the following symptoms of pulmonary or lung illness?				
	a. Shortness of breath	Yes	☐	No	☐
	b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline	Yes	☐	No	☐
	c. Shortness of breath when walking with other people at an ordinary pace on level ground	Yes	☐	No	☐
	d. Have to stop for breath when walking at your own pace on level ground	Yes	☐	No	☐
	e. Shortness of breath when washing or dressing yourself	Yes	☐	No	☐
	f. Shortness of breath that interferes with your job	Yes	☐	No	☐
	g. Coughing that produces phlegm (thick sputum)	Yes	☐	No	☐
	h. Coughing that wakes you early in the morning	Yes	☐	No	☐
	i. Coughing that occurs mostly when you are lying down	Yes	☐	No	☐
	j. Coughing up blood in the last month	Yes	☐	No	☐
	k. Wheezing	Yes	☐	No	☐
	l. Wheezing that interferes with your job	Yes	☐	No	☐
	m. Chest pain when you breathe deeply	Yes	☐	No	☐
	n. Any other symptoms that you think may be related to lung problems	Yes	☐	No	☐
5.	Have you ever had any of the following cardiovascular or heart problems?				
	a. Heart attack	Yes	☐	No	☐
	b. Stroke	Yes	☐	No	☐
	c. Angina	Yes	☐	No	☐
	d. Heart failure	Yes	☐	No	☐
	e. Swelling in your legs or feet (not caused by walking)	Yes	☐	No	☐
	f. Heart arrhythmia (heart beating irregularly)	Yes	☐	No	☐
	g. High blood pressure	Yes	☐	No	☐
	h. Any other heart problem that you've been told about	Yes	☐	No	☐

6. Have you ever had any of the following cardiovascular or heart symptoms?
   a. Frequent pain or tightness in your chest..... Yes ☐ No ☐
   b. Pain or tightness in your chest during physical activity..... Yes ☐ No ☐
   c. Pain or tightness in your chest that interferes with your job..... Yes ☐ No ☐
   d. In the past 2 years, have you noticed your heart skipping or missing a beat.. Yes ☐ No ☐
   e. Heartburn or indigestion that is not related to eating..... Yes ☐ No ☐
   f. Any other symptoms that you think may be related to heart or circulation problems..... Yes ☐ No ☐

7. Do you currently take medication for any of the following problems?
   a. Breathing or lung problems..... Yes ☐ No ☐
   b. Heart trouble..... Yes ☐ No ☐
   c. Blood pressure..... Yes ☐ No ☐
   d. Seizures (fits)..... Yes ☐ No ☐

8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator continue to question 9)
   a. Eye irritation..... Yes ☐ No ☐
   b. Skin allergies or rashes..... Yes ☐ No ☐
   c. Anxiety..... Yes ☐ No ☐
   d. General weakness or fatigue..... Yes ☐ No ☐
   e. Any other problem that interferes with your use of a respirator..... Yes ☐ No ☐

9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire?..... Yes ☐ No ☐

Questions 10 to 15 must be answered if you will use either a full-face respirator or a self-contained breathing apparatus (SCBA).

10. Have you ever lost vision in either eye (temporarily or permanently)?..... Yes ☐ No ☐

11. Do you currently have any of the following vision problems?
   a. Wear contact lenses..... Yes ☐ No ☐
   b. Wear glasses..... Yes ☐ No ☐
   c. Color blind..... Yes ☐ No ☐
   d. Any other eye or vision problem..... Yes ☐ No ☐

12. Have you ever had an injury to your ears, including broken ear drum?..... Yes ☐ No ☐

13. Do you currently have any of the following hearing problems?
   a. Difficulty hearing..... Yes ☐ No ☐
   b. Wear a hearing aid..... Yes ☐ No ☐
   c. Any other hearing or ear problem..... Yes ☐ No ☐

14. Have you ever had a back injury?..... Yes ☐ No ☐

15. Do you currently have any of the following musculoskeletal problems?
   a. Weakness in any of your arms, hands, legs, or feet..... Yes ☐ No ☐
   b. Back pain..... Yes ☐ No ☐

c. Difficulty fully moving your arms and legs..... Yes ☐ No ☐
d. Pain or stiffness when you lean forward or backward at the waist..... Yes ☐ No ☐
e. Difficulty fully moving your head up or down..... Yes ☐ No ☐
f. Difficulty fully moving your head side to side..... Yes ☐ No ☐
g. Difficulty bending at your knees..... Yes ☐ No ☐
h. Difficulty squatting to the ground..... Yes ☐ No ☐
i. Climbing a flight of stairs or a ladder carrying more than 25 lbs..... Yes ☐ No ☐
j. Any other muscle or skeletal problem that interferes with using a respirator Yes ☐ No ☐

Part B. Section 1.

Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen?..... Yes ☐ No ☐

   If "yes," do you have feelings of dizziness, shortness of breath, pounding in your chest, or other symptoms when you're working under these conditions: Yes ☐ No ☐

2. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals?..... Yes ☐ No ☐

   If "yes," name the chemicals if you know them: _____

3. Have you ever worked with any of the materials, or under any of the conditions, listed below?
   a. Asbestos..... Yes ☐ No ☐
   b. Silica (**e.g.**, in sandblasting) ..... Yes ☐ No ☐
   c. Tungsten/cobalt (e.g., grinding or welding this material)..... Yes ☐ No ☐
   d. Beryllium..... Yes ☐ No ☐
   e. Aluminum..... Yes ☐ No ☐
   f. Coal (for example, mining)..... Yes ☐ No ☐
   g. Iron..... Yes ☐ No ☐
   h. Tin..... Yes ☐ No ☐
   i. Dusty environments..... Yes ☐ No ☐
   j. Any other hazardous exposures..... Yes ☐ No ☐

   If "yes," describe these exposures: _____

4. List any second jobs or side businesses you have:

   _____

5. List your previous occupations:

   _____

   _____

6. List any current and previous hobbies

_____

7. Were you ever in the military services? ..... Yes ☐ No ☐

   If "yes," were you exposed to biological or chemical agents (either training or combat)? ..... Yes ☐ No ☐

8. Have you ever worked on a HAZMAT team? ..... Yes ☐ No ☐

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications)? ..... Yes ☐ No ☐

   If "yes," name the medications if you know them: _____

Part B. Section 2.

Supplemental information for the health care professional filled out by the employer.

10. Will you be using any of the following items with your respirator(s)?
    a. HEPA Filters ..... Yes ☐ No ☐
    b. Canisters (for example, gas masks) ..... Yes ☐ No ☐
    c. Cartridges ..... Yes ☐ No ☐

11. How often are you expected to use the respirator(s)? (Mark "yes" or "no" for all answers that apply.)
    a. Escape only ..... Yes ☐ No ☐
    b. Emergency rescue only ..... Yes ☐ No ☐
    c. Less than 5 hours **per week** ..... Yes ☐ No ☐
    d. Less than 2 hours **per day** ..... Yes ☐ No ☐
    e. 2 to 4 hours per day ..... Yes ☐ No ☐
    f. Over 4 hours per day ..... Yes ☐ No ☐

12. When the employee uses the respirator(s), is their effort:
    a. Light (less than 200 kcal per hour) ..... Yes ☐ No ☐

    If "yes," how long does this period last during the average shift? hrs. _____ mins. _____

    *Examples of a light work effort are **sitting** while writing, typing, drafting, or performing light assembly work; or **standing** while controlling machines.*

    b. Moderate (200 to 250 kcal per hour) ..... Yes ☐ No ☐

    If "yes," how long does this period last during the average shift? hrs. _____ mins. _____

    *Examples of moderate work effort are **sitting** while nailing or filing; **driving** a truck or bus; **standing** while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; **walking** on a level surface about 2 mph or down a 5 degree grade about 3 mph; or **pushing** a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.*

    c. Heavy (above 350 kcal per hour) ..... Yes ☐ No ☐

    If "yes," how long does this period last during the average shift? hrs. _____ mins. _____

*Examples of heavy work are **lifting** a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; **shoveling; standing** while bricklaying or chipping castings; **walking** up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).*

13. Will the employee be wearing protective clothing and/or equipment (other than the respirator) when using their respirator?..... Yes ☐ No ☐

    If "yes," describe this protective clothing and/or equipment: _____

14. Will they be working in hot conditions (temperature more than 77 deg. F)?..... Yes ☐ No ☐

15. Will you be working under humid conditions?..... Yes ☐ No ☐

16. Describe the work they will be doing while using their respirator(s):

    _____

17. Describe any special or hazardous conditions they might encounter when using respirator(s) (for example, confined spaces, life-threatening gases):

    _____

18. Provide the following information, if you know it, for each toxic substance that they will be exposed to when using their respirator(s):

    Name of the first toxic substance: _____

    Estimated maximum exposure level per shift: _____

    Duration of exposure per shift: _____

    Name of the second toxic substance: _____

    Estimated maximum exposure level per shift: _____

    Duration of exposure per shift: _____

    Name of the third toxic substance: _____

    Estimated maximum exposure level per shift: _____

    Duration of exposure per shift: _____

    Name of any other toxic substance that they will be exposed to while using a respirator:

    _____

19. Describe any special responsibilities they will have while using their respirator(s) that may affect the safety and well-being of others (for example, rescue, security):

    _____

rabbittransit: WSP-08

EMPLOYEE PROFICIENCY: SERVICING RIM WHEELS

Servicing Single Piece Rim Wheels

Name: _____ Date: _____

Required Task	**Satisfactory (✓)**
Demounting tires, including deflation	
Inspecting and identifying rim wheel components	
Installing, handling and removing rim wheels	
Inflating tires when single piece rim wheels are mounted on a vehicle	
Mounting tires, including inflating with a restraining device or other safeguard	
Use of restraining device, barrier and other equipment	
Understanding trajectory	
Inspecting the rim wheel following inflation	

Comments

_____

_____

_____

The following comments have been reviewed with the employee _____ (Employee Initials)

Employee Signature _____

Trainer Signature _____

APPENDIX A
Job Hazard Assessment

Worksite Assessed All rabbittransit locations

Assessment Date May 11, 2026

Person(s) responsible for conducting assessment: Safety Department & Maintenance Department

Scope: This analysis applies to any employee performing the listed job or tasks.

Definition
Job Hazard is any duty, tool, machine, material or supply encountered by an employee during the performance of their job duties, which could cause harm or injury. The following hazards have been identified after a detailed review of regular tasks performed by employees in the various work categories.

General PPE Requirements

- High-visibility vests or maintenance uniforms are mandatory any time employees are in the shop, yard or bus movement areas.
- Slips and Falls – All employees are required to wear non-slip sole footwear

Job Hazard Assessments

Job or Task Steps: Equipment **Operation, Hand & Power Tool Use**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals, burns	Safety glasses, face shield when required
Foot Injury	Impact/compression, electrical, puncture, chemicals, burns	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact, burns	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires; (no loose gloves near rotating parts)
Body Injury	Chemicals, cuts/abrasions, burns	Full length pants, work shirt (no sleeveless)
Noise Exposure	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Preventative **Maintenance, Vehicle Servicing & Inspections**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals	Safety glasses, face shield when required
Foot Injury	Impact/compression, electrical, puncture, chemicals	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires
Body Injury	Chemicals, cuts/abrasions	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Fall from height	Working on bus roof	Fall-restraint harness
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Equipment **Repair, Installation & Fabrication**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals, burns, light radiation	Safety glasses, face shield when required; welding helmet, tinted goggles when required
Foot Injury	Impact/compression, electrical, puncture, chemicals, burns	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact, burns	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires
Body Injury	Chemicals, cuts/abrasions, burns	Full length pants, work shirt (no sleeveless), flame-retardant clothing when required
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust, fumes	N95 or higher when needed; local exhaust, ventilation
Fall from height	Working on bus roof	Fall-restraint harness
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Vehicle **Painting**

Hazard	**Hazard Assessment**	**Personal Protective Equipment**
Eye and Face Injury	Flying debris, chemicals	Safety glasses, face shield when required
Foot Injury	Impact/compression, puncture	Work boot, steel toed boot
Hand Injury	Chemicals	Latex, nitrile, or rubber gloves as task requires
Body Injury	Chemicals	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Chemicals	Respiratory protection required for painting; local exhaust, ventilation
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Welding **and Torch Cutting**

Hazard	**Hazard Assessment**	**Personal Protective Equipment**
Eye and Face Injury	Flying debris, burns, light radiation	Welding helmet, tinted goggles when required
Foot Injury	Impact/compression, electrical, puncture, burns	Work boot, steel toed boot
Hand Injury	Puncture, cut/abrasion, electrical, impact, burns	Leather gloves as task requires
Body Injury	Cuts/abrasions, burns	Full length pants, work shirt (no sleeveless), flame-retardant clothing, jacket or sleeves
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust, fumes	N95 or higher when needed; local exhaust, ventilation
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Bench **Grinder**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, burns	Safety glasses, face shield when required
Foot Injury	Impact/compression, puncture, burns	Work boot, steel toed boot
Hand Injury	Puncture, cut/abrasion, electrical, impact, burns	Cut resistant gloves as task requires (no loose gloves near rotating parts)
Body Injury	Cuts/abrasions, burns	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Vehicle **Fueling**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Chemicals	Safety glasses
Foot Injury	Impact/compression, puncture	Work boot, steel toed boot
Hand Injury	Chemicals	Latex, nitrile, or rubber gloves
Body Injury	Chemicals	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Vehicle **Washing (Manual)**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals	Safety glasses
Foot Injury	Impact/compression, puncture	Work boot, steel toed boot
Hand Injury	Chemicals	Latex, nitrile, rubber gloves as task requires
Body Injury	Chemicals	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

Job or Task Steps: Shop**/Yard Clean up (Facility Maintenance)**

Hazard	Hazard Assessment	Personal Protective Equipment
Eye and Face Injury	Flying debris, chemicals, burns	Safety glasses, face shield when required
Foot Injury	Impact/compression, electrical, puncture, chemicals, burns	Work boot, steel toed boot
Hand Injury	Chemicals, puncture, cut/abrasion, electrical, impact, burns	Leather, latex, nitrile, rubber, or cut resistant gloves as task requires
Body Injury	Chemicals, cuts/abrasions, burns	Full length pants, work shirt (no sleeveless)
Noise	Noise exposure above 85 dBA	Ear plugs, earmuffs
Respiratory Hazard	Dust, fumes	N95 or higher when needed
Struck by Hazard	Moving vehicles in yard or shop	High-visibility uniform or vest

rabbittransit: WSP-07

POWERED INDUSTRIAL TRUCK: FORKLIFT PRE-USE INSPECTION

Location _____ Forklift # _____

	✓ – Satisfactory N – Unsatisfactory	Date / /	Date / /	Date / /	Date / /	Date / /	Date / /	Date / /
Visual Inspection – Engine Off	Forks/attachment							
	Carriage & load backrest							
	Mast assembly							
	Lift chains/pulleys							
	Hydraulic cylinders & hoses							
	Wheels & tires							
	Overhead guard							
	Engine oil level							
	Engine coolant level							
	Battery condition							
	Fuel system							
	Lights							
	Seat and seatbelt							
	Data plate legible							
Engine Running	Warning indicators/gauges							
	Audible device/horn							
	Hydraulic functions							
	Drive and brakes							
	Steering							
	Operator initials							

Comments

*Check each of the items prior to use or before the start of each shift. If the forklift is found to be unsafe, the condition must be reported immediately to your supervisor. Do not operate a faulty truck.

SPECIFIC ENERGY CONTROL PROCEDURES: BUSES AND VANS

Lockout Tagout procedures for bus and van maintenance

1. Bus or van shutdown/isolation of hazardous energy
    a. Shift the transmission to park or neutral, set the parking brake and chock wheels.
    b. Turn ignition off and remove key (if equipped) from the bus or van by the authorized employee.
    c. Key remains in control of authorized personnel performing service (key in pocket).
    d. Turn master battery switch off (if equipped).
    e. Turn engine/run switch in rear junction box off (if equipped).
    f. If vehicle is equipped with air brakes, depressurize air system and cage spring brakes if lifting or working under vehicle (if applicable).

2. Application of lockout/tagout devices
    a. A tagout wheel cover/laminated placard is placed on the steering wheel/windshield. Secure with red padlock.

3. Release of stored energy
    a. Render all potentially hazardous energy (stored or residual) safe. Relieve air pressure, hydraulic pressure, lower raised components to blocked/cribbed position, relieve suspension, etc.

4. Verification of isolation
    a. Return to the driver's seat, ensure transmission is in neutral/park, and attempt to start the engine with normal controls to confirm it will not start. Return controls to off/neutral.

**Work may now be performed

Universal release from lockout or tagout procedures for bus or van maintenance

Below are the procedures performed by an authorized employee to release the lockout/tagout and reenergize the vehicle for operational use.

1. Replace any guards or critical equipment on the vehicle.
2. Inspect the working area and clear all items and tools from the working area.
3. Ensure that all employees are safely positioned away from the vehicle.
4. Ensure that the controls are set in the neutral position.
5. Remove wheel chocks only after vehicle is confirmed operational and ready to move.
6. The vehicle can then be started.
7. If service is complete, restore it to normal operations.
8. If vehicle needs further repair, de-energize and reapply control measures in bus shutdown/isolation of hazardous energy procedures.
9. When servicing is complete, remove the steering wheel cover/laminated placard.
    a. Only the authorized employee who applied the device, or the Maintenance Manager /Supervisor (after making all reasonable efforts to contact the absent employee), may remove the lockout/tagout device(s).

SPECIFIC ENERGY CONTROL PROCEDURES: AIR COMPRESSOR

Lockout Tagout Procedures for air compressor

1. Inform all affected employees that the air compressor will be shut down and locked out.
2. Shut down air compressor using the manufacturers SOP (press stop/switch/reset button and allow compressor to fully stop).
3. Place main power switch in the off position and place lockout padlock on the power switch.
    a. (If cord-and-plug: unplug and lock plug or keep in your possession.)
4. Slowly open tank drain and bleed valves until pressure = 0 psi (leave open).
5. Verify zero energy:
    a. Try to start compressor (must not start).
    b. Confirm 0 psi on all gauges.
    c. Check all locks/tags in place.

**Work may now be performed

Return to Service by the person who applied their lock

1. Clear tools and personnel and replace guards.
2. Close all drain/bleed valves.
3. Remove valve locks and slowly open isolation valves.
4. Remove electrical lockout padlock.
5. Notify employees compressor is back in service.
6. Test start compressor.
7. If service is complete, restore it to normal operations.
8. If further repair is needed, de-energize and reapply control measures.

General lockout/tagout procedures for machine/equipment maintenance

1. Equipment shutdown/isolation of energy
    a. Shutdown the system by using its operating controls (standard operation procedures)
    b. Operate all energy isolating devices: this includes secondary power supplies

2. Application of lockout/tagout devices
    a. All energy isolation devices are to be locked, tagged or both according to machine specific procedures
    b. Only standardized lockout/tagout devices are to be used

3. Release of stored energy
    a. Guard against energy left in the equipment after it has been isolated from its energy source (e.g., bleed, blank, block, brace, etc.)

4. Verification of isolation
    a. Prior to starting any work on machines or equipment that has been locked out or tagged out, the authorized employee will verify that isolation and de-energization have been accomplished

Universal release from lockout/tagout procedures for machine/equipment maintenance

Listed below are the procedures performed by an authorized employee to release the lockout/tagout and reenergize the machine or equipment for operational use.

1. Replace any guards or critical equipment on the machine
2. Inspect the working area and clear all items and tools from the working area
3. Ensure that all employees are safely positioned away from the machine
4. Ensure that all parts of the machine are lubricated and set up for proper operations
5. Ensure that the controls are set in the neutral position
6. Remove all lockout/tagout devices
    a. Only the authorized employee (or in their absence a Supervisor or Manager can remove the device) who applied the lockout/tagout device is allowed to remove that same lockout/tagout device
7. The equipment can then be energized

*Please refer to the machine-specific lockout/tagout procedures outlined in the manufacturer's manual or the written machine-specific LOTO procedures outlined in this program.

pennsylvania
DEPARTMENT OF LABOR & INDUSTRY
BUREAU OF WORKERS' COMPENSATION

EMPLOYEE WORKPLACE NOTICE PUBLIC SECTOR

Pennsylvania Worker and Community Right To Know Act

The Pennsylvania Worker and Community Right to Know Act requires that information about hazardous substances in the workplace and in the environment is available to public sector employees and employees of private sector workplaces not covered by the Federal Occupational Safety and Health Administration (OSHA) Hazard Communication Standard and to all persons living or working in the state. Employee rights listed below are further defined in the Worker and Community Right to Know Act (P.L. 734, No. 159) and Regulations. For additional information, contact the Department of Labor & Industry, Bureau of Workers' Compensation, Health & Safety Division, 1171 S. Cameron Street, Room 324, Harrisburg, Pennsylvania 17104-2501; Phone: 717-772-1635; Fax: 717-783-6365; E-mail: RA-LI-BWC-SAFETY@pa.gov.

Employee Workplace Notice:

Public sector employers (including state and local government agencies and public schools and public universities) and private sector employers not covered by the OSHA Hazard Communication Standard must post this notice informing employees of their rights under the law. This notice must be posted prominently in the workplace at a location where employee notices are normally posted.

Training:

Public sector employers and private sector employers not covered by the OSHA Hazard Communication Standard must provide an annual education and training program to employees exposed to hazardous substances. The training program may be presented either in written form or in training sessions.

Hazardous Substance Survey Form:

The Hazardous Substance Survey Form (HSSF) provides an inventory of the hazardous substances found in the workplace during the prior calendar year. All employers must complete a workplace HSSF annually. Public sector employers and private sector employers not covered by OSHA must post the HSSF prominently in the workplace and must provide a copy to any employee upon request.

Work Area List:

The Work Area List names the hazardous substances used or produced in a specific work area in the workplace. Public sector employers and private sector employers not covered by the OSHA Hazard Communication Standard must update a Work Area List at least annually, must provide a copy to any employee of the work area upon request, and must offer a copy to any employee newly assigned to that work area.

Material Safety Data Sheet/Safety Data Sheet:

The Material Safety Data Sheet (MSDS)/Safety Data Sheet (SDS) provides detailed information about a hazardous substance. In public sector workplaces and private sector workplaces not covered by the OSHA Hazard Communication Standard, an MSDS/SDS must be accessible in the work area where the hazardous substance it describes is used. MSDSs/SDS must be readily available to employees without the intervention or permission of management or supervisors, and any employee may obtain and examine an MSDS/SDS for any hazardous substance in the workplace. If an employee's request to obtain a copy of an MSDS/SDS is made to the employer in writing and, after five working days from the date the request is made, the employer fails to furnish the employee with an MSDS/SDS in the employer's possession or fails to provide the employee with proof of the employer's effort to obtain the requested MSDS/SDS from the manufacturer, importer, supplier or distributor and from the Department of Labor & Industry, the requesting employee may refuse to work with the substance.

Environmental Hazard Survey Form:

The Environmental Hazard Survey Form (EHSF) provides information about any environmental hazards emitted, discharged or disposed of from the workplace. All employers are required to complete an EHSF when and if requested to do so by the Department of Labor & Industry. If an EHSF has been completed by a public sector employer or a private sector employer not covered by the OSHA Hazard Communication Standard, a copy must be provided to any employee upon request.

Labeling:

All containers and ports of pipelines of hazardous and non-hazardous substances in public sector workplaces and private sector workplaces not covered by the OSHA Hazard Communication Standard must be properly labeled. Employers must ensure that each label, sign, placard or other operating instruction is prominently affixed and displayed on the container or port of a pipeline system so that employees can easily identify the contents.

Health and Exposure Records:

Public sector employers and private sector employers not covered by the OSHA Hazard Communication Standard must maintain and allow employee access to records of employee chemical exposure to the extent required by OSHA (under 29 CFR 1910.1200) or by the Mine Safety Health Administration (under 30 CFR 70.210 and 71.210).

Non-discrimination:

If a public sector employee or an employee of a private sector workplace not covered by the OSHA Hazard Communication Standard believes that he or she has been discharged, disciplined or discriminated against by an employer for exercising his or her rights granted under the Pennsylvania Worker and Community Right to Know Act, that employee has 180 days from the date of the alleged violation to file a written complaint with the Department of Labor & Industry, Bureau of Workers' Compensation, Health & Safety Division.

Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program

APPENDIX B
FACILITY QUICK REFERENCE TABLE

Facility	Sprinkler System	CNG	Designated Meeting Area/Muster Point
Adams County	None	Yes	Front southwest corner of parking lot
Cumberland County	None	No	Front northeast corner parking lot
Franklin County	None	No	Front of parking lot near Franklin Farm Lane
Gettysburg Transfer Center	None	No	Rear southeast corner of Property
Harrisburg	Partial	No	East of property at Sunshine Park BB Court
Harrisburg Transfer Center	None	No	Blackberry St. East of 2nd Street
Northumberland	None	No	West corner of parking lot
Perry County	None	No	West front corner of property
Union Snyder	None	No	Rear corner of parking lot near bus shelter
York	Full	Yes	Front corner of employee parking lot
York Transfer Center	None	No	Northwest corner by the Rail Trail

Shelter-in-Place Locations for Severe Weather

Choose areas that are:

- On the lowest level of the building
- In the center of the building – away from exterior walls, windows, skylights, and glass doors.
- Inside interior room with no windows
- Away from hazards

APPENDIX B
QUALITATIVE FIT TESTING PROTOCOL

General Requirements

1. Provide a sufficient number of respirator models and sizes for the employees to choose from to ensure a correct fit.
2. Ensure the employee does not have any hair growth between the skin and the face-piece.
3. Demonstrate to the employee donning and adjustment of the respirator.
4. The employee will then select a respirator that if fitted and used properly will provide adequate protection.
5. The employee will then perform a seal check with the respirator.

Test Exercises

Each test exercise will be performed for one minute. The respirator cannot be adjusted once the fit test exercises begin. If the respirator becomes unacceptable another respirator must be tried.

1. Normal Breathing
    a. In normal standing position, without talking, the subject should breathe normally.

2. Deep Breathing
    a. In a normal standing position, the subject should breathe slowly and deeply, taking caution so as not to hyperventilate.

3. Turning Head Side to Side
    a. Standing in place, the subject will slowly turn his/her head side to side. The head should be held at each extreme momentarily so the subject can inhale at each side.

4. Moving Head Up and Down
    a. Standing in place, the subject should slowly move his/her head up and down. The subject will be instructed to inhale in the up position.

5. Talking
    a. The subject should talk out loud slowly and loud enough so as to heard clearly by the test conductor. The subject should read the Rainbow Passage.

Rainbow Passage: When the sunlight strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many different beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond reach, his friends say he is looking for the pot of gold at the end of the rainbow.

6. Bending Over
    a. The test subject should bend at the waist as if they were to touch their toes. Jogging in place may be substituted for cases that do not permit bending over at the waist.

7. Normal Breathing
    a. Same as exercise 1.

Qualitative Fit Test Protocol: Saccharin Solution Aerosol Protocol

The entire screening and testing procedure will be explained to the test subject prior to the conduct of the screening test.

<u>Saccharin Solution Aerosol Fit Test Procedure</u>

1. The test subject may not eat, drink (except water), smoke, or chew gum for 15 minutes before test.

2. Before fit testing the subject, a saccharin taste screen should be performed without wearing a respirator to determine if the individual can detect the taste of saccharin.
    (a) With the subject breathing normally and wearing the testing enclosure, 10 squeezes of the saccharin should be sprayed into the apparatus. If the subject reports a sweet taste the screening is completed.
    (b) If the subject does not taste the saccharin, 10 more squeezes should be dispensed and the subjected asked if they can taste the saccharin. If a negative response is given, this process should be repeated until a total of the 30 squeezes are administered.
    (c) If the saccharin is not tasted after 30 squeezes, the test subject may not perform the saccharin fit test.

3. After the taste test is successfully administered, the test subject will don the enclosure while wearing the selected respirator. The respirator should be properly adjusted and equipped with a particulate filter(s).

4. An initial concentration of saccharin fit test solution is then sprayed into the enclosure using the same number of squeezes (either 10, 20 or 30 squeezes) based on the number of squeezes required to elicit a taste response as noted during the screening test. A minimum of 10 squeezes is required.

5. Then the test subject will be instructed to perform the test exercises listed above.

6. Every 30 seconds the aerosol concentration should be replenished using one half the original number of squeezes used initially (e.g., 5, 10 or 15).

7. The test subject should indicate to the test conductor if at any time during the fit test the taste of saccharin is detected. If the test subject does not report tasting the saccharin, the test is passed.

8. If the taste of saccharin is detected, the fit is deemed unsatisfactory and the test is failed. A different respirator must be tried and the entire test procedure is repeated.

rabbittransit: WSP-06

QUALITATIVE FIT TESTING FORM

Employee Name: _____ Date: _____

Signature: _____

	Model 1	Model 2
Respirator Type (Model #) (Can test up to 2 on this form)		
Compatible with eye glasses	☐ Yes ☐ No	☐ Yes ☐ No
Pressure/Seal Fit Check	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Pressure/Seal check type (Circle one)	Positive Negative	Positive Negative
Head Stationary Normal Breathing (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Stationary Deep Breathing (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Turning Side to Side (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Moving Up and Down (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Talking (Reciting the Rainbow Passage or Counting Backwards)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Bending Over (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Head Stationary Normal Breathing (60 Seconds)	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Respiratory Fit Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Based on the information provided on this form, I certify that the employee named on this form can wear the respiratory protective equipment listed above.

Test Administrator: _____ Date: _____

Signature: _____

rabbittransit: WSP-08A

SAFE OPERATING PROCEDURES: LIGHT DUTY TIRE SERVICING

Light Duty Tire Servicing Safe Practices
(Applies to all passenger cars, pickups, SUVs, vans, and any tire marked “P” or “LT”)

All employees who change or repair these tires must follow these minimum safe practices:

1. Completely deflate the tire by removing the valve core before breaking the bead.
2. Use a clip-on chuck with enough hose length (or remote inflation) so the employee is never in the trajectory.
3. Never inflate a tire against a flat wall, workbench, or vehicle if any part of your body is in the trajectory.
4. Never exceed the maximum pressure molded into the tire sidewall.
5. Never use ether/starting fluid or any flammable substance to seat beads.
6. Inspect rims for cracks, bends, or rust-through before mounting. Remove damaged rims from service.
7. Always use a tire cage or inflation shield when inflating off the vehicle if available.

Tire Changing Machine (Rim Mounting Machine) Use

All employees must follow these additional rules when using any Coats, Hunter, or other make/model tire changing machine:

1. The machine must be bolted to the floor or otherwise secured per manufacturer’s instructions.
2. Daily pre-use inspection is required: check turntable clamps, bead breaker, mount/demount head, air lines, and foot pedals for damage or wear.
3. Never place any body part under the mount/demount head or arm while the machine is operating.
4. Always use the correct size clamp adapters for 19.5", 22.5", or 24.5" wheels.
5. Lubricate tire beads and rim liberally with approved tire lube before mounting.
6. When using the “bead seating” or “blast” function, the wheel must remain on the machine turntable, and the operator must stand to the side — never in front of the tire.
7. Never exceed 40 psi while the tire is still on the machine (even if more pressure is needed later to fully seat beads — finish seating inside the safety cage).

8. After the tire is removed from the machine, all final inflation must be done inside the safety cage or on the vehicle with lug nuts fully torqued.

9. Only trained and authorized technicians may operate the tire changing machine.

Wheel Balancer Operation

All employees must follow these rules when using any wheel balancer (Hunter, Coats, etc.):

1. Perform a daily pre-use inspection: check wing nut, cone, shaft, hood latch, and mounting cup for cracks or damage.

2. Always clean the back of the wheel and remove all old wheel weights and debris before mounting.

3. Select the correct cone or adapter and ensure the wheel is centered and seated firmly against the back flange.

4. Tighten the wing nut by hand plus ¼-turn with the provided tool only — never use cheater pipes or impact guns.

5. Close and latch the protective hood before starting the spin cycle (hood must remain closed during the entire cycle).

6. Never walk away from a spinning wheel or leave the balancer unattended while spinning.

7. Never place hands or any body part inside the hood while the wheel is spinning or coasting down.

8. Maximum spin speed for truck/bus wheels is 100 mph (most machines default to this for 22.5"/24.5"). Do not override unless specifically instructed by the manufacturer.

9. After balancing, re-check wing-nut tightness on the vehicle with a calibrated torque wrench (never trust the balancer wing nut alone).

10. Only trained and authorized technicians may operate the wheel balancer.

rabbittransit: WSP-08A

EMPLOYEE PROFICIENCY: TIRE CHANGING MACHINE

Tire Changing Machine Proficiency

Coats, Hunter or Equivalent Rim-Clamp Tire Changer

Name: _____ Date: _____

Required Task	Satisfactory (✓)
1. Performed pre-use inspection of the machine (bolted to floor, air lines, pedals, clamps, bead breaker, mount/mount head)	
2. Correctly selected and installed proper adapters/clamps for a 22.5" or 24.5" wheel	
3. Safely placed wheel on turntable and securely clamped from the inside (rim-clamp style)	
4. Applied approved tire lubricant to both beads and rim mating surfaces	
5. Correctly positioned and used the bead breaker without damaging tire or rim	
6. Safely used the mount/demount head and bar to remove tire without damaging bead or rim	
7. Inspected rim for damage, rust, cracks, or bent areas before re-mounting	
8. Properly mounted new/existing tire on rim using the machine (narrow ledge side first)	
9. Used bead seating/blast function correctly while standing to the side of the tire	
10. Inflated tire on the machine only to the minimum pressure needed to seat beads (≤ 40 psi)	
11. Removed wheel from machine safely after beads were seated	
12. Demonstrated understanding that final inflation must be done in the safety cage or on vehicle	

Comments

_____

_____

The following comments have been reviewed with the employee _____ (Employee Initials)

Employee Signature _____

Trainer Signature _____