

Site/Project:	
Site Supervisor:	Date:
Work Description:	
Required PPE:	

Fire Extinguisher Location: _____

First Aid Kit Location: _____

Step	Potential Hazard	Barrier or Control

	Name	Signature	Date
Job Supervisor			
Worker			

Emergency Contacts:

Ambulance/Emergency	911	
Pasqua Hospital	306-352-0660	4101 Dewdney Ave, Regina, SK S4T 1A5
Regina Regional Police	306-777-6500	1717 Osler St, Regina, SK S4P 3W3
Regina Fire Station #4	306-777-7000	3855 Dewdney Ave, Regina, SK S4P 3C8

Traffic Control Plan

Location: _____

Start Time: _____

End Time: _____

Site Risk Assessment:

Road Type: _____

Speed Limit: _____

of Lanes: _____

Shoulders: _____

Others: _____

Work Risk Assessment:

Work ON/OFF Roadway: _____

Shoulder Work: _____

Stationary or Moving: _____

Site Activity: _____

Equipment Access: _____

Trenches: _____

Traffic Plan:

Plan to include:

- Diagram of lanes and intersections (if applicable)
- Traffic control devices
- Spacing of devices
- Advanced warning area
- Transition area
- Buffer area
- Work area
- Termination area
- Moving signs
- Other: _____

Diagram:

