

## HIGHWAY WORK ZONE DATA COLLECTION INSTRUMENT

Case ID: MI	Respondent
<b>Date of Investigation</b>	

Semployer Information   1. Is the employer the primary contractor or a subcontractor working at the site?   1. Is the employer the primary contractor or a subcontractor working at the site?   1. Is the employer the primary contractor or a subcontractor   1. Is the employer the primary contractor or a subcontractor   1. Is the employer the primary contractor   1. Is the primary
Victim Information  2. What was victim's occupation at time of incident?  2. What was victim's occupation at time of incident?  3. Equipment Operator  4. Truck driver  6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  2. Flagger  6. Was this direct contact maintained for safety  7. Was this driver occupation at time of the incident?  8. Ol. Laborer  6. Was anyone within direct visual or verbal contact with since victim's normal occupation?  9. Unknown  10. Yes  9. Unknown  10. Yes (Go to Q6)  10. Laborer  10. Ves (Go to Q6)  10. Laborer  10. Engineer  10. Engineer  10. Engineer  10. Engineer  10. Engineer  10. Ves (Go to Q6)  10. Ves (Go to Q6)  10. Engineer  10. Engine
2. What was victim's occupation at time of incident?    01. Laborer   02. Flagger   03. Equipment Operator   04. Truck driver   05. Mechanic   06. Foreman/Supervisor   07. Engineer   08. Other (specify)   9. Unknown   9. Unknown   9. Unknown   02. No   03. Other (specify)   9. Unknown (Go to Q6)   05. What was the victim's normal occupation?    1. Laborer   08. Other (specify)   9. Unknown   08. Other (specify)   9. Unknown   09. No   09. Other (specify)   9. Unknown (Go to Q6)   09. No   09. Other (specify)   9. Unknown (Go to Q6)   09. Flagger   09. Engineer   09. Engineer   09. Other (specify)   09. Unknown (Go to Q6)   09. Other (specify)   09. Unknown (Go to Q6)   09. Other (specify)   09. Other (specify)   09. Unknown   09. Other (specify)   09. Unknown   09. Unknown   09. Unknown   09. Unknown   09. Unknown   09. Unknown   09. Unknown (Go to Q8)   09.
incident?    02. Flagger   03. Equipment Operator   04. Truck driver   05. Mechanic   06. Foreman/Supervisor   07. Engineer   08. Other (specify)   9. Unknown   02. No   03. Other (specify)   9. Unknown   04. Tyes   9. Unknown   05. Mechanic   06. Foreman/Supervisor   07. Engineer   08. Other (specify)   07. Engineer   08. Other (specify)   08. Other (specify)   09. Unknown   09. Unknown   09. No   09. Other (specify)   9. Unknown (Go to Q6)   09. No   09. Other (specify)   09. Unknown (Go to Q6)   09. Flagger   07. Engineer   09. Equipment   09. Other (specify)   09. Unknown   09. U
03. Equipment Operator   04. Truck driver   05. Mechanic   06. Foreman/Supervisor   07. Engineer   08. Other (specify)   9. Unknown   01. Yes   9. Unknown   02. No   03. Other (specify)   9. Unknown   04. Yes (Go to Q6)   05. No   03. Other (specify)   9. Unknown (Go to Q6)   05. What was the victim's normal occupation?   01. Laborer   06. Foreman/Supervisor   07. Engineer   08. Other (specify)   9. Unknown (Go to Q6)   09. No   09. Unknown (Go to Q6)   09. No   09. Unknown (Go to Q6)   09. Viction   09. Unknown (Go to Q8)   09. Unk
O4. Truck driver   O5. Mechanic   O6. Foreman/Supervisor   O7. Engineer   O8. Other (specify)   O1. Yes   O2. No   O3. Other (specify)   O1. Yes (Go to Q6)   O2. No   O3. Other (specify)   O1. Yes (Go to Q6)   O2. No   O3. Other (specify)   O1. Laborer   O1. Laborer   O2. Flagger   O7. Engineer   O3. Equipment   O6. Foreman/Supervisor   O6. Truck driver   O7. Engineer   O7. Enginee
05. Mechanic   06. Foreman/Supervisor   07. Engineer   08. Other (specify)   9. Unknown   9. Unknown   9. Unknown   01. Yes   02. No   02. No   03. Other (specify)   9. Unknown (Go to Q6)   02. No   03. Other (specify)   9. Unknown (Go to Q6)   05. What was the victim's normal occupation?   01. Laborer   05. Engineer   07. Engineer   07. Engineer   08. Other (specify)   09. Unknown (Go to Q6)   09. Volume   09. Unknown (Go to Q8)   09. Un
06. Foreman/Supervisor   07. Engineer   08. Other (specify)   9. Unknown   9. Unknown   9. Unknown   01. Yes   02. No   02. No   03. Other (specify)   9. Unknown (Go to Q6)   05. What was the victim's normal occupation?   01. Laborer   02. Flagger   07. Engineer   03. Equipment   04. Truck driver   04. Truck driver   05. Mechanic   06. Was anyone within direct visual or verbal contact with victim at the time of the incident?   01. Yes   02. No (Go to Q8)   03. Other (specify)   04. Truck driver   05. Mechanic   05. Mechanic   06. Was anyone within direct visual or verbal contact with victim at the time of the incident?   07. Was this direct contact maintained for safety purposes?   08. Unknown (Go to Q8)   08. Unknown (Go to Q8)   09.
07. Engineer 08. Other (specify) 9. Unknown  3. Was the victim performing a task that was not a part of their normal work duties/tasks?  4. Was this the victim's normal occupation?  5. What was the victim's normal occupation?  6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  6. Was this direct contact maintained for safety purposes?  10. Yes 10. Yes 10. Yes 10. Yes 10. Ves (Go to Q6) 10. Laborer 10. Laborer 10. Laborer 10. Engineer 10. Foreman/Supervision. 10. Yes 10. Yes 10. Yes 10. Ves 10.
08. Other (specify)   9. Unknown
9. Unknown 3. Was the victim performing a task that was not a part of their normal work duties/tasks? 4. Was this the victim's normal occupation?  9. Unknown  10. Yes 10. Yes 10. Yes 10. Yes 10. Yes 10. Ves (Go to Q6) 10. Ves (Go to Q6) 10. Ves 10. Unknown (Go to Q6)  10. Laborer 10. Laborer 10. Foreman/Supervision. 10. Engineer 10. Engineer 10. Engineer 10. Engineer 10. Mechanic 10. Yes 10. Ves 10. Unknown 10. Unknown 10. Unknown 10. Unknown 10. Ves
3. Was the victim performing a task that was not a part of their normal work duties/tasks?  4. Was this the victim's normal occupation?  5. What was the victim's normal occupation?  6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  6. Was this direct contact maintained for safety purposes?  9. Unknown (Go to Q6)  9. Unknown  10. Yes  10.
part of their normal work duties/tasks?  4. Was this the victim's normal occupation?  O1. Yes (Go to Q6)  O2. No O3. Other (specify) 9. Unknown (Go to Q6)  5. What was the victim's normal occupation?  O1. Laborer O2. Flagger O3. Equipment Operator O4. Truck driver O5. Mechanic  O1. Yes O1. Laborer O8. Other (specify) O9. Unknown O9. Unknown O9. Unknown O1. Yes O1. Yes O2. No (Go to Q8) O1. Yes O2. No
4. Was this the victim's normal occupation?  01. Yes (Go to Q6) 02. No 03. Other (specify) 9. Unknown (Go to Q6)  5. What was the victim's normal occupation?  01. Laborer 02. Flagger 03. Equipment Operator 04. Truck driver 05. Mechanic  06. Was anyone within direct visual or verbal contact with victim at the time of the incident?  07. Was this direct contact maintained for safety purposes?  08. Other (specify) 9. Unknown 09. Unknown 01. Yes 02. No (Go to Q8) 9. Unknown (Go to Q8) 9. Unknown 02. No
O2. No   O3. Other (specify)   9. Unknown (Go to Q6)
03. Other (specify) 9. Unknown (Go to Q6)  5. What was the victim's normal occupation?  01. Laborer 02. Flagger 03. Equipment Operator 04. Truck driver 05. Mechanic  06. Was anyone within direct visual or verbal contact with victim at the time of the incident?  08. Other (specify) Operator 09. Unknown  01. Yes 02. No (Go to Q8) 9. Unknown (Go to Q8)  7. Was this direct contact maintained for safety purposes?  01. Yes 02. No 03. Other (specify) 04. Fruck driver 05. Mechanic 06. Foreman/Supervise 07. Engineer 08. Other (specify) 09. Unknown 09. Unknown
9. Unknown (Go to Q6)  5. What was the victim's normal occupation?  01. Laborer 02. Flagger 03. Equipment Operator 04. Truck driver 05. Mechanic  08. Other (specify) Unknown  09. Unknown (Go to Q6)  07. Engineer 08. Other (specify) Unknown  09. Unknown  09. Unknown  07. Engineer 08. Other (specify) 09. Unknown  09. Unknown  09. Unknown  09. Unknown  09. Unknown  09. Unknown  00. Yes 00. No (Go to Q8) 00. Unknown  00. Ves 00. Unknown  00. Unknown  00. Unknown  00. Unknown  00. Unknown  00. Unknown
5. What was the victim's normal occupation?  01. Laborer 02. Flagger 03. Equipment 04. Truck driver 05. Mechanic  08. Other (specify) 09. Unknown  09. Was anyone within direct visual or verbal contact with victim at the time of the incident?  01. Laborer 02. Flagger 03. Equipment 08. Other (specify) 09. Unknown  09. Unknown  01. Yes 02. No (Go to Q8) 9. Unknown (Go to Q8)  01. Yes 02. No (Go to Q8) 01. Yes 02. No (Go to Q8) 03. Equipment 04. Truck driver 05. Mechanic  06. Foreman/Supervist 07. Engineer 08. Other (specify) 09. Unknown  09. Unknown  00. Ves 00. No (Go to Q8) 00. Ves 00
02. Flagger 03. Equipment 08. Other (specify) Operator 04. Truck driver 05. Mechanic  6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  7. Was this direct contact maintained for safety purposes?  10. Flagger 07. Engineer 08. Other (specify) 9. Unknown 9. Unknown 10. Yes 10. Ves 10
03. Equipment Operator 04. Truck driver 05. Mechanic  6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  7. Was this direct contact maintained for safety purposes?  08. Other (specify) Unknown  9. Unknown  01. Yes 02. No (Go to Q8) 9. Unknown (Go to Q8) 9. Unknown 02. No
Operator 04. Truck driver 05. Mechanic  6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  7. Was this direct contact maintained for safety purposes?  9. Unknown 02. No (Go to Q8) 9. Unknown (Go to Q8) 9. Unknown 02. No
6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  7. Was this direct contact maintained for safety purposes?  9. Unknown  01. Yes  02. No (Go to Q8)  9. Unknown (Go to Q8)  9. Unknown  01. Yes  9. Unknown  02. No
6. Was anyone within direct visual or verbal contact with victim at the time of the incident?  7. Was this direct contact maintained for safety purposes?  9. Unknown (Go to Q8)  9. Unknown (Go to Q8)  9. Unknown  02. No
with victim at the time of the incident?  02. No (Go to Q8)  9. Unknown (Go to Q8)  7. Was this direct contact maintained for safety purposes?  01. Yes 02. No 02. No
7. Was this direct contact maintained for safety purposes? 9. Unknown (Go to Q8) 01. Yes 9. Unknown 02. No
7. Was this direct contact maintained for safety purposes?  01. Yes 9. Unknown 02. No
purposes? 02. No
Park and a second secon
8. How familiar was the victim with the task being 01. Not familiar 03. Very familiar
performed at the time of the incident? 02. Somewhat 9. Unknown
familiar
9. How often did victim do this task? (if variable 01. First time ever? 06. Daily or almost
amounts, ask about the month prior to the 02. Less than once daily
incident) per week 07. Monthly
03. About once per month 08. Other
04. Sporadically
(during a month) 10. Unknown
05. One or more
times per week
diffes per week

11. How long had it been since the task was last	01. < 1 week before incident	
performed by the victim?	02. > 1 week before incident	
	03. 1 month before incident	
	04. 6 months to 1 year before incident	
	05. 1 year before incident	
	06. Other	
	9. Unknown	
10a. Notes:		
Incident Information		
12. The victim's work area at the time of the incident	01. Usual work area	
was: (Circle all that apply)	02. Unfamiliar work area	
was. (Chee an that apply)	03. Limited Access work area	
	04. Restricted work area	
	05. Unauthorized work area	
	06. Authorized work area	
	9. Unknown	
13. The victim's work area at the time of the incident	01. Dry 05. Damaged or worn	
was: (Circle all that apply)	02. Wet 06. Other (Specify)	
	03. Frost/ice/snow	
	covered 07. Other (specify)	
	04. Cluttered	
14 A.C. 14 - C 1	9. Unknown	
14. Activity of coworker:	01. No coworker	
	02. Working with victim	
	03. Working on separate task 04. Other (specify)	
	9. Unknown	
15. Was the incident a result of:	01. Motorist intrusion into work zone	
13. Was the including a result of.	02. Occurred entirely within the work zone (no	
	intrusion)	
	03. Other (specify)	
	9. Unknown	
16. When the incident occurred, victim was a:	01. Worker on foot	
	02. Vehicle Driver (auto, light truck, etc)	
	03. Equipment Operator	
	04. Vehicle Passenger	
	05. Other (specify)	
	9. Unknown	
17. Identify the type of vehicle incident:	01. Worker struck by vehicle	
	02. Worker caught between vehicle and stationary	
	object	
	03. Worker caught under vehicle	
	04. Worker caught between 2 vehicles, both	
	moving	
	05. Worker caught between 2 vehicles, 1 moving,	
	1 stationary	
	06. Other (specify)	
19. At what point during the construction and in the	9. Unknown	
18. At what point during the construction project did the incident occur?	01. Before work began 05. Between 6 and 12 02. First week of work months of work	
the incident occur?	02. First week of work 03. First month of 06. Over 1 year of	
	work work	
	04. Between 1 and 6 07. First day of work	
	months of work 9. Unknown	

19. Complete the chart below for each vehicle involved in the incident.			
A. Car/Pickup (not associated with construction ac		J. Backhoe/Excavator	
B. Bus		K. Crane	
C. Tractor-trailer		L. Dump truck	
D. Front end loader		M. Forklift	
E. Concrete mixer		N. Scraper	
F. Paving machine		O. Trencher	
G. Grader		Q. Skid-Steer	
I. Bulldozer		R. Other (specify)	
		(-p)/	
	Vehicle # 1	Vehicle # 2	Vehicle # 3
18a. Identify if the vehicle involved in the	01. Traffic	03. Traffic	05. Traffic
incident was a traffic vehicle or construction	02. Construction	04. Construction	06. Construction
vehicle/equipment	9a. Unknown	9b. Unknown	9c. Unknown
18b. Identify each vehicle involved in the			
incident using the above list			
18c. Was vehicle/equipment being	01. Yes	04. Yes	07. Yes
	02. No	04. Tes 05. No	08. No
ridden/operated properly? (e.g. a passenger on a	03. NA	05. NO 06. NA	99. NA
piece of equipment not made for a passenger)	09. Unknown	09. Unknown	09. Unknown
18d. Date of last inspection	01//_	04//	07//_
18d. Date of last hispection			08.NA
	02.NA	05.NA	
10. 7.	03.Unknown	06.Unknown	09.Unknown
18e. Passed or failed inspection	01. Passed	03. Passed	05. Passed
	02. Failed	04. Failed	06. Failed
Circle all safety failures	01 70 1	1 05 P 1	T 10 P 1
18f. Seatbelts	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	11. Not applicable	17. Not applicable
10. 7. 1	06. No failure	12. No failure	18. No failure
18g. Brakes	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	11. Not applicable	17. Not applicable
	06. No failure	12. No failure	18. No failure
18h. Emergency parking brakes	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	11. Not applicable	17. Not applicable
10' D. 1	06. No failure	12. No failure	18. No failure
18i. Back-up alarm	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	11. Not applicable	17. Not applicable
10: Hom	06. No failure	12. No failure	18. No failure
18j. Horn	01. Broken 02. Removed	07. Broken 08. Removed	13. Broken 14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	11. Not applicable	17. Not applicable
101 0'1	06. No failure	12. No failure	18. No failure
18k. Single external rear mirror	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used

	05. Not applicable	11. Not applicable	17. Not applicable
	06. No failure	12. No failure	18. No failure
181. Dual external rear mirrors	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	<ol><li>Not applicable</li></ol>	<ol><li>Not applicable</li></ol>
	06. No failure	12. No failure	18. No failure
18m. Reverse lights	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	<ol><li>Not available</li></ol>
	04. Not Used	<ol><li>Not Used</li></ol>	<ol><li>Not Used</li></ol>
	05. Not applicable	<ol><li>Not applicable</li></ol>	<ol><li>Not applicable</li></ol>
	06. No failure	12. No failure	18. No failure
18n. Rollover protective structures (ROPS)	01. Broken	07. Broken	13. Broken
	02. Removed	08. Removed	<ol><li>Removed</li></ol>
	03. Not available	09. Not available	<ol><li>Not available</li></ol>
	04. Not Used	10. Not Used	<ol><li>Not Used</li></ol>
	05. Not applicable	<ol><li>Not applicable</li></ol>	<ol><li>Not applicable</li></ol>
	06. No failure	12. No failure	18. No failure
18o. Other (specify)	01. Broken	07. Broken	13. Broken
•	02. Removed	08. Removed	14. Removed
	03. Not available	09. Not available	15. Not available
	04. Not Used	10. Not Used	16. Not Used
	05. Not applicable	<ol><li>Not applicable</li></ol>	17. Not applicable
	06. No failure	12. No failure	18. No failure

20. Which construction activity was the victim doing	01. Site clearing/Excav	ating
at the time of the incident?	02. Milling	
	03. Rough grading	
	04. Fine grading	
	05. Paving	
	06. Installing signs, ligh	hts, guardrails
	07. Painting stripes	
	08. Maintenance activit	ties (mowing, repainting,
	litter pickup, etc)	
	09. Other (Specify)	
	99. Unknown	
21. What was the type of work zone?	01. Lane closure	
	02. Lane shift/crossove	r
	03. Work on shoulder of	or median
	04. Intermittent or mov	ring work
	05. Other (Specify)	
	99. Unknown	
22. Was there an established traffic control plan?	01. External Only	04. Neither
	02. Internal Only	05. NA
	03. Both	9. Unknown
20a. Notes on traffic control plan		
	1	·
23. Identify the type(s) of traffic control device(s)	01. None (Go to Q24)	06. Vertical panels
being used at the location of the incident. (Circle	02. Flagger	07. Pilot car
all that apply)	03. Detour signs	08. Advance warning
	04. Cones, tubes or	signs
	drums	09. Other (specify)
	05. Barricades	
		99. Unknown

24. Were any of the traffic control devices not	01. Yes	9. Unknown (Go to
working properly?	02. No (Go to Q24)	Q24)
23a. Notes on malfunctioning traffic control devices:	02. NO (GO tO Q24)	1 (24)
23a. Notes on manufictioning traffic condoi devices.		
25. In what section of the construction work zone did	01. Advance warning a	area
the incident occur?	02. Transition area	
the meldent occur.	03. Buffer area	
	04. Activity area	
	05. Termination area	
	06. Not in work zone	
	07. Other (specify)	
	9. Unknown	
26. What was the posted speed limit OUTSIDE the	01. <20 mph	05. >60 mph
work zone?	02. 20-40 mph	06. No posted speed
Work Bone !	03. 40-50 mph	07. NA
	04. 50-60 mph	9. Unknown
27. What was the posted speed limit INSIDE the	01. <20 mph	05. >60 mph
work zone?	02. 20-40 mph	06. No posted speed
Work Zone.	03. 40-50 mph	07. NA
	04. 50-60 mph	9. Unknown
28. Identify the types of lighting and marking	01. Retro-reflective she	
devices used (if applicable) at the time of the		
incident:	<ul><li>02. Temporary raised pavement markers</li><li>03. Reflective paint</li></ul>	
	04. Battery operated lights	
	05. Roadside delinators	
	06. Electric lights	
	07. Advanced warning	arrow panels
	08. Lanterns	, F
	09. Other (specify)	
	10. NA	
	99. Unknown	
29. On what type of roadway did the incident occur?	01. Rural 2-lane	
<b>71</b>	02. Urban artery	
	03. Other urban streets	•
	04. Rural or Urban mu	lti-divided or undivided
	highway	
	05. Intersection	
	06. Freeway	
	07. Country road	
	08. Other (specify)	
	9. Unknown	
30. Type of roadway Junction:	01. Non-intersection	
-	02. Intersection	
	03. Driveway/Alley	
	04. Overpass	
	05. Entrance/Exit ramp	)
	06. Railroad crossing	
	07. Worker crosswalk	
	08. Bridge	
	09. Other (specify)	
	99. Unknown	

	,	1
31. Total number of open travel lanes entering the	01. One lane	04. Other (specify)
construction area?	02. Two lanes	9. Unknown
	03. Three or more lanes	9. Chkhowh
32. Location of incident		05 Portring Land
32. Location of incident	01. Roadway 02. Shoulder	05. Parking Lane
	03. Median	06. Other (specify)
	04. Roadside	9. Unknown
33. Describe the traffic flow conditions at the time of	01. Not physically divide	
incident	02. Divided highway, me	
merdent		edian surp – without
	traffic barriers  03. Divided highway – with traffic barriers	
	04. One-way traffic	Thir traine barriers
	05. Other (specify)	
	9. Unknown	
34. Describe the roadway alignment at the work zone	01. Straight	03. Other (specify)
31. Beserved the roadway angimient at the work zone	02. Curved	
	02. 04. 04	9. Unknown
35. Describe the normal roadway profile	01. Level	04. Sagging
	02. Grade	05. Other (specify)
	03. Hill crest	
		9. Unknown
36. Describe the normal roadway surface	01. Concrete	05. Dirt
	02. Black top – tar	06. Other (specify)
	03. Brick or block	9. Unknown
	on sing, sinver or	
	stone	
37. Describe the weather conditions at the time of	01. Clear	
the incident?	02. Cloudy/Rain 03. Sleet/Snow	
	04. Snow	
	05. Rain/Fog	
	06. Blowing sand, dirt or snow	
	07. Smog/Smoke	
	08. Other (specify)	
	9. Unknown	
38. Describe the roadway surface conditions at time	01. Dry	07. Slushy
and location of the incident	02. Wet	08. Debris
11-10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	03. Water	09. Sand, Dirt, Oil
	(standing /moving)	10. Other (specify)
	04. Icy	
	05. Snowy	99. Unknown
	06. Muddy	
39. Describe the lighting conditions at the time of the	01. Daylight	
incident	02. Dark lighted roadway	y
	03. Dark roadway not lig	thted
	04. Dawn	
	05. Dust	
	06. Other (specify)	
	9. Unknown	
38. Other Incident Details:		
1		

Company Safety Program		
40. Were safety issues discussed with the victim	01. Yes	03. NA
prior to starting the day's work?	01. Tes 02. No	9. Unknown
41. Were safety issues discussed during the planning	01. Yes	03. NA
and design phases of the project?	01. Tes 02. No	9. Unknown
40a. NOTES	02. 110	7. UIKIIOWII
40a. NOTES		
Personal Protective Equipment		
42. What types of PPE does the company require	01. None	
employees to use while performing the task:	02. Hard Hat	
(Circle all that apply)	03. Retro-reflective vest	
	04. Safety glasses/goggles	
	05. Gloves	
	06. Hearing protection	
	07. Foot protection	
	08. Respirator	
	09. Other (specify)	
	99. Unknown	
43. What types of PPE was victim using? (Circle all	01. None (Go to Q47)	
that apply)	02. Hard Hat	
	03. Retro-reflective vest	
	04. Safety glasses/goggles	
	05. Gloves	
	06. Hearing protection	
	07. Foot protection	
	08. Respirator	
	09. Other (specify)	
	9. Unknown	
44. Was PPE used in accordance with its design and	01. Yes	03. NA
function?	02. No	9. Unknown
45. Was the type of PPE used sufficient to protect	01. Yes	03. NA
him/her?	02. No	9. Unknown
46. Did the PPE malfunction?	01. Yes	
	02. No (Go to Q47)	
	9. Unknown (Go to Q47)	
47. If yes, briefly describe PPE malfunction:		
40 Did amalama maiatain and in an a DDD	01 V	0 11-1
48. Did employer maintain and inspect PPE on a	01. Yes	9. Unknown
regular basis?	02. No (END)	(END)
49. Date of last PPE inspection	01//_ Hard Hat	
	02/_/_ Retro-reflective	
	03// Safety glasses	/goggles
	04/ Gloves	
	05/_/ Hearing protection	
	06/_/_ Foot protectio	n
	07/ Respirator	
	08//_ Other (specify) _	

## NOTES SKETCHES PICTURES

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