

J. Banicki Construction, Inc. 4720 E. Cotton Gin Loop, STE 240 Phoenix, AZ 85040

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DESIGNATED COMPETENT PERSON FORM

Company Name:		Date:	
Job Name:			
	ditions which are unsanitary	, hazardous, or dangerous to e	g and predictable hazards in the mployees, and who has
Provide the name of the per job.	son who will be onsite and	designated as your company's	s "competent person" for this
Name:		Title:	
Phone Number:			
These regulations require a competent person for the ta		form that task. If applicable, pl	ease list your company's
Activity	Name of Designated Competent Person	Activity	Name of Designated Competent Person
Trenching & Excavation _		Electrical _	
Scaffolding _		Demolition	
Fall Protection _		Forklift Operator	
Other ()			
Designated by:	Nama		Titla
	Name		Title
Signature:		Date:	
Provide the contact informa	tion for your company's co	porate Safety representative:	
Name:	Phone Number	: Email	:

A completed copy of this form must be submitted with your Job Hazard Analysis (JHA) prior to the start of work.