**COMPETENT PERSON DESIGNATION FORM**

An evaluation has determined that the person named below has knowledge of the systems, equipment, conditions and procedures, proper use, inspection, manufacturer’s recommendations and instructions and maintenance for the activities designated below. Consequently, this person has been designated as a “Competent Person” per OSHA guidelines and delegated the responsibility of and authority for coordinating activities and operations covered by the designation(s).

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Competent Person Designation(s):**

Check as Appropriate

|  |  |
| --- | --- |
| * Lead Abatement | * Scaffolds |
| * Aerial Lift Trainer | * Fall Protection |
| * Ladder | * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Credentials Reviewed and Verified for Designation:**

* Formal training (describe, with year completed)  
  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Years of Experience (give number of years)  
  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Union Apprenticeship
* On-the-Job Performance
* Informal Training (describe)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signatures:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Competent Person Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Superintendent/Supervisor Date*

1926.32(f)

"Competent person" means one who is capable of identifying existing and predictable hazards in the surroundings or working conditions which are unsanitary, hazardous, or dangerous to employees, and who has authorization to take prompt corrective measures to eliminate them.

**COMPETENT PERSON DESIGNATION FORM INSTRUCTIONS**

Review the statement at the top of the competent person designation form.

**Employee Information:**

Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Competent Person Designations:**

Check the box to indicate which area(s) the employee is being designated as a “Competent Person.” *NOTE – more than one box may be checked.*

**Credentials Reviewed and Verified for Designation:***(Completion of this section is mandatory. Be as detailed as possible and list specifics)*

* Review and verify the credentials of the employee.
* List any applicable formal training in the space provided.
* List the number of years of experience the employee has relevant to the Competent Person designations marked above.
* Check the appropriate box if the employee has completed a union apprenticeship.
* List any applicable informal training.
* Check the appropriate box if the designation is based on “On-The-Job” Performance.

**Standards and Practices Training:**

*(Completion of this section is mandatory.)*

* Ensure the employee has read the relevant standards and practices governing the designations marked in the sections above.
* Ensure the employee fully understands the roles, responsibilities and authority he/she will be expected to execute.

**Signatures:**

* The Competent Person must sign and date the form accepting the responsibilities associated with the designations.
* The employee’s foreman, general foremen or superintendent should sign and date the form acknowledging the designation. (This signature is not mandatory.)

**Background:**

1. Competent Person is a specifically defined designation from the federal OSHA standards, and MUST NOT BE CONFUSED with a person who is competent (proficient and/or trained) to perform a job/activity.
2. Competent Persons must be designated for the following tasks/activities:

|  |  |
| --- | --- |
| * Excavation, Trenching and Shoring * Scaffold Erection and Inspection * Lead Abatement * Ladder Inspection (portable) * Safety Monitor (roof) * Demolition (large scale) | * Aerial Lift Trainer * Asbestos Abatement * Steel Erection * Fall Protection - Use Trainer * Fall Protection - Equipment Inspection and Trainer |

1. A Competent Person designation is predicated on an individual being exceptionally well qualified in his/her subject area, and NOT SIMPLY training, education, experience, or on-the-job training in/of himself or herself.
2. A Competent Person must demonstrate he/she is (a) highly knowledgeable on the subject and (b) capable of using consistently good judgment in carrying out the appointed responsibilities in the subject area; one may be competent, and not be a Competent Person.
3. We should LIMIT THE NUMBER of Competent Persons to no more than three per craft, per subject area, per project – less if possible/appropriate. An exception may be in the subject areas such as excavation, trenching and shoring, and scaffold inspection.
4. In most cases, a Competent Person should be considered Competent from one project to another.