



# 10-Hour Construction Training Class

February 20th & 21st

**Time:** 8:00 AM to 4:00 PM

Second day until noon

**Place:** Access Compliance

**Cost:** \$275.00 per person

**ACCESS COMPLIANCE, LLC.**

**776 A WATERVLIET-SHAKER RD**

**LATHAM, NY 12110**

**Phone: 518-782-2200**

**Fax: 518-218-9245**

**Email: info@accesscompliance.net**

**www.accesscompliance.net**

## **For more information :**

**Please contact Brenda via phone or email.**

**Access Compliance enjoys the challenge of working with individual companies to create programs specific to a variety of industries.**

**Access Compliance is proud to be a**

- **Veteran Owned Business**
- **New York State Woman Owned Business Enterprise, NYSWOBE #53310**
- **National Women's Business Enterprise, WBENC #2005121673**
- **Woman Owned Small Business WOSB #180165**



Veteran Owned Business



The OSHA Outreach Training Program for the construction industry provides training for workers and employers on the recognition, avoidance, abatement and prevention of safety and health hazards in the construction industry. The training also provides information regarding workers' rights, employer responsibilities and more.

**What this 2-day course will include:** Includes mandatory instruction on: Introduction to OSHA, OSHA Focus Four Hazards (Falls, Electrocution, Struck-By, and Caught-In or Between), Personal Protective and Lifesaving Equipment, and Health Hazards in Construction. The balance of the 10-hour Construction Training will cover a few of the following topics, but not limited to: Excavations, Material Handling, Scaffolds, Stairways and Ladders, and Silica.

**All students upon successful completion will receive an OSHA outreach card.**

<b>10-HOUR CONSTRUCTION TRAINING</b>	<b>\$ 275.00</b>
<b>NAME:</b>	<b>PER PERSON</b>
<b>COMPANY:</b>	
<b>STREET ADDRESS:</b>	
<b>CITY, STATE, ZIP:</b>	
<b>TELEPHONE #:</b>	<b>FAX #:</b>
<b>EMAIL ADDRESS:</b>	
<b>ADDITIONAL ATTENDEES:</b>	
<b>CHECK ENCLOSED – PAYABLE TO ACCESS COMPLIANCE, LLC</b>	
<b>CARD #</b>	<b>ACCOUNT #</b>
<b>NAME OF CARDHOLDER:</b>	
<b>EXPIRATION DATE:</b>	<b>TOTAL CHARGE AMOUNT:</b>
<b>SECURITY CODE:</b>	
<b>BILLING ADDRESS:</b>	
<b>SIGNATURE:</b>	