

Document Acquisition Request Form (DAR)

U.S. Department of Labor
 Employment Standards Administration
 Office of Workers' Compensation Programs



This form is used to request specific documentation regarding DOE employees and DOE contractor employees at DOE covered facilities under the Energy Employees Occupational Illness Compensation Program Act (EEOICPA). The DOE Operations Center will request the records specified by DOL from each facility. The facility will transfer the documentation onto a compact disc (CD) in electronic PDF format and forward the completed DAR form and CD directly to the requesting District Office.

Employee Information (Completed by DOL)			
1. Name (Last, First, Middle Initial)		2. Social Security Number	
3. Department of Energy Facility		4. Employer Name (If a subcontractor employee)	
5. Types of Records Being Requested (Completed by DOL)	6. Record Availability		
	Included on CD	Unavailable	
<input type="checkbox"/> Radiological Dose Records	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Incident Or Accident Reports	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Industrial Hygiene and Safety Records	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Pay and Salary Records	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Job Descriptions	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Medical Records	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Other: (specify)	<input type="checkbox"/>	<input type="checkbox"/>	
7. Site Specific Exposure Questions (Completed by DOL)			8. DOE Response
<i>Example: Was asbestos used in building X-333?</i>			
1. Do you have any classified documents regarding this employee we should be aware of?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
2.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
3.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
4.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
5.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
6.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
7.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Unk <input type="checkbox"/> Sup
9. Certification (Completed by DOE)			
By signing this form, the DOE is acknowledging that it has conducted a reasonable search of available records and that the information provided on this sheet and the electronic documentation provided on a compact disc (CD) or hard copy accurately reflects the results of that search.			
Print Name:		Telephone No: ()	
		Address:	
Signature:		Date:	

Instruction Sheet for the Document Acquisition Request (DAR)

Block 1: The Department of Labor (DOL) Claims Examiner (CE) completes this block by either typing or legibly writing the name of the employee using Last Name, First Name, and Middle Initial. The CE also lists a maiden name if known.

Note: Attach a copy of the EE-1/2 and EE-3

Block 2: The DOL CE types or legibly writes the Social Security Number (SSN) of the employee in this block.

Block 3: The DOL CE types or legibly writes the claimed Department of Energy (DOE) facility identified by the claimant on the submitted Employment History Form (EE-3)(i.e. Portsmouth Gaseous Diffusion Plant).

NOTE: If the claimant indicates employment at multiple DOE sites, a separate DAR Form is completed for each DOE site claimed.

Block 4: The DOL CE places the contractor or subcontractor name in this block if a subcontractor or contractor is identified on the EE-3 (i.e. Grinnell Corporation).

NOTE: If the claimant indicates employment at a DOE site with multiple subcontractors, a separate DAR Form is completed for each subcontractor.

Block 5: Types of Records Being Requested. The DOL CE determines from the case file documents (i.e. Occupational Health Questionnaire, EE-3, EE-4, medical evidence) which types of records are pertinent to the individual case and checks the appropriate block corresponding to the type of record needed.

Radiological Records: These documents are radiation exposure records based on readings from dosimetry badges or similar personal recording devices. They are generally taken at regular intervals over the employee's employment period.

Incident or Accident Reports specific to the employee: Any abnormal incidents or large plant accidental substance releases which effect the employee are documented in these types of documents (Safety and Security Records, unusual occurrence reports, off normal reports, effluent release information, Type A and Type B accident/investigation reports, etc).

Industrial Hygiene or Safety Records: Documents in these categories could contain periodical inspection reports for health and safety purposes pertaining to the employee (i.e. Occupational Injury Files, Investigation Records, Security Records, Individual Industrial Hygiene assessments, Health Hazard Inventories, etc).

Pay and Salary Records: These documents include an employee's pay, salary, any workers' compensation claim or other documents affecting wage. Examples of records that may contain this information include **but are not limited to** Official Personnel Files of Contractor Employees, Contractor Job Classification Manuals, Employee Awards Files, Notification of Personnel Actions, Classification Appraisals Files, Wage Survey Files and Unemployment Compensation Records.

Job Descriptions: These are descriptions of the various employment positions at the plant or site and the duties required to perform the job; they are employee specific.

Medical Records: Personal medical histories of the employee if that employee visited the plant infirmary (i.e. Health Unit Control Files, Employee Medical Folder, etc.).

Other. This category is reserved for any other documentation the CE may feel necessary to request on a claim specific basis which do not fit into any of the other six categories. If this category is checked and a specific request listed by the CE, DOE personnel may contact the DOL CE for clarification of the request if necessary.

Block 6: Record Availability. This block is completed by the DOE. The DOE DAR POC completing the form either checks the block "Included on CD" or check the block "Unavailable" depending on whether the DOE has any records related to that particular set of records. "Included on CD" also includes hard copy documentation in the event the DOE facility does not have imaging capability.

Block 7: Site Specific Exposure Questions. This block is completed by the DOL CE by posing specific toxic substance exposure questions to the DOE. These questions could be gleaned from the claimant's EE-3, other documents in the case file and/or the Occupational Health Questionnaire completed by the Resource Center and should be phrased in such a manner that DOE may provide a "yes or no" answer.

Block 8: DOE may check "yes" or "no" to each site specific question posed by the CE. If DOE cannot confirm the question either way, the DOE indicates that they have insufficient documentation to make a decision on the question by selecting the "unknown" block. There may be times the DOE may want to attach relevant documentation which may clarify an answer in this section. In this case, the DOE DAR POC checks "sup" (supplemental). This will signify additional documentation is attached to the DAR Questionnaire regarding that particular question.

Block 9: This block is completed by the DOE DAR POC certifying the results of the records search. The DOE DAR POC prints his or her name, address and telephone number on the form and signs and dates it in the appropriate spaces. Prior to certifying the results of the records search, the DOE ensures that any clarification regarding the types of records DOL is requesting should be made with the requesting DOL CE.