

# Mobile Equipment Safety Program Template

**Company:** \_\_\_\_\_

**Mine:** \_\_\_\_\_

**MSHA ID:** \_\_\_\_\_

**Disclaimer:**

This template example provides a format that *may* be followed in the development of your written program. You will determine your program's content under each equipment category identified below based on the specifics of your mine.

## Purpose and Scope:

The purpose of this program is to eliminate or reduce accidents, injuries, and illnesses to miners involving the use of mobile equipment at our operation. This program applies to all operational activities and persons responsible for operation, use, maintenance, routine, and non-routine repairs, and/or handling of any powered mobile equipment used, owned, or operated on this mine site. Independent contractors working on this site, including portable crushers, will comply with this program or submit their own equivalent program subject to review and approval by management at this mine. Visitors, vendors, and third-party consultants on mine property will comply with this program as well as all other applicable local federal and state regulations to include company specific policies and procedures. Additionally, persons coming on to this mine site to include visitors' vendors contractors, third party consultants that may fall under the scope of this program either operating surface powered mobile equipment or performing routine or non-routine maintenance and or consultation services on equipment are covered under this program.

## Definitions:

- ❖ Responsible person means a person with authority and responsibility to evaluate and update a written safety program for surface mobile equipment.
- ❖ Surface mobile equipment means wheeled, skid-mounted, track-mounted, or rail-mounted equipment capable of moving or being moved, and any powered equipment that transports people, equipment, or materials, excluding belt conveyors, at surface areas of underground metal and nonmetal mines.

**Program Requirements for Equipment Categories**

- 1) Wheeled mobile equipment includes trucks (haul, flatbed, fuel, service, bulk tanker, water, tractor-trailers, etc.), front end loaders, skid-steer loaders, cranes, self-powered aerial lifts, and radial stackers.

Hazard Identification and Risk Reduction Measures	Safe Procedures and Schedules for Routine Maintenance and Non-Routine Repairs	Identification of Available and Emerging Feasible Technologies	Hazard Identification and Avoidance Training

2) Rail-mounted equipment includes locomotives, railcars, railcar movers, overhead and gantry cranes, and circular and longitudinal stacker-reclaimers.

Hazard Identification and Risk Reduction Measures	Safe Procedures and Schedules for Routine Maintenance and Non-Routine Repairs	Identification of Available and Emerging Feasible Technologies	Hazard Identification and Avoidance Training

3) Track-mounted equipment includes bulldozers, excavators, drills, track, multi-terrain and skid-steer loaders, portable crushers, and screening plants.

Hazard Identification and Risk Reduction Measures	Safe Procedures and Schedules for Routine Maintenance and Non-Routine Repairs	Identification of Available and Emerging Feasible Technologies	Hazard Identification and Avoidance Training

- 4) Skid-mounted equipment includes light plants and portable equipment that can be moved about the mine or mill. Skid-mounts may be frames, plates, rails, or pallets used to facilitate easy transportation or storage of mining or industrial equipment.

Hazard Identification and Risk Reduction Measures	Safe Procedures and Schedules for Routine Maintenance and Non-Routine Repairs	Identification of Available and Emerging Feasible Technologies	Hazard Identification and Avoidance Training

**Process for Soliciting Input from Miners and Their Representatives**

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**Process for making the written safety program available for inspection by miners and their representatives. A no-cost copy will be provided upon request.**

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<b>Responsible Person Information (Annual Review)</b>		
Print Name <b>(Optional)</b>	Signature <b>(Optional)</b>	Date <b>(Optional)</b>

<b>Other Responsible Person Reviews/Updates (When Applicable)</b>			
Types of Reviews/Updates	Print Name <b>(Optional)</b>	Signature <b>(Optional)</b>	Date <b>(Optional)</b>
Changes in Conditions/Practices Adversely Affecting Health & Safety			
Occurrence of Accidents/Injuries			
Surface Mobile Equipment Changes/Modifications			