



HIGHWIRE

Safety Assessment

Program for:

Rolling Plains Construction, Inc.

The Safety Assessment Program reviews a company's historic safety performance and current safety management systems. The program normalizes data for vendor or contractor size and type of work performed.

The program provides thorough, objective and consistent evaluation of company performance so clients can identify, monitor, and manage risk smarter. The results provide a strong indicator of how a vendor or contractor values safety and a reliable predictor of future performance. This is a certificate of completion and does not represent approval of use by your hiring partner.

CERTIFICATE OF ACHIEVEMENT



PLATINUM SAFETY AWARD

This acknowledgement certifies that on 06/25/2024

Rolling Plains Construction, Inc.

has successfully completed the Highwire Independent Safety Assessment Program and has achieved the Certificate of Completion for the trade

Division 7 - Thermal and Moisture Protection

Garrett Burke, President, Highwire

HIGHWIRE

Safety Assessment Results

Total Score	97 / 100
Injury & Illness	43 / 45 points
EMR	8 / 10
DART	15 / 15
Recordable Case	15 / 15
No of Fatalities	0:5 points awarded
OSHA Experience	10 / 10 points
Advanced Initiatives	5 / 5 points
Program Elements	9 / 10 points
Management Systems	30 / 30 points
Review of Safety Manual	Zero discrepancies found

Safety Account Expires: Oct 14, 2024 Injury/Illness Data Valid Until Feb 1, 2025

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Thermal Insulation

A handwritten signature in blue ink that reads 'Garrett Burke'.

Garrett Burke, President, Highwire

HIGHWIRE

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Fire and Smoke Protection

Garrett Burke, President, Highwire

HIGHWIRE

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Company Information

Company Name	Rolling Plains Construction, Inc.
Federal EIN	840960975
First Name	Kaitlin
Last Name	Sidwa
Email	kaitlin@rollingplains.com
Telephone	+1 (303) 659-7861
Address 1	5136 S Desert View Dr.
Address 2	
City	Apache Junction
State	Arizona
Zipcode	85120

Safety Profile

Trade Category	Score
Division 7 - Thermal and Moisture Protection	97
Thermal Insulation	97
Fire and Smoke Protection	97

Strengths/Weakness (Division 7 - Thermal and Moisture Protection)

Strengths

Safety Management Systems
Special Elements
Safety Program Elements
EMR is better than the industry average
Days Away case and Restricted 'Recordable Case' is better than industry average
Recordable Cases is better than industry average
No fatalities in the past
No points deducted from Safety Documentation

Weakness



Strengths/Weakness (Thermal Insulation)

Strengths

Safety Management Systems

Special Elements

Safety Program Elements

EMR is better than the industry average

Days Away case and Restricted 'Recordable Case' is better than industry average

Recordable Cases is better than industry average

No fatalities in the past

No points deducted from Safety Documentation

Weakness

Strengths/Weakness (Fire and Smoke Protection)

Strengths

Safety Management Systems

Special Elements

Safety Program Elements

EMR is better than the industry average

Days Away case and Restricted 'Recordable Case' is better than industry average

Recordable Cases is better than industry average

No fatalities in the past

No points deducted from Safety Documentation

Weakness

Injury & Illness

2023

Did your company perform work this year?

yes

OSHA Recordable Cases

2

DART Cases

1



Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	2
# Fatalities	0
# Total Hours Worked By All Employees	686081
EMR	.73

2022

Did your company perform work this year?	yes
OSHA Recordable Cases	1
DART Cases	1
Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	26
# Fatalities	0
# Total Hours Worked By All Employees	580077
EMR	0.80

2021

Did your company perform work this year?	yes
OSHA Recordable Cases	3
DART Cases	2
Total Days Away From Work	360
Total Days of Job Transfer or Restricted Duty	0
# Fatalities	0
# Total Hours Worked By All Employees	400298
EMR	0.78

2020

Did your company perform work this year?	yes
OSHA Recordable Cases	3
DART Cases	1
Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	29
# Fatalities	0



# Total Hours Worked By All Employees	557267
EMR	0.78

OSHA Experience

Management Systems

1. Have a defined set of goals related to safety?

Ans: Yes

2. Does your company follow a detailed planning process for safety that breaks tasks or activities down into steps, identifies hazards and control measures for each step, identifies responsible parties for implementing controls, and ensures that plans are communicated to the workforce providing task-specific training?

Ans: Yes

3. Have a defined management leadership and involvement program?

Ans: Yes

4. Have a defined accountability program for observed infractions of your company's safety and health program?

Ans: Yes

5. Have a crisis management or emergency action plan?

Ans: Yes

6. Have an incident investigation program?

Ans: Yes

7. Have an employee training and development program for workforce, foreman, superintendent, and managers?

Ans: Yes

8. Have a new hire orientation program?

Ans: Yes

9. Have a defined employee performance evaluation process that includes safety performance?

Ans: Yes



10. Have a defined employee involvement plan (i.e., safety committee, feedback program, etc.)?

Ans: Yes

11. Have a defined budget for safety?

Ans: Yes

12. Have a defined incentive and/or recognition program?

Ans: Yes

13. Have an annual self evaluation program?

Ans: Yes

14. Have defined safety meetings?

Ans: Yes

15. Have an inspection and hazard identification program?

Ans: Yes

16. Have a full-time safety manager on staff? If Yes, please upload one of the following: CSP or CHST designation or resume?

Ans: Yes

17. Have a defined program for the communication of safety-related items (incidents, accidents, successes, program changes, etc.)?

Ans: Yes

18. Have a policy statement that is endorsed by the company president, owner or executive management?

Ans: Yes

Program Elements

Construction Questions

1. Does your company have a head protection program?

Ans: We have a program in place to address this hazard/activity.

2. Does your company have an eye protection program?

Ans: We have a program in place to address this hazard/activity.



3. Does your company have a fall protection program?

Ans: We have a program in place to address this hazard/activity.

4. Does your company have a program in place for maintaining housekeeping?

Ans: We have a program in place to address this hazard/activity.

5. Does your company have a fire prevention and protection program?

Ans: We have a program in place to address this hazard/activity.

6. Does your company have a hazard communication program?

Ans: We have a program in place to address this hazard/activity.

7. Does your company have a foot protection program?

Ans: We have a program in place to address this hazard/activity.

8. Does your company have a soft-tissue injury prevention program in place (material handling)?

Ans: We have a program in place to address this hazard/activity.

9. Does your company have a procedure in place to respond to regulatory agency complaints, inspections and citations?

Ans: We have a program in place to address this hazard/activity.

10. Does your company have an incident and accident reporting program?

Ans: We have a program in place to address this hazard/activity.

11. Does your company have a signs, signals and barricades program?

Ans: We have a program in place to address this hazard/activity.

12. Are your employees exposed to cut and laceration hazards to the hands?

Ans: We have a program in place to address this hazard/activity.

13. Are your employees EVER required to enter or work around trenches or excavations?

Ans: This hazard/activity is not applicable to our scope of work.

14. Are your employees EVER required to use electric-powered tools or equipment?

Ans: We have a program in place to address this hazard/activity.

15. Do your employees work on or around electrical systems/components?

Ans: This hazard/activity is not applicable to our scope of work.



16. Does your company perform work on live electrical components? (Work that involves exposed energized electrical conductors or circuit parts that employees may approach and/or interact with that can expose employees to electric shock hazards or could create an arcing fault that results in an arc flash.)

Ans: This hazard/activity is not applicable to our scope of work.

17. Do your employees EVER work with or use hoisting or rigging equipment such as slings, shackles, cranes, hoisting chains, etc.?

Ans: This hazard/activity is not applicable to our scope of work.

18. Do your employees operate motor vehicles as part of their required job duties?

Ans: We have a program in place to address this hazard/activity.

19. Do your employees use powder-actuated tools? (tools that rely on a powder propellant charge i.e. Hilti or Ramset)?

Ans: This hazard/activity is not applicable to our scope of work.

20. Do your employees EVER use a ladder?

Ans: We have a program in place to address this hazard/activity.

21. Do your employees EVER use rolling staging, supported scaffold, suspended scaffolds, mast-climbing scaffolds or other types of scaffolds?

Ans: We have a program in place to address this hazard/activity.

22. Do your employees EVER perform welding, cutting, brazing, soldering, or other flame/spark producing activities?

Ans: This hazard/activity is not applicable to our scope of work.

23. Does your company perform steel erection?

Ans: This hazard/activity is not applicable to our scope of work.

24. Do your employees EVER perform work activities or work in areas with high noise levels?

Ans: We have a program in place to address this hazard/activity.

25. Are your employees potentially exposed to dust, fumes, mists, vapors or other respiratory hazards?

Ans: We have a program in place to address this hazard/activity.

26. Do employees work around activities that create silica dust?

Ans: We have a program in place to address this hazard/activity.

27. Are your employees required to enter manholes, vaults, pits, shafts, trenches, crawl



spaces, or other confined spaces?

Ans: This hazard/activity is not applicable to our scope of work.

28. Are your employees EVER required to use, store or handle oxygen, acetylene, propane, nitrogen or other compressed gasses?

Ans: This hazard/activity is not applicable to our scope of work.

29. Are your employees EVER required to operate or work from boom lifts, scissor lifts, or other aerial lifts?

Ans: We have a program in place to address this hazard/activity

30. Do your employees EVER work in places where asbestos-containing materials could be present?

Ans: This hazard/activity is not applicable to our scope of work.

31. Do your employees EVER perform sandblasting operations?

Ans: We have a program in place to address this hazard/activity.

32. Are your employees required to attend and/or participate in regularly scheduled toolbox talks?

Ans: We have a program in place to address this hazard/activity.

33. Are your employees required to possess a first-aid or CPR training certification?

Ans: Yes

34. Do your employees ever work in places where lead-based paint or lead-containing materials could be present?

Ans: We have a program in place to address this hazard/activity.

35. Are your employees potentially exposed to other hazardous chemicals, materials, or wastes?

Ans: We have a program in place to address this hazard/activity.

36. Does your company perform structural demolition?

Ans: This hazard/activity is not applicable to our scope of work.

Advanced Initiatives

1. Does your company have a 'return to work' program for employees who have been injured?



Ans: Yes

2. Does your company have a substance abuse policy that prohibits drug and alcohol use?

Ans: Yes

3. Does your company require candidate employees to submit to a drug test before being hired?

Ans: Yes

4. Does your company perform drug and alcohol testing following EVERY employee work-related injury or accident?

Ans: Yes

5. Does your company have a reasonable suspicion drug and alcohol testing program?

Ans: Yes

6. Is your company a member of the OSHA VPP program?

Ans: No

7. Is your company a member of the SHARP program?

Ans: No

8. Is your company a participant of the OSHA Partnership Program?

Ans: No

9. Does your company have an infection control plan that addresses local outbreaks and pandemics?

Ans: Yes

10. Have any updates been made to your company's safety programs, policies, procedures, or management systems?

Ans: Yes

11. Annual Safety Program Update

Ans: check-this-box-to-confirm-that-your-company-s-most-recent-safety-programs-policies-procedures-and-management-systems-have-been-uploaded-to-highwire-

12. Select 'Agree' below to acknowledge that all safety policies, procedures, and documentation uploaded into the Highwire applications are accurate, were developed in substantial part by your company personnel, and fairly represent how your business will operate at your client's sites, projects, and facilities:

Ans: Agree



13. Identify the most recent revision date for the safety policies and procedures uploaded in Highwire:

Ans: 2022-01-01T00:00:00