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 |
| Poisonous Plants & Animals | Prior to the commencement of any on-site work: The Seller shall identify personnel with known insect allergies prior to beginning work. The Seller shall train personnel to identify common poisonous plants such as poison ivy and poison oak and identify how reactions occur. Require all personnel working with poisonous plants to wear appropriate PPE to prevent contact. During any on site work, Seller shall avoid contact with all snakes and animals. | Worker shall receive training to identify common poisonous plants and how to identify when reactions occur prior to beginning work.  Worker shall wear personal protective equipment specified in the AHA.  Worker shall apply barrier creams to exposed skin and use insect repellent.  Worker shall be aware of poison ivy, poison oak and sumac plants. Worker shall identify and inform others when poisonous plants are encountered in the work area.  Workers will inform their companies supervisor of known insect allergies prior to beginning of work. |

**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\_\_\_\_\_\_\_\_\_\_\_\_\_ |