



## Competent Person Evaluation Excavation and Trenching

This checklist was developed to assist the employer in determining if the person they have designated as a **Competent Person (CP)** is competent within the description and intent of the **Excavation & Trenching Standard**.

Employee's name	How many years of experience in excavation & trenching operations?	Length of time with employer
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Title and Job duties:

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<b>I. Training and Knowledge</b>	Yes	No
<b>Does the designated CP have training and knowledge in:</b>		
1. Soils classification?	<input type="checkbox"/>	<input type="checkbox"/>
2. Use of protective systems?	<input type="checkbox"/>	<input type="checkbox"/>
3. All applicable requirements including definitions in Part N, <a href="#">Chapter 296-155, WAC Rules by chapter</a>	<input type="checkbox"/>	<input type="checkbox"/>
4. Properly protecting utilities when they're involved.	<input type="checkbox"/>	<input type="checkbox"/>

<b>II. Authority</b>	Yes	No
<b>Does the designated CP have the authority to:</b>		
1. Take prompt corrective measures to eliminate existing and predictable hazards?	<input type="checkbox"/>	<input type="checkbox"/>
2. Stop work and remove employees when hazards are identified until proper systems are in place?	<input type="checkbox"/>	<input type="checkbox"/>

<b>III. Inspections</b>	Yes	No
<b>Does the CP conduct daily inspections:</b>		
1. Of the excavation and adjacent areas?	<input type="checkbox"/>	<input type="checkbox"/>
a. Is there water in the excavation? If yes, is the water removal equipment being used and monitored to ensure safe operation?	<input type="checkbox"/>	<input type="checkbox"/>
b. Was the soil reclassified following any influence of water or any condition that may have changed the initial classification?	<input type="checkbox"/>	<input type="checkbox"/>
2. Of the protective system?		
a. Is damage evident to the structural members of the protective system?	<input type="checkbox"/>	<input type="checkbox"/>
b. Is there evidence of failure of any portion of the protective system? If so, has the system been evaluated for suitability of use?	<input type="checkbox"/>	<input type="checkbox"/>
3. Prior to the start of work and as needed during excavation operations?	<input type="checkbox"/>	<input type="checkbox"/>
4. After every rainstorm or other hazard increasing occurrence?	<input type="checkbox"/>	<input type="checkbox"/>
5. To identify confined spaces in the work environment?	<input type="checkbox"/>	<input type="checkbox"/>

*Continue on reverse*

<b>IV. Soils Classification</b>	<b>Yes</b>	<b>No</b>
<b>Did the CP do the following:</b>		
1. A visual test?	<input type="checkbox"/>	<input type="checkbox"/>
2. A manual test	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes, which manual test(s) were performed?		
b. Name of person who classified the soil if someone other than your designated CP?		
_____		
What qualifies them to perform the soils classification?		
_____		
_____		
_____		
_____		
3. What types of soils were identified?		
_____		
4. Have the soil conditions changed since the classification was made?	<input type="checkbox"/>	<input type="checkbox"/>
5. Based on the soil classification, and the depth and the width of the excavation, has the proper cave-in protective system been selected?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the cave-in protection meet the criteria outlined in Part N, <a href="#">Chapter 296-155, WAC</a> <a href="#">Rules by chapter</a>	<input type="checkbox"/>	<input type="checkbox"/>
<b>What is the soils classification for this site?</b>		

<b>V. Access/Egress</b>	<b>Yes</b>	<b>No</b>
1. If ramps are involved, are they constructed according to Part N, <a href="#">Chapter 296-155, WAC</a> <a href="#">Rules by chapter</a>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is safe access/egress being provided into and out of the protective system?	<input type="checkbox"/>	<input type="checkbox"/>
3. When using a ladder, does it remain within the protection of the system at all times?	<input type="checkbox"/>	<input type="checkbox"/>

<b>VII. Comments</b>	<b>Yes</b>	<b>No</b>
Do you consider the individual to be competent within the requirements of Part N, <a href="#">Chapter 296-155, WAC</a> <a href="#">Rules by chapter</a>	<input type="checkbox"/>	<input type="checkbox"/>
<b>If Not, Why?</b>		

<b>Employer Signature</b>	<b>Date</b>