



**Olympic Companies, Inc.**  
AN EQUAL OPPORTUNITY EMPLOYER

2823 Hedberg Drive  
Minnetonka, Minnesota 55305  
Telephone: (952) 546-8166  
Fax: (952) 544-8869  
www.olympiccompanies.com

Date: January 7, 2019		EMAIL THIS SHEET IN TO THE OFFICE AFTER YOUR MEETING!!!	
Project Number#	Job Name:	Person Conducting Meeting:	

## Welcome to 2019

We would like to welcome you to 2019! Here at Olympic Companies your safety is our *number one priority*. It's our goal and it should be your goal, to go home at the end of each day in good health to enjoy time with family and friends. To help us achieve this goal, we will continually supply you with information regarding Olympics' safety policies and procedures. This will be accomplished through toolbox talks, handouts that you will receive in your payroll envelope, and ongoing training classes held on-site and at our union training centers.

### Last week's Bonus Question:

How much time does it take to complete our Stretch & Bend and discuss what we are going to do today?

**Answer:** Some stated that it took 10 minutes to stretch and discuss what are we are going to do today.

Inspect your equipment (*scaffold, aerial lifts, ladders, fall protection, electrical cords, etc., etc.*) prior to the start of each work shift.

For **inspection packets or repair tags** call **Dave Sangren @ (612) 644-3136** to have some delivered to your jobsite.

Any questions give Sturg a call (612) 221-8603

### PLEASE PRINT YOUR NAME

(Foreman review sheet, verify crew members names are legible)


Visit our website: [www.olympiccompanies.com](http://www.olympiccompanies.com)

Comments:

**Record to beat 378 days!!!**

**As of January 3, 2019 we have worked 11 days without a Lost Time Injury.**

**We have safely worked 18,520 hours towards our ATV goal of 150,000 hours!**

Toolbox Talks winner for last week: **Mike Bleifus @ STEM School**

This week's Bonus Question:

**How many Olympic employees on this project have an OSHA 10 card or OSHA 30 card?**

Hint: **See Foreman**

*"Building a Safer Place to Work" one week at a time.*



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# Employee Orientation

**Project Name:** \_\_\_\_\_ **Foreman Name:** \_\_\_\_\_

**Past Training Completed:** \_\_\_\_\_ (Number of employees that completed this training sheet)

2018 Right-To-Know	_____	CPR/First-Aid	_____	OSHA 10	_____	OSHA 30	_____
PRO 10	_____	GHS	_____	EIFS (EXP)	_____	Rigging	_____
Scissor Lifts/JLG's	_____	Forklift (Int/Ext)	_____	HILTI	_____	Harresment	_____
Scaffold User/Erector	_____	Fall Protection	_____	Respirator	_____	Oly Safety Video	_____

*Below is a check list of safety issues that you may find on a jobsite. If you come across any of these issues and are unsure how to resolve them, please notify your immediate foreman.*

	Initial		Initial
<b>Accidents / Injuries:</b> Report to your foreman immediately	_____	<b>Fall Protection:</b> Any open edges to a fall greater than 6'. Any hole that is unguarded and unlabeled HOLE.	_____
<b>Harassment:</b> If you are working in an unfriendly / hostile environment. Report it to your Foreman.	_____	<b>Scaffold:</b> Verify that scaffold has been inspected at the start of each shift. That all parts are in place while using the scaffold. (guardrails, planks, x-braces, access to all working levels)	_____
<b>Scissor Lifts/JLG's:</b> Complete daily inspection. Check your work area: holes, electrical wires, sprinkler pipes and duct work. Keep safety chain in place. No stepping on mid-rails.	_____	<b>Housekeeping:</b> Keep your work area clean. When you are done in an area, broom sweep it with sweeping compound, for the next trade.	_____
<b>Electrical:</b> Check your electrical cords for any damage. Verify you are plugged into a GFCI protected power supply.	_____	<b>Ladders:</b> Usa all ladders properly. Do not work off of a step ladder leaning against a wall. Extension ladders must be extended 3' over the exit point and must be tied off.	_____
<b>Hardhats &amp; Safety Glasses:</b> This jobsite is 100% hardhat and safety glasses. NO ifs, ands or buts.	_____	<b>Power Tools:</b> If you have any tool that is not working properly, or that is damaged, RED TAG IT report it to your foreman.	_____
<b>Flammables/Combustibles:</b> If you are working on a task that requires gasoline, fuel oil or propane, review safety issues: storage, fire extinguishers, containers labeled	_____		

**Location of the following items:** \_\_\_\_\_

**Foreman Cell Phone:** \_\_\_\_\_  
**Closest Medical Clinic:** \_\_\_\_\_  
**SDS Information:** \_\_\_\_\_  
**First-aid kits / Eye Wash:** \_\_\_\_\_  
**Safety Supplies:** \_\_\_\_\_