



HIGHWIRE

Safety Assessment

Program for:

UltraClean Electropolish INC

The Safety Assessment Program reviews a company's historic safety performance and current safety management systems. The program normalizes data for vendor or contractor size and type of work performed.

The program provides thorough, objective and consistent evaluation of company performance so clients can identify, monitor, and manage risk smarter. The results provide a strong indicator of how a vendor or contractor values safety and a reliable predictor of future performance. This is a certificate of completion and does not represent approval of use by your hiring partner.

CERTIFICATE OF ACHIEVEMENT



GOLD SAFETY AWARD

This acknowledgement certifies that on 08/20/2024

UltraClean Electropolish INC

has successfully completed the Highwire Independent Safety Assessment Program and has achieved the Certificate of Completion for the trade

Repair and Maintenance

Garrett Burke, President, Highwire

HIGHWIRE

Safety Assessment Results

Total Score	89 / 100
Injury & Illness	42 / 45 points
EMR	7 / 10
DART	15 / 15
Recordable Case	15 / 15
No of Fatalities	0:5 points awarded
OSHA Experience	10 / 10 points
Advanced Initiatives	5 / 5 points
Program Elements	10 / 10 points
Management Systems	25 / 30 points
Review of Safety Manual	3 points deducted

Safety Account Expires: Jun 6, 2025 Injury/Illness Data Valid Until Feb 1, 2025

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Company Information

Company Name	UltraClean Electropolish INC
Federal EIN	870711220
First Name	Neil
Last Name	Couey
Email	neilc@ultracleanep.com
Telephone	+1 (281) 442-2208
Address 1	1814 Sunny Dr
Address 2	
City	Houston
State	Texas
Zipcode	77093

Safety Profile

Trade Category	Score
Repair and Maintenance	89

Discrepancies

Program Elements

12. <p>Does your company have a program, policy, procedure, or safety statement that addresses medical surveillance for employees with potential exposure to hazardous chemicals, materials, or wastes?</p>

Advanced Initiatives

4. Does your company perform drug and alcohol testing following EVERY employee work-related injury or accident?
5. Does your company have a reasonable suspicion drug and alcohol testing program?

Strengths/Weakness (Repair and Maintenance)

Strengths

Safety Management Systems

Special Elements



Safety Program Elements
EMR is better than the industry average
Days Away case and Restricted 'Recordable Case' is better than industry average
Recordable Cases is better than industry average
No fatalities in the past

Weakness
Points deducted from Safety Documentation

Injury & Illness

2023

Did your company perform work this year?	yes
OSHA Recordable Cases	0
DART Cases	0
Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	0
# Fatalities	0
# Total Hours Worked By All Employees	34794
EMR	.82

2022

Did your company perform work this year?	yes
OSHA Recordable Cases	0
DART Cases	0
Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	0
# Fatalities	0
# Total Hours Worked By All Employees	33839
EMR	0.79

2021

Did your company perform work this year?	yes
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OSHA Recordable Cases	0
DART Cases	0
Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	0
# Fatalities	0
# Total Hours Worked By All Employees	29541
EMR	0.79

2020

Did your company perform work this year?	yes
OSHA Recordable Cases	0
DART Cases	0
Total Days Away From Work	0
Total Days of Job Transfer or Restricted Duty	0
# Fatalities	0
# Total Hours Worked By All Employees	26361
EMR	0.81

OSHA Experience

Management Systems

1. Have a defined set of goals related to safety?

Ans: Yes

2. Does your company follow a detailed planning process for safety that breaks tasks or activities down into steps, identifies hazards and control measures for each step, identifies responsible parties for implementing controls, and ensures that plans are communicated to the workforce providing task-specific training?

Ans: Yes

3. Have a defined management leadership and involvement program?

Ans: Yes

4. Have a defined accountability program for observed infractions of your company's safety



and health program?

Ans: Yes

5. Have a crisis management or emergency action plan?

Ans: Yes

6. <p>Does your company have in incident investigation procedure?</p>

Ans: Yes

7. <p>Does your company have a defined employee training and development program or process for workforce, foreman/supervisors, and managers?</p>

Ans: Yes

8. <p>Does your company have a defined process for onboarding new employees?</p>

Ans: Yes

9. Have a defined employee performance evaluation process that includes safety performance?

Ans: Yes

10. <p>Does your company have a defined employee involvement plan (i.e., safety committee, feedback system/forums, etc.)?</p>

Ans: Yes

11. Have a defined budget for safety?

Ans: No

12. Have a defined incentive and/or recognition program?

Ans: No

13. <p>Does your company have an annual self-evaluation program or process?</p>

Ans: Yes

14. Have defined safety meetings?

Ans: Yes

15. <p>Does your company have an audit, inspection, and hazard identification and reporting program or process?</p>

Ans: Yes

16. <p>Does your company have a full-time, dedicated safety manager? If Yes, please upload the safety manager's relevant safety certifications and/or resume.</p>



Ans: No

17. <p>Does your company have a defined approach to the communication of safety-related information (incidents, accidents, learning bulletins, etc.)?</p>

Ans: Yes

18. Have a policy statement that is endorsed by the company president, owner or executive management?

Ans: Yes

Program Elements

Facilities Questions

1. Are ANY of your employees required to maintain a permit, license or certification in order to perform their work?

Ans: NA

2. <p>Does your company have a program, policy, procedure, or safety statement that addresses the use of personal protective equipment?</p>

Ans: We have a program in place to address this hazard/activity.

3. <p>Does your company have a program, policy, procedure, or safety statement that addresses walking and working surfaces, the hazards associated with work at heights, and/or potential slip/trip/fall exposures?</p>

Ans: This hazard/activity is not applicable to our scope of work.

4. <p>Does your company have a program, policy, procedure, or safety statement that addresses maintenance of a clean and orderly work area/housekeeping?</p>

Ans: We have a program in place to address this hazard/activity.

5. <p>Does your company have a program, policy, procedure, or safety statement that addresses fire prevention and protection?</p>

Ans: We have a program in place to address this hazard/activity.

6. <p>Does your company have a program, policy, procedure, or safety statement that addresses the communication of chemical hazard information to the workforce? </p>

Ans: We have a program in place to address this hazard/activity.

7. <p>Does your company have an incident and accident reporting procedure?</p>



Ans: We have a program in place to address this hazard/activity.

8. <p>Does your company have a procedure in place to record and coordinate a response to regulatory agency visits, complaints, fines, or violations?</p>

Ans: We have a program in place to address this hazard/activity.

9. <p>Does your company have a program, policy, procedure, or safety statement that addresses hearing conservation/prevention of hearing loss?</p>

Ans: We have a program in place to address this hazard/activity.

10. <p>Does your company have a program, policy, procedure, or safety statement that addresses the use of signs, signals, and guarding/barriers?</p>

Ans: We have a program in place to address this hazard/activity.

11. <p>Does your company have a program, policy, or procedure that addresses environmental protection related to your company's scope of work and potential environmental impacts/considerations?</p>

Ans: We have a program in place to address this hazard/activity.

12. <p>Does your company have a program, policy, procedure, or safety statement that addresses medical surveillance for employees with potential exposure to hazardous chemicals, materials, or wastes?</p>

Ans: We have a program in place to address this hazard/activity.

13. <p>Does your company have a program, policy, procedure, or safety statement that address the use of respiratory protection?</p>

Ans: We have a program in place to address this hazard/activity.

14. <p>Does your company have a program, policy, procedure, or safety statement that addresses the control of hazardous energy / implementation of lockout-tagout?</p>

Ans: We have a program in place to address this hazard/activity.

15. Do your employees EVER perform welding, cutting, brazing, soldering, or other flame/spark producing activities?

Ans: This hazard/activity is not applicable to our scope of work.

16. <p>Does your company have a program, policy, procedure, or safety statement in place that addresses the prevention of soft-tissue injuries (manual material handling, safe lifting techniques, ergonomics, etc.)?</p>

Ans: We have a program in place to address this hazard/activity.

17. Are your employees required to use electric-powered tools or equipment?



Ans: We have a program in place to address this hazard/activity.

18. Does your company perform work on live electrical components? (Work that involves exposed energized electrical conductors or circuit parts that employees may approach and/or interact with that can expose employees to electric shock hazards or could create an arcing fault that results in an arc flash.)

Ans: This hazard/activity is not applicable to our scope of work.

19. Do your employees work on or around electrical systems/components?

Ans: This hazard/activity is not applicable to our scope of work.

20. Do your employees ever work with or use hoisting or rigging equipment such as slings, shackles, cranes, hoisting chains, etc.?

Ans: This hazard/activity is not applicable to our scope of work.

21. Do your employees ever operate motor vehicles as part of their required job duties?

Ans: This hazard/activity is not applicable to our scope of work.

22. Do your employees ever use a ladder?

Ans: This hazard/activity is not applicable to our scope of work.

23. Do your employees ever use rolling staging, supported scaffold, suspended scaffolds, mast-climbing scaffolds or other types of scaffolds?

Ans: We have a program in place to address this hazard/activity.

24. Are your employees ever required to enter or work around trenches or excavations?

Ans: This hazard/activity is not applicable to our scope of work.

25. Are your employees potentially exposed to dust, fumes, mists, vapors or other respiratory hazards?

Ans: We have a program in place to address this hazard/activity.

26. Are your employees ever required to enter manholes, vaults, pits, shafts, trenches, crawl spaces or other confined spaces?

Ans: This hazard/activity is not applicable to our scope of work.

27. <p>Are your employees EVER required to operate or work from boom lifts, scissor lifts, aerial lifts, or other mobile elevated work platforms?</p>

Ans: This hazard/activity is not applicable to our scope of work.

28. Do your employees ever work in places where asbestos-containing material could be present?



Ans: This hazard/activity is not applicable to our scope of work.

29. Are any of your employees required to possess a first-aid or CPR training certification?

Ans: Yes

30. Do your employees ever work in places where lead-based paint or lead-containing materials could be present?

Ans: This hazard/activity is not applicable to our scope of work.

31. Are your employees required to possess a hazardous waste removal license?

Ans: NA

Advanced Initiatives

1. Does your company have a 'return to work' program for employees who have been injured?

Ans: Yes

2. Does your company have a substance abuse policy that prohibits drug and alcohol use?

Ans: Yes

3. Does your company require candidate employees to submit to a drug test before being hired?

Ans: Yes

4. Does your company perform drug and alcohol testing following EVERY employee work-related injury or accident?

Ans: Yes

5. Does your company have a reasonable suspicion drug and alcohol testing program?

Ans: Yes

6. Is your company a member of the OSHA VPP program?

Ans: No

7. Is your company a member of the SHARP program?

Ans: No

8. Is your company a participant of the OSHA Partnership Program?

Ans: No



9. Does your company have an infection control plan that addresses local outbreaks and pandemics?

Ans:

10. Have any updates been made to your company's safety programs, policies, procedures, or management systems?

Ans: No

11. Annual Safety Program Update

Ans: check-this-box-to-confirm-that-your-company-s-most-recent-safety-programs-policies-procedures-and-management-systems-have-been-uploaded-to-highwire-

12. Select 'Agree' below to acknowledge that all safety policies, procedures, and documentation uploaded into the Highwire applications are accurate, were developed in substantial part by your company personnel, and fairly represent how your business will operate at your client's sites, projects, and facilities:

Ans: Agree

13. Identify the most recent revision date for the safety policies and procedures uploaded in Highwire:

Ans: