32 EAST FRONT STREET P.O. BOX 991 TRENTON, NJ 08625-0991

ACCEPTANCE OF SITE-SPECIFIC HEALTH AND SAFETY PLAN (SSHASP) FORM NJSDA FORM 7

INSTRUCTIONS: This is an internal form to be signed off by the assigned NJSDA Field Compliance Inspector, issued to the Prime Contractor. Original to be filed at the site by Prime Contractor.

Safety Manual reference sections are listed on last page of form.

I have reviewed and accepted the Prime Contractor SSHASP submittal and find it to be compliant with all Federal (OSHA) and NJSDA Safety Manual and Owner Controlled Insurance Program regulations, policies and procedures.	
Project name:	
Contract #:	Date of acceptance:
Prime Contractor name:	
Construction Management firm name:	
Construction Management representative name:	
NJSDA FIELD COMPLIANCE INSPECTOR:	
Name:	Date of acceptance:
Signature:	

Safety Manual reference section(s) and page(s):

Page 5, 1.0 Introduction, item # 4.

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