



April 1, 2020

To: Respected Client, Trade Contractors, Vendors, et al.,

Re: Coronavirus (COVID-19) Active Screening

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PCL is committed to maintaining a safe workplace for everyone. Considering the recent Coronavirus (COVID-19) developments, effective immediately access to the worksite is limited.

PCL will be implementing an active screening process on all of our projects. Only individuals who complete and pass the active screening requirements will be permitted access to the project site.

Individuals who have shortness of breath, cough, sore throat, fever or other flu-like symptoms will not be permitted on site. They should in turn notify their supervisor and contact their medical provider.

This requirement applies to anyone accessing a PCL project site including; PCL employees, craft workers, subcontractors, vendors, visitors and clients.

Active screening will be conducted before the start of each shift, near or at the entrance of the project site. Each individual will be required to;

- read and respond to the questions on P-01, Coronavirus (COVID-19) Screening Poster, and
- have their temperature taken with a non-contact thermometer.

If you have any questions, please contact your project management or one of the undersigned for clarification.

Yours Truly,

**PCL Construction Services, Inc.**

Aaron F. Wiehe  
Vice President & District Manager

Tyler Kautz  
Operations Manager

Jason Davidson  
District HSE Manager

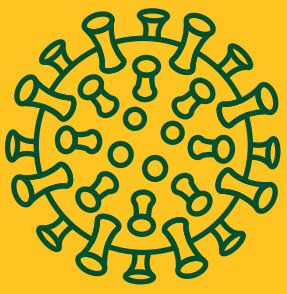
Attachment; Coronavirus (COVID-19) Site Access Questionnaire poster

**PCL Construction Services, Inc.**

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*PCL IS AN AFFIRMATIVE ACTION, EQUAL OPPORTUNITY EMPLOYER MINORITIES/FEMALE/DISABILITY/VETERANS*



# CORONAVIRUS (COVID-19) SITE ACCESS QUESTIONNAIRE



**PCL IS COMMITTED TO MAINTAINING A SAFE WORKPLACE FOR EVERYONE.**

In light of recent Coronavirus (COVID-19) developments, effective immediately, access to the worksite is limited.

**ONLY WORKERS WHO ANSWER NO TO ALL THE QUESTIONS MAY BE PERMITTED ACCESS.**

## PROCEED HOME IF YOU:

- Are experiencing problems with breathing, have a cough or fever.
- Develop these symptoms while on site. **REPORT THIS TO YOUR SUPERVISOR IMMEDIATELY.**
- Answer 'yes' to any of the questions below.

**PLEASE READ QUESTIONS AND ANSWER THE BELOW.**

**IN THE PAST 14 DAYS, have you had any of the following Coronavirus (COVID-19) symptoms?**

<b>FEVER</b>	<b>YES / NO</b>
<b>SORE THROAT</b>	<b>YES / NO</b>
<b>SHORTNESS OF BREATH</b>	<b>YES / NO</b>
<b>COUGH</b>	<b>YES / NO</b>

**IN THE PAST 14 DAYS, have you had close contact with anyone who exhibited the above symptoms or tested positive for Coronavirus (COVID-19)?**

**YES / NO**

**IN THE PAST 14 DAYS, have you returned from travel outside of the United States?**

**YES / NO**

## SCREENING DECISION TREE:

