

U.S. Army Corps of Engineers (USACE)

SITE SAFETY & HEALTH OFFICER (SSHO) DESIGNATION LETTER

For use of this form, see EM 385-1-1; the proponent agency is CESO.

Purpose: This document designates personnel responsible for overseeing and ensuring the implementation of the prime contractor's Safety & Occupational Health (SOH) program. This designation letter will be signed by the company's official responsible for the SOH program (e.g., *Corporate Safety Manager*).

Submit the following documentation to the Government Designated Authority (GDA) as part of the Accident Prevention Plan: 1) This signed SSHO Designation Letter (Eng Form 6282); 2) An instructor-signed OSHA 30-hour card (or course completion certificate if within 90 days of completing the OSHA 30-hour training); and 3) proof of 24 hours of competency of SOH training within the last 3 years.

PART I: COMPLETED BY COMPANY'S SOH PROGRAM OFFICIAL

1. Project Name _____ 2. Contract Number _____

3. Location _____

4. The designated SSHO on this form meets the minimum EM 385-1-1 training and experience requirements for the selected level below and is knowledgeable of the SOH requirements for this project and has the authority to stop work when required.

SSHO Level	OSHA 30-Hour	Competency Training	Experience
<input type="radio"/> Level 1	Construction or General Industry	24 hours of documented formal classroom or online SOH-related training within the past five years and must maintain competency by taking 24 hours every three-year period for the duration of the contract.	5 years of cumulative safety experience, within the last ten years, managing or implementing a SOH program on projects similar in industry type, size, and complexity as the project described in the contract scope of work.
<input type="radio"/> Level 2	Construction or General Industry	24 hours of documented formal classroom or online SOH-related training within the past five years and must maintain competency by taking 24 hours every three-year period for the duration of the contract.	3 years of cumulative safety experience, within the last 10 years, managing or implementing a SOH program on projects similar in industry type, size, and complexity as the project described in the contract scope of work.
<input type="radio"/> Level 3	Qualified or Competent Person		

5. Summary of required safety experience:

By my signature below, I certify that the information I provided on this form is true and correct to the best of my knowledge.

Company SOH Official Name _____ Company SOH Official Title _____

Company SOH Official Signature _____ Date _____

PART II: COMPLETED BY DESIGNATED SSHO

SSHO Name _____ Date _____ SSHO Signature _____