Subcontractor Name:       Project Title and Subcontract Number:

Description of planned activities/tasks for the scope-of-work for the entire project.

|  |  |  |
| --- | --- | --- |
| Hazard / Regulatory Requirements | ES&H Clause | Worker Information and Requirements |
| Blocked Walkways | Prior to the commencement of any on-site work, Seller shall develop a traffic flow plan to ensure personnel are provided with adequate notification of walkway closure and an adequately identified detour. The Seller shall submit the plan to the ORNL Technical Project Officer for review and approval. The Seller must ensure adequate signage and barricades are used to prevent unauthorized entry. | Workers shall ensure they use traffic cones and signs to inform site personnel of block walkways.  Workers shall determine if alternate routes are needed and notify the Technical Project Officer as soon as possible.  Workers shall ensure they were safety vests and wear appropriate PPE for weather conditions.  Workers shall contact LSS Office (865.576.4LSS) in the event of an accident.  Workers shall provide required documentation to the COMPANY’s Technical Project Officer (TPO) prior to starting any work on-site. |

**Subcontractor Activity Hazard Analysis (AHA)**

| Activity | Hazard | Controls |
| --- | --- | --- |
|  |  | **Elimination, substitution, engineering controls**:  HEPA-Filtered vacuum cleaner  Laboratory hood or glove box  Air Handler, HEPA filtered  Shrouded tool with HEPA filter  Continuous wetting (dust control)  Containment  Isolation  General Ventilation  Other Local Exhaust System:  Other: Specify below |
| **Administrative controls** (work methods, training, medical, etc.): |
| **Personal protective equipment** - specify the exact type of PPE (e.g. hearing protection device with minimum NRR of 20 dBA, Ansell Nitrile SOL-VEX gloves, etc.): |

AHA Author:       Date:

|  |
| --- |
| Technical Procurement Officer (TPO) signature indicates approval of activity-specific hazard controls identified in the subcontractor AHA. It is recommended that the applicable Qualified Health and Safety Professional (QHSP) be consulted, when the TPO is unfamiliar with the hazard, to assist in reviewing the adequacy of controls specified in this document.  Printed Name/Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_ |