

**Obishikokaang Resources Inc.  
Form**

**Field EMS Inspection**

Date: \_\_\_\_\_ Block Name: \_\_\_\_\_ Inspector: \_\_\_\_\_

Contractor: \_\_\_\_\_ Machine: \_\_\_\_\_ Operator: \_\_\_\_\_

License	To Standard		Comments
	Yes	No	
Proper PPE worn			
Operator knows lockout procedure			
Operator carries MHEO training certificates on them			
Operator knows who their supervisor is and when was the last time they saw them			
Machine has sign off map			
Machine has Obish Forest Operations Manual			
First aid kit and fire extinguisher			
Cab clean, all items secure			
Emergency communication capable (ie sat phone)			
Implements at rest during inspection (ie blade stop)			
Operator knows procedure when encountering an unidentified value?			
Warning decals in place			
MIOP's being followed			

Additional Information