



LAMPTON-LOVE, INC

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**Date:** December 13, 2023  
**To:** All Branch Managers  
**From:** Kelly Meeks   
Safety Director  
**Subject:** Branch Office Monthly Safety Meeting – December 2023

Company policy requires that each branch office hold a minimum of one safety meeting each month with the documentation of the material covered and the attendance being recorded on the “Monthly Safety Meeting Minutes and Attendance Record” (see attached form). **Please detach the Monthly Safety Meeting Minutes and Attendance Record, fill it out and e-mail a copy to Lynn Mathis or LLSafety@lamptonlove.com. Please keep the original for your records.**

**NOTE: ONLY the Monthly Safety Meeting Minutes and Attendance Records are to be sent in.**

To assist you in complying with this requirement, the following subjects are for your Monthly Safety Meeting, for the month of December 2023. You may add topics, but please document the following topics:

#### **Placement of Tank**

It is recommended that you thoroughly read this material prior to your meeting.

**It is strongly recommended that you use the 3-ring binder to store the last 12 months of the Safety Meeting Minutes and Attendance Record Form!!! This material should be referred to or used to train new employees from the website. This manual should be kept in an area of the office that is easily accessible to all employees.**

**Be Smart...Be Safe and Be Courteous!!!**



**PROPANE**  
EXCEPTIONAL ENERGY

# DECEMBER 2023 SAFETY MEETING

## Placement of Tank

Whether we are acquiring a new customer or delivering to an existing customer, **all drivers and service techs** should verify that tanks are set correctly (proper clearance, etc.) and generators are set properly (proper exhaust clearance and/or distance from propane tank, etc.).

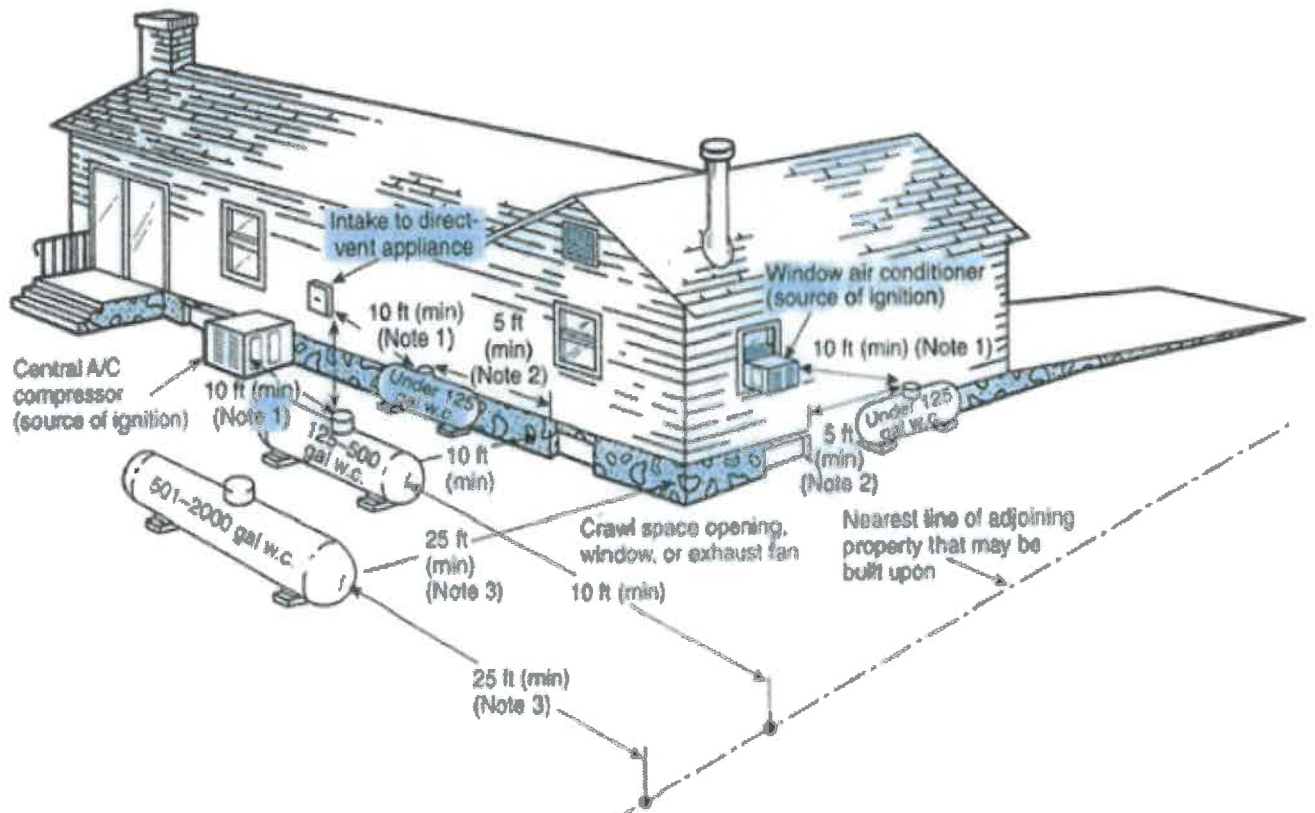
If a tank appears too close to a house, **DO NOT GAS IT.**

Rule of thumb: all tanks should be 10' from a source of ignition (Central or window A/C, Electrical outlet, Electric meter, hot tub motor, pool filters, gas grill, and solar equipment)

Generator should be placed **at least 5 feet from any opening like doors,**

Aboveground ASME containers.

Must have legible Data plate:



**DECEMBER 2023**  
**MONTHLY SAFETY MEETING**  
**MINUTES & ATTENDANCE RECORD**

**Company Name:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Time Started:** \_\_\_\_\_ **Time Finished:** \_\_\_\_\_

**Instructed By:** \_\_\_\_\_ **Number Attending:** \_\_\_\_\_

**Subject Covered and Comments:** Safety Meeting:

|                          |
|--------------------------|
| <b>Placement of Tank</b> |
|                          |
|                          |
|                          |

**By my signature below, I certify that I attended and participated in this Safety Meeting, and I understand the material presented.**

| Employee Name (Please print) | Employee Signature | License Expires * | Endorsements** | DOT Physical Expires*** |
|------------------------------|--------------------|-------------------|----------------|-------------------------|
| 1.                           |                    |                   |                |                         |
| 2.                           |                    |                   |                |                         |
| 3.                           |                    |                   |                |                         |
| 4.                           |                    |                   |                |                         |
| 5.                           |                    |                   |                |                         |
| 6.                           |                    |                   |                |                         |
| 7.                           |                    |                   |                |                         |
| 8.                           |                    |                   |                |                         |
| 9.                           |                    |                   |                |                         |
| 10.                          |                    |                   |                |                         |
| 11.                          |                    |                   |                |                         |
| 12.                          |                    |                   |                |                         |
| 13.                          |                    |                   |                |                         |
| 14.                          |                    |                   |                |                         |

*\*List driver's license expiration date in this column.*

*\*\*Check licenses for proper endorsements and re-testing (For example: "HazMat") List endorsements in this column.*

*\*\*\*List DOT physical expiration date in this column.*

By my signature below, I hereby certify that the employees listed above have been trained in accordance with the applicable regulation and curriculum for this monthly safety meeting.

**Instructor's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**E-Mail or fax this sheet only to: Lampton-Love, Inc. to:**

**Kelly Meeks/Lynn Mathis -- LLSafety@lamptonlove.com**

P. O. Box 1607, Jackson, MS 39215-1607

Fax #:601-933-3417