Subcontractor Name:       Project Title and Subcontract Number:

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

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| Hazard / Regulatory Requirements | ES&H Clause | Worker Information and Requirements |
| Transportation  10 CFR Part 71  DOE Order  414.1D  TDEC 0400-12-01-.01 | It is the seller's responsibility to ascertain and comply with all applicable Federal, State, Local and multi-jurisdictional laws, ordinances, and regulations pertaining to the registration, licensing, handling, transportation, packaging, management, processing, resale and disposal of Solid and/or Hazardous Waste materials under this Agreement. These federal, state, and local laws include but are not limited the Resource Conservation and Recovery Act; the Hazardous Materials Transportation Regulations; the Federal Motor Carrier Safety Regulations; the Tennessee Motor Vehicle Laws Annotated; the Emergency Planning and Community Right-to-Know Act, and TDEC (Tennessee Department of Environment and Conservation) Rule Chapter 0400-12-01-.01. The Seller shall provide written proof of registration, licensing, insurance, or other requirements upon request. | Workers shall ensure they are trained to transport materials by having complete Materials of Trade (MOT) training.  Workers shall ensure they use the appropriate PPE that is specified in the AHA.  Workers shall determine if hazardous materials are to be transported meet the criteria for materials of trade. Workers shall ensure Materials have been verified by Transportation Safety Compliance prior to transfer.  Workers shall contact the Transportation Safety Compliance Manager for assistance with hazardous materials or radiological materials. |

**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:

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| --- |
| 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\_\_\_\_\_\_\_\_\_\_\_\_\_ |