



Tri-Energy Services Ltd.
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ELEVATED WORK FALL PROTECTION PLAN

Effective Date 2026-Aug 13 Form#: 20260811-0010 Rev 2.0 Page 1 of 2

PROJECT INFORMATION:

Date:	Prepared By:	Jobsite:
Work Location:	Working Height: 10-20 ft Over 20ft	Permit #:
Job Scope: (e.g., erecting scaffold, roof work, elevated platform work):		
Policies Reviewed: ☐ Tri-Energy Fall Protection Policy ☐ Site Specific Fall Protection Policy		
Fall Hazard Identification: Describe why fall protection is required and identify all hazards present. Hazards may include: Unprotected edges, Openings Sloped surfaces, Objects or equipment below the worker, Insufficient clearance, Swing-fall potential. Reason for Fall Protection:		

Fall Protection System Selection: Check all equipment used and record anchor locations and strengths.	Anchor Systems: Minimum anchor strength must meet 22 kN (5,000 lb) or be certified by a professional engineer.																																																		
<table><tr><td>Full Body Harness</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td>Shock Absorber</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td>Double Lanyard</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td>Single Lanyard</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td>Vertical Lifeline</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td>Retractable Lanyard (SRL)</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td>Harness Leg Loops</td><td>☐ Yes</td><td>☐ No</td><td>☐ N/A</td></tr><tr><td colspan="4">Other (Specify): _____</td></tr></table>	Full Body Harness	☐ Yes	☐ No	☐ N/A	Shock Absorber	☐ Yes	☐ No	☐ N/A	Double Lanyard	☐ Yes	☐ No	☐ N/A	Single Lanyard	☐ Yes	☐ No	☐ N/A	Vertical Lifeline	☐ Yes	☐ No	☐ N/A	Retractable Lanyard (SRL)	☐ Yes	☐ No	☐ N/A	Harness Leg Loops	☐ Yes	☐ No	☐ N/A	Other (Specify): _____				<table border="1"><thead><tr><th>Anchor #</th><th>Location</th><th>Strength (lbs)</th></tr></thead><tbody><tr><td>1.</td><td></td><td></td></tr><tr><td>2.</td><td></td><td></td></tr><tr><td>3.</td><td></td><td></td></tr><tr><td>4.</td><td></td><td></td></tr><tr><td>5.</td><td></td><td></td></tr></tbody></table>	Anchor #	Location	Strength (lbs)	1.			2.			3.			4.			5.		
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Rescue Plan:

A rescue plan is mandatory for all fall protection systems.

Rescue Type:

- Self-Rescue
- Aerial Platform Rescue
- Man-Basket Rescue
- Technical Rescue (Attach full rescue plan)

Rescue Procedure Requirements

Include:

- Step-by-step rescue method:
- Communication plan:
- Equipment required:
- Personnel involved:
- Estimated rescue time:

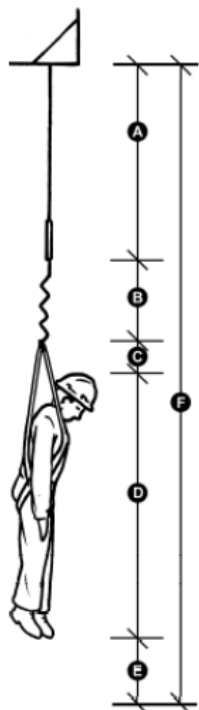
Rescue Procedure Description:

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Clearance Calculations



Add **A + B + C + D + E** to determine minimum distance from anchor points to the nearest surface or object below the worker.

A: Length of the lanyard

B: Full extended length of shock absorber (*typically 1.1 m / 3.6 ft or 1.75 m / 5.7 ft*)

C: D-ring slippage and harness stretch (*typically 1 to 1.5 feet*)

D: Height of workers D-ring from foot level

E: Swing-fall distance (*if worker is not directly below anchor*)

F: Clearance required (*total length from fall anchor to bottom of feet*)

Actual distance to surface or object below:

_____ To the ground _____ To Other object _____ To lower level:

Note: Distance must be greater than "F" or the worker will hit the ground, surface, or object. If "F" is greater than actual distance, consider locating a different anchor point or personal fall protection equipment to lower "F".

Plan Review, Training & Rescue Team Identification

Date	Name	Company	Signature	Fall Pro Trained?	Rescue team?

7. Required Accompanying Documentation

This plan must be supported by the following: Job Hazard Assessment (JHA), Harness & equipment inspection records, technical rescue plan (if applicable), manufacturer or engineering drawings/procedures, proof of fall protection training

Note: This plan must be task-specific but may be reused for similar tasks within the same parameters.