

Worker Protection Standard

Part 2: Commercial Pesticide Handling Establishment Checklist

WORKER PROTECTION STANDARD INSPECTION WORKSHEET

DATE:	INSPECTION NUMBER		
OWNER/OPERATOR	FIRM OR PREMISE NAME		
APPLICATOR			
Inspector Credentials Presented <input type="checkbox"/> Yes <input type="checkbox"/> No	Routine Inspection <input type="checkbox"/>		
Notice of Inspection Provided <input type="checkbox"/> Yes <input type="checkbox"/> No	For Cause Inspection <input type="checkbox"/>		
A. RECORDS REVIEW			
Handler Training Records 170.501 (Page 82)	Yes	No	
Current handlers trained in past 12 months?	<input type="checkbox"/>	<input type="checkbox"/>	
Records retained on the establishment for 2 years? (Handler name, signature, date of training, EPA-approved materials, trainer's name, trainer's qualifications, name of handler employer)	<input type="checkbox"/>	<input type="checkbox"/>	
Respirator Safety Records 170.507(b)(10) (Page 68)	N/A	Yes	No
Are Respirator Safety Records retained on establishment for 2 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have handlers received medical clearance, fit testing, and training for required respirator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. MINIMUM AGE FOR HANDLERS 170.313(c) (Page 79)			
Are all handlers at least 18 years of age?	<input type="checkbox"/>	<input type="checkbox"/>	
C. WPS Pesticide Applications			
Identify recent WPS pesticide applications through a record review, interview and/or visual inspection of products in storage and record as appropriate to facilitate the inspection: product name/#, date applied, method of application, special requirements, weather conditions during application, PPE required, REI (record on Part 4: List of WPS Pesticide Products or separately)			
D. INFORMATION EXCHANGE 170.313 (Page 83)			
Where applicable, does the agricultural employer give the location and description of treated areas or REIs and restrictions in those areas where applications are or will be made on their establishment to the commercial pesticide handler employer? 170.309(k)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the commercial pesticide handler employer provide this information about the areas with entry restrictions to the handler who worked on the agricultural establishment? 170.313(h)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the commercial pesticide handler employer inform the agricultural employer of: location and description of areas to be treated, date and time of application, product name, registration number, active ingredient, REI, requirement for oral and/or written notification, and any other restrictions? 170.313(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	N/A	Yes	No
If there are changes to the location or description of the area to be treated, the REI, the notification requirements, restrictions or use directions, or if the start time will be earlier than scheduled, was updated information provided before the application? If there were changes to any other information, was updated information provided to the agricultural employer within 2 hours after completing the application? 170.313(j)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. KNOWLEDGE OF LABELING AND APPLICATION SPECIFIC INFORMATION 170.503 (Page 59)			
		Yes	No
Before a handler performed any handler activity, did the handler employer ensure the handler read applicable portions of the label on safe use or was informed in a manner the handler could understand? 170.503(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the handler have access to the label at all times, and was the handler aware of any entry restrictions, AEZ and REIs? 170.503(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. HANDLER DECONTAMINATION AND EYEWASH SUPPLIES 170.509 (Page 74)			
Inspector observation <input type="checkbox"/> Based on interview <input type="checkbox"/>	N/A	Yes	No
Are decontamination supplies located at mixing sites? 170.509(c)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For all other handler tasks, are decontamination supplies located within 1/4 mile from handler or nearest place of vehicular access? Are the supplies located outside a treated area or area under a REI or in a closed container protected from pesticide contamination? 170.509(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are the appropriate decontamination supplies provided? including 3 gallons of water provided for each handler (at the beginning of work period and replenished to maintain adequate supply), soap, single use towels, and a change of clothes? 170.509(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At each mixing/loading site for products requiring eye protection or using a closed system under pressure is there an appropriate eyewash system immediately available to a handler? (Either a system to deliver gently running water (at a rate of 0.4 gal/min) for 15 minutes or at least 6 gallons in containers suitable for providing a gentle eye-flush for about 15 minutes) 170.509(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does each applicator have at least one pint of water immediately available in a portable container when pesticide label requires eye protection? 170.509(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. PERSONAL PROTECTIVE EQUIPMENT (PPE) 170.507(a)-(d) (Page 62)			
Inspector observation <input type="checkbox"/> Based on interview <input type="checkbox"/>	N/A	Yes	No
For pesticide products on site and/or recently applied:			
Did the handlers use the clothing and PPE specified on the product labeling? 170.507(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the handler employer provide clean, operational PPE to the handler to meet label requirements? 170.507(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did employer assure that handler wears and uses PPE correctly, and before each day of use, is the PPE inspected, and repaired or discarded as appropriate? 170.507(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the PPE properly cleaned and thoroughly dried before storage? Is clean PPE stored separately from personal clothing and contaminated areas? Is there a clean place for putting on and removing PPE? 170.507(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If using particulate filtering facepiece respirators, are they replaced appropriately? (i.e., breathing resistance excessive; filter is damaged; according to respirator or product label; after 8 hours of use) 170.507(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If using vapor-removing canister/cartridge respirators, are they replaced appropriately? (based on odor, taste, irritation; breathing resistance excessive; according to respirator or pesticide product label; after 8 hours of use) 170.507(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H. PESTICIDE HANDLING EQUIPMENT 170.313(f), (g) and (l)				
Inspector observation <input type="checkbox"/> Based on interview <input type="checkbox"/>		N/A	Yes	No
Before use, did the handler employer instruct handlers in the safe operation of application and mixing/loading equipment and inspect and repair application and mixing/loading equipment before each day of use?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has any person employed by the commercial pesticide handling establishment, who cleans, repairs, or adjusts the pesticide equipment, been trained as a handler?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If persons not employed by the commercial pesticide handling establishment clean, repair, or adjust the pesticide equipment, are they provided with the following information: that the equipment may be contaminated; potential harmful effects of pesticide exposure; how to limit exposure; and how to wash to remove contamination?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. APPLICATION RESTRICTIONS AND HANDLER PROTECTIONS 170.505 (Page 60)				
Inspector observation <input type="checkbox"/> Based on interview <input type="checkbox"/>		N/A	Yes	No
Do all handlers observed by the inspector appear to be over 18?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the handler suspend application because someone was in the AEZ? (for enclosed space, in area in column B in Table in 170.405(b)(4)) and was the application continued properly? 170.505(b)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was each pesticide applied so that it did not contact, either directly or through drift, anyone except appropriately trained and equipped handlers? 170.505(a)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If toxic "skull & crossbones" products were used, was contact made at least every 2 hours by voice, sight or another appropriate method? 170.505(c)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a fumigant was applied in an enclosed space, was continuous visual or voice contact with another handler equipped with PPE maintained? Did the handler outside the enclosed space have immediate access to required PPE in case a rescue is required? 170.505(d)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. EMERGENCY ASSISTANCE 170.313(k) (Page 80)			Yes	No
Has a handler experienced potential pesticide exposure during or within 72 hours after employment? If so, was transportation to an emergency medical care facility provided and information (SDS, circumstances of application and exposure) provided to medical personnel?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. ANTI-RETALIATION 170.315 (Page 85)			Yes	No
Based on information available, no person was threatened, intimidated, coerced, discriminated against or experienced retaliation for complying with or attempting to comply with WPS requirements, or for providing information regarding violative behavior. Check Yes if this statement is correct.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISPOSITION OF INSPECTION				
Describe or list any suspected or documented violations of the WPS identified during this inspection. Attach documentation for all suspected violations.				
Inspector Signature:		Date:		