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MONITORING PERIOD

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PUB ACRES, APIH-PNU-R, M/S-17

FORT LENIS NA 95433-9500

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WA 98433-3500 FROM

COL H DISCHARGE NUMBER

YEAR MO. DAY

NAJOR (SUBR 03) F - FIMAL

WASTEWATER FACILITY SULD POINT

*** NO DISCHARGE |___ | ***

NOTE: Read Instructions before completing this form

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PUBLIC HORKS AFZH-PHU-R M/8-17

FORT LEWIS CHUY DEFENSE, ARNY

CATIONFORT LEWIS

WA 98403-9500

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NA 98433-9500FROM

WACCZI.
PERMIT NUMBER

CO1 A
DISCHARGE NUMBER

(SUBR 03) F - FINAL

NAJOR

WASTEWATER FACILITY SOLO POINT

*** NO DISCHARGE | ***

NOTE: Reed Instructions before completing this form.

FREQUENCY NO. PARAMETER **QUANTITY OR LOADING** SAMPLE QUALITY OR CONCENTRATION EX TYPE ANALYSIS UNITS AVERAGE MAXIMUM MINIMUM MAXIMUM UNITS **AVERAGE** ITRUBEN, WEIRATE ***** * * * * * * * * SAMPLE **** 化水流火流流 (19) STAL (AS R) MEASUREMENT 0620 1 0 0 PEAMIT 五年安女 对任死 FFLUENT SPOSS VALUEREQUIREMENT 经存货的 MG/L TIRUBER, KJELDAHL (13)SAMPLE **** * 4 4 4 4 4 4 *** ITAL (AS N) **MEASUREMENT** 0625 1 0 0 PERMIT · REPUBLI FFLUENT GROSS VALUE REQUIREMENT and the ar 图像刀上 EURL UCLIFURM, MYR. SAMPLE * * 4 4 4 4 (13) 3 MED, 44.50 MEASUREMENT 1615 1 0 0 "其母母母母子 WALL STATE PERMIT FLUENT GROSS VALUE REQUIREMENT WELVE GEO! MOGEO 100%L स ने से से से से JOH. IN CONVUIT OF रेल ते ते ते ते * * * * * * SAMPLE INU TREATMENT PLANTIMEASUREMENT 050 1 () 0 1.15:2 PERMIT FLUENT GROSS VALUE REQUIREMENT NO DEE 法法法法 MSD # # # # # # IECKINE : TUTAL SAMPLE SIDUAL MEASUREMENT APARKAR A + + + :060 i 0 0 PERMIT FLUENT BROSS VALUEREQUIREMENT MEZL 237 IT. JOBERT PERCENT SAMPLE MOVEL MEASUREMENT 010 K 0 0 预告告诉 PERMIT **有我 龙 爪林以** CENT RCENT REMOVAL REQUIREMENT *** tibs, suspended SAMPLE RCENT REMOVAL MEASUREMENT 011 K 0 0 ER-PERMIT **有限 岩 水性**以 CENT RCENT REMOVAL 2 2 2 2 REQUIREMENT ME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE ·DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. SIGNATURE OF PRINCIPAL EXECUTIVE I am aware that there are significant penalties for submitting labe information, NUMBER OFFICER OR AUTHORIZED AGENT YEAR MO DAY including the possibility of fine and imprisonment for knowing violations. TYPED OR PRINTED

MENTS AND EXPLATION OF ANY VIOLATIONS (Reference all attachments here)

Reported ON JUNE & DEC DMRS

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YEAR MO. DAY

HUE ELIMINATION SYSTEM [NPUES]

001 A

YEAR MO. DAY

MAJOR

(SUBR 03)

F - FINAL

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ACILITY DEFENSE, ARMY

MATIONFORT LEWIS

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LANSE

MORKS, AFZH-PHU-R, M/S-17

FORT LEWIS

WR 98433-9500

WA 98433-9500 FROM

PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD

*** NO DISCHARGE | | ***

NOTE: Reed instructions before completing this form.

WASTEWATER FACILITY SOLO POINT

~ 6~~ b~? FREQUENCY NO. SAMPLE PARAMETER QUANTITY OR LOADING QUALITY OR CONCENTRATION TYPE ANALYSIS AVERAGE MAXIMUM UNITS MINIMUM **AVERAGE** MAXIMUM UNITS YURULHRBURS. ***** *** ***** 11 1 2 2 2 2 2 2 (19) SAMPLE ETROLEUM MEASUREMENT 2180 1 0 PERMIT FFLUENT GROSS VALUEREOUREMENT * * * * MG/L SAMPLE MEASUREMENT PERMIT. REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT TELEPHONE DATE ME/TITLE PRINCIPAL EXECUTIVE OFFICER prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. SIGNATURE OF PRINCIPAL EXECUTIVE I am aware that there are significant pensities for submitting faire information. YEAR MO OFFICER OR AUTHORIZED AGENT TYPED OR PRINTED including the possibility of fine and imprisonment for knowing violations. IMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference of attachments here)

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C MORKS, AFZH-PHU-R. H/S-17

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001 A DISCHARGE NUMBER nnuun (SUBR 03)

F - FINAL WASTEWATER FACILITY SOLO POINGS.

LEWIS. FACILITY ... ENSE, ARMY LOCATION FORT LEWIS

NA 38403-9500

Systems. NORMAL RANG

MONITORING PERIOD YEAR MO DAY YEAR MO DAY WA 38433-9500 FROM 2008 TO 2006 30

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IPA Form 3320-1 (Rev. 3134) Previous editions may be used.

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LIC MORKS.AFZH-PHU-R.M/S-17

KT LEWIS

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS

MA 38433-9500

WA 98433-9500 FROM

NUMBER

MQ DAY

MONITORING PERIOD

DISCHARGE NUMBER

YEAR MO. DAY.

(SUBR 03) F - FINAL

WASTEWATER FACILITY SOLO POINT

*** NO DISCHARGE ! ! ***

NOTE: Read instructions before completing this form.

PREQUERCY NO. PARAMETER SAME QUANTITY OR LOADING QUALITY OR CONCENTRATION EX TYP AHALYSIS AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS NITTOBER - NITRATE **** **** 3 7 7 7 7 7 SAMPLE (13) TOTAL (AS N) MEASUREMENT 00620 PEAMIT KEFURI EFFLUENT GROSS VALUEREOUREMENT 表表表表 MG/L WITKODEN. KJELDHHL نثن SAMPLE *** TOTAL (AS N) MEASUREMENT 00625 0 PERMIT EFFLUENT GROSS VALUEREQUIREMENT * * * * MG/L 工机机杆部 TECHL COLIFORA, MPN. 131 SAMPLE EC MED. 44.50 MEASUREMENT 31615 1 0 0 PERMIT EFFLUENT GRODS VALUEREOUREMENT MO GED HELY GED *** 100ML FLOW, IN CONDUIT SAMPLE THRU TREATMENT PLANTMEASUREMENT 50050 223 **** PERMIT EFFLUENT GROSS VALUE REQUIREMENT 化自由水 HOUSE MO AVG * MGD CHECKIRE, TOTHE A * * * * * SAMPLE RESIDUAL MEASUREMENT 50060 1 () PERMIT EFFLUENT GROSS VALUDITEDUREMENT DAILY MX MG/L 经营税价 BOD: 5-DAY PERCENT SAMPLE 86 REMAUAL MEASUREMENT ER-81010 K 0 0 * PERMIT WW Z ENG *** CENT PERCENT REMOVAL REQUIREMENT SOLIDS: SUSPENDED SAMPLE PERCENT REMOVAL MEASUREMENT 81011 K C O TEPER-PERMIT * * * * UMT. T. MM. CENT PERCENT REMOVAL REQUIREMENT i certify under penalty of law that this document and all attachments were NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manues the system. or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting faire information. SIGNATURE OF PRINCIPAL EXECUTIVE including the possibility of fine and imprisonment for knowing violations. NUMBER DAY YEAR MO TYPED OR PRINTED OFFICER OR AUTHORIZED AGENT COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attechments here)

** Reportation June F

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including the possibility of fine and imprisonment for knowing violations. TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all affectments here) FREE PEN & Reported with II Report / ANALYSIS OF EAT (TOU-GX-NO) - (NWTPH-DEXTENDED BY GC/FID-DIESE O, 12 / Luberil 1.19

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or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting faire information,

CC: OE / OF Halis & 4-part form.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

NUMBER

ADDITES	As,

ATTN:

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IC MORKS, OFZH-PMU-R, MAS-17

T LENIS

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS

MA 38433-3568

UMBER

YEAR DOM RABY

MONITORING PERIOD

DISCHARGE NUMBER

YEAR MO. DAY

70 Zade 12 31

(596R 03) F - FINAL

HASTEWATER FOCILITY JOLD POFRE

YAA NO DISCHARGE 1__1

NOTE: Read instructions before completing this form.

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ANALYSIS OF EFE (TBH-6x-DD)-(NOTPH-D EXTENDED CY GC/FID-Diesel 0.73/Lube oil 0.36mg? [TPH-6X-0.26]-(NOTPH-D EXTENDED LY GC/FIT Diesel 1.82-mgl/Luccio 0.72

ACSS (Inches Feethly Name Location V Different)

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SCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)

orm Approved. 418 No. 2010-0004

NAME

SE. ARMY

BG% 339500

PUBLIC MORKS, AFZK-PMU-R, M/S-17

WADOS PERMIT NUMBER DISCHARGE NUMBER

(BUBR 03) F - FINAL

MAJOR

MASTEMATER FACILITY SOLO POINT

FORT LEWIS FACILITY DEFENSE, ARMY LOCATION FORT LEWIS

WA 98433-9500

MONITORING PERIOD YEAR MO DAY TO YEAR MO DAY NA 98433-3500FADM

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PARAMETER		QU/	INTITY OR LOADIN	IG	QUALI	TY OR CONCENT	RATION	.] :		PREQUENCY OF	SAMP
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* MONI- Deta

ANATION OF ANY VIOLATIONS THEOGRAPHS - TOTAL SOLA'S (EVER) (TOTAL OPLITE SOLA'S (TO ACY) 65,7% - PH (7.6) - TRN (1200 mg) 15 N (410 mg)

(NH3 N 5388 my/kg) - TOTAL P (13700 mg/kg) - PESENIC (3.8 pro- kg) Leed (537 modes) (MERCIA MILLE MILLE) ZINC (1000 modes) (CARA (52.1 modes)

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BOX 223500

LIC MORKS, AFZH-PHU-R, M/S-17

AT LENTS

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS

N9 99403-9500

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4A 98433-9500 FROM

134 NUMBER

YEAR MO DAY

MONITORING PERIOD

TO

001 11 DISCHARGE NUMBER

YAR MO. DAY

MAJGR (SUOR 63)

F. - FINAL WASTEWATER FACILITY

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

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This is a 4-part form.

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OF

8PA Form 3320-1 (Re. 199) Previous editions may be used.

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HEIC HORRS, ACZH-PHU-R, M/S-17

RT LENTS

MA 08400 0500

NP 11 NUMBER DISCHARGE NUMBER

(8068 03) F - FINAL

NASTEWAYER PACILITY SOLE POINT

FACILITY DEFENSES ARMY

LOCATION FURT LENTS

HH 38430-3500FROM

MONITORING PERIOD

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NOTE: Read instructions before completing this fork

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

**Reported on June (Dec Dimes / Results Enon Feb ?

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OMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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DEPARTMENT OF THE ARMY

WESTERN REGIONAL MEDICAL COMMAND AND MADIGAN ARMY MEDICAL CENTER TACOMA, WASHINGTON 98431-1100

30 August 2006

MEMORANDUM FOR Chie	f, Public Works,	Utilities Division, \	Wastewater	Treatment
Plant, AFZH-PWU, ATTN:	(b)(6) , Buildin	g 7973, Fort Lewis	, WA 98433	
1				

SUBJECT: Industrial Hygiene Workplace Exposure Assessment (WEA) Review of the (b)(6) Wastewater Treatment Plant, Bldg 7500, Fort Lewis, WA 98433

- 1. The baseline WEA for Wastewater Treatment Plant, (WWTP) was completed on 19 April 2004. The Periodic WEA was accomplished by this service on 18 August 2006 in accordance with Title 29, Code of Federal Regulations (CFR), 2001 rev, Section 1960.25 (c), Qualifications of Safety and Health Inspectors and Agency Inspections. Any changes are noted below.
- 2. Current Personnel List: (b)(6) All of Public Works is being restructured. Note that personnel currently working in this area may change 1 October 2006.
- 3. Noise Exposure: Personnel working in this shop are not required to be monitored on the Hearing Conservation Program as stated in the initial workplace exposure assessment. Noise levels experienced by personnel in this section ranged between 75 and 92 decibels (A) weighting. Both plugs and muffs are available for workers use.
- 4. Chemical Use: Both MSDS binders are maintained in building 7500. They were reviewed and there have been no significant changes in chemical usage since the initial WEA. However, the MSDS binder in the common area did not have the required chemical inventory sheet.
- 5. Personal Protective Equipment: Personnel in this shop are provided with safety shoes, boots, rubber boots, rain gear, leather gloves, ear plugs, ear muffs, safety glasses, Carhartt bib overalls and coats. Face shields chemical goggles, rubber aprons and rubber gloves are available to protect workers from hazards of the job. All PPE was in good repair and sufficient to protect workers.
- 6. Ergonomics: Personnel working in this shop are not required to perform tasks which have the potential to cause work related musculoskeletal injuries. Management emphasizes proper lifting and handling methods. Multiple workers (buddy system) is used to perform duties where a potential exists to create an injury. No immediate concerns are noted at this time and practices appear to be working properly.



Exhibita 88

MCHJ-PV-IH

SUBJECT: Industrial Hygiene Workplace Exposure Assessment (WEA) Review of the (b)(6) Wastewater Treatment Plant, Bldg 7500, Fort Lewis, WA 98433

- 7. Existing Engineering Controls: Dilution Ventilation. In the initial inspection, laboratory hoods were addressed. Lab hoods are not used for any current analysis. They were used years ago when the lab performed oil and grease analysis, but this is no longer performed. Both hoods are still being calibrated by a contractor for future potential use.
- 8. Confined Space issues: There are 23 confined spaces at the WWTP (See Attachment 1.) Several of these were unmarked. DA Civilians do occasionally enter some of these spaces using an in-house permit system for inspection purposes after they have been cleaned and maintained. However air monitoring equipment to ensure the atmosphere is safe to enter without respiratory protection is not maintained at WWTP. This equipment should be available to WWTP workers at all times and must be calibrated routinely under the manufacturers recommendation. The permit should require monitoring the atmosphere prior to entry to ensure it is safe, and entry should not be conducted without adherence to the permit requirements. Also, WWTP Confined Space SOP was not on the premises during our visit. The Confined Space SOP should be maintained on the WWTP premises at all times.
- 9. Water Sampling: Sample collection is automated by a time integrated sampling device which fills a large sample container. This container is collected at midnight each night when it is approximately 2/3 full. There is very little chance of a splash hazard. All analysis is either gravimetric or through Hach pillow packet regents, so there is very low hazard from analytical processes in the Lab.
- 10. Pump maintenance and repair: Methylene chloride was listed as used in the 2004 report, but this is no longer used. It had been the greatest hazard in that operation.
- 11. Digester 3 (Gas Storage Unit) had a gas pipe break. This pipe transferred waste gases (primarily methane and Hydrogen Sulfide) from the digester to the boiler and waste gas burner. The pipe has a temporary repair by use of a flex hose. The boiler was effectively shut down and bypassed to reduce emissions of gas, but this still posses a potential hazard if the pressure becomes great enough to burst the flex hose. Repair of this pipe should be expedited. There is no SOP for such materials failures at the WWTP.

12. For further inquires please contact (b)(6) at 968-4345. /s/ (b)(6) CHEM Chief, Industrial Hygiene Service Department of Preventive Medicine

t 968-4344 or the undersigned

Confined Space Inventory Waste Water Treatment

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EXHIBIT 99

MEMORANDUM FOR Chief, Occupational Health, Preventive Medicine Service, Madigan Army Medical Center, Tacoma WA 98431

SUBJECT: Industrial Hygiene Workplace Exposure Assessment Review of the (b)(6) Wastewater Treatment Plant, Bldg 7500, Fort Lewis, Wa 98433

- 1. A copy of the subject workplace exposure assessment review is enclosed. This assessment was conducted to comply with Army Regulation 40-5, Preventive Medicine and is provided to help facilitate your medical surveillance program for employees who belong to the Similar Exposure Group; WS, WL and WG-4742 Utility Systems Repairer/Operator and GS-0404 Biological Science Laboratory Technician assigned to the PW Wastewater Treatment Plant.
- 2. If you have questions concerning the enclosed please contact (b)(6) at phone 968-3174 or the undersigned at 968-4331.

Chief, Industrial Hygiene Service
Department of Preventive Medicine

Encl as

Workplace Exposure Assessment (WEA) Review Directorate of Public Works Wastewater Treatment Plant 8 June 2005

The baseline WEA for the Wastewater Treatment Plant was completed on 19 April 2004. The annual WEA was completed by this service on 8 June 2005 in accordance with Title 29, Code of Federal Regulations (CFR) rev, Section 1960.25 (c), Qualifications of Safety and Health Inspectors and Agency Inspections. Any changes are noted below.

Personnel Assigned:

Name	Positic	10	Job Series
(b)(6)	Utility Systems Repairer	Operator/Supr	W§4742
(b)(6)	Utility Systems Repairer	/Operator/Ldr	WL4742
(h)(6)	Utility Systems Repairer	Operator	WG4742
(b)(6)	-Hilliy-Systems Repairer		WG4742
(b)(6)	Utility Systems Repairer	Operator -	WG4742
(b)(6)	Utility Systems Repairer	(Operator	WG4742
(b)(6)	Utility Systems Repairer	(Operator	WG4742
(b)(6)	Utility Systems Repairer	Operator	WC4742
(b)(6)	Utility Systems Repairer		WG4742
(b)(6)	Biological Science Lab		GS404

Noise: Personnel working in this shop should are not required to be monitored on the Hearing Conservation Program as stated in the initial workplace exposure assessment. Noise levels experienced by personnel in this section ranged between 75 and 92 decibels (A) weighting. Both plugs and muffs are available for workers use.

Chemical Use: There have been no significant changes in chemical usage since the initial WEA.

Personal Protective Equipment: Personnel in this shop are provided with safety shoes, boots, rubber boots, rain gear, leather gloves, ear plugs, ear muffs, safety glasses, carhartt bib overalls and coats. Face shields chemical goggles, rubber aprons and rubber gloves are available to protect workers from hazards of the job. All PPE was in good repair and sufficient to protect workers.

Ergonomics: Personnel working in this shop are not required to perform tasks which have the potential to cause work related musculoskeletal injuries. Management emphasizes proper lifting and handling methods. Multiple workers (buddy system) is used to perform duties where a potential exists to create an injury. No immediate concerns are noted at this time and practices appear to be working properly.

Occupational Surveillance Considerations: Occupational Vision Program

Existing Engineering Controls: Laboratory Hoods, Dilution Ventilation

Ione at this time		
	(b)(6)	
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•	Industrial Hygiene Techni	cian
	(b)(6)	
•		
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	Chief, Industrial Hygiene	a

EXHIBIT 100

MEMORANDUM FOR Chief, Occupational Health, Preventive Medicine Service, Madigan Army Medical Center, Tacoma WA 98431

SUBJECT: Industrial Hygiene Workplace Exposure Assessment Review of the (b)(6) Water and Sewer Shop, Bldg 7913, Fort Lewis, Wa 98433

1. A copy of the subject workplace exposure assessment review is enclosed. This assessment was conducted to comply with Army Regulation 40-5, Preventive Medicine and is provided to help facilitate your medical surveillance program for employees who belong to the Similar Exposure Group; WL and WG-4206 – Exterior Plumbers and WG-5716 – Equipment Operator assigned to the PW Water and Sewer Shop.

2. If you have questions concerning the enclosed please contact (b)(6) at phone 968-3174 or the undersigned at 968-4331.

Encl

as

Chief, Industr Hygiene Service
Department of Preventive Medicine

TILL IND

Workplace Exposure Assessment (WEA) Review Directorate of Public Works Water and Sewer Shop 1 June 2005

The baseline WEA for the Water and Sewer Shop was completed on 14 July 2003. The annual WEA was completed by this service on 14 May 2005 in accordance with Title 29, Code of Federal Regulations (CFR) rev, Section 1960.25 (c), Qualifications of Safety and Health Inspectors and Agency Inspections. Any changes are noted below.

Personnel Assigned:

	Name				Position		J	ob Series	
(b)(6)			2764	Exterio	r Plumber	, Leader	W	L4206-09	
(b)(6)				Ex	terior Plur	nber	W	G4206-09	- t/32
(b)(6)		. M. 12		Ex	terior Plur	nber	W	G4206-09	
(b)(6)				Exterio	r Plumber	, Helper	W	G4206-07	
(b)(6)				E gor	pment Op	erator	W	G5716-09	194

Noise: Personnel working in this shop should continue to receive annual audiograms as stated in the initial workplace exposure assessment. Noise levels experienced by personnel in this section ranged between 72 and 102 decibels (A) weighting. Both plugs and muffs are available for workers use.

Chemical Use: There have been no significant changes in chemical usage since the initial WEA.

Asbestos: Personnel are periodically exposed to cement asbestos while repairing water mains located across Ft Lewis. Exposure is limited and monitoring is not practical due to the limited unscheduled frequency. Repairs to water main are made using the wet method (dust control) and replacement pipe consists of C-900 PVC or steel pipe. See below for respiratory protection required.

Personal Protective Equipment: Personnel in this shop are provided with safety shoes, boots, rubber boots, rain gear, leather gloves, ear plugs, ear muffs, safety glasses, carhartt bib overalls and coats. Face shields and rubber gloves are available to protect workers from hazards of the job. All PPE was in good repair and sufficient to protect workers. Designated workers are required to wear respirators with P100 filters while performing work on cement asbestos pipe.

Ergonomics: Personnel working in this shop are not required to perform tasks which have the potential to cause work related musculoskeletal injuries. Management emphasizes proper lifting and handling methods. Multiple workers (buddy system) is used to perform duties where a potential exists to create an injury. No immediate concerns are noted at this time and practices appear to be working properly.

Occupational Surveillance Considerations: Hearing Conservation Program

Hearing Conservation Program Respiratory Protection Program Occupational Vision Program

Existing Engineering Controls: None required

Environmental monitoring / Sampling needed:

None at this time

(b)(6	3)
	Industrial Hygiene Technician
)/O)
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(b	b)(6)

EXHIBIT 101



DEPARTMENT OF THE ARMY MADIGAN ARMY MEDICAL CENTER TACOMA, WASHINGTON 98431

REPLY TO ATTENTION OF:

MCHI-PV-IH

7 Jun 2005

MEMORAND	JM FOR Director, Pul	olic Works, -ATTN:	AFZH-PW (b)(6)	, MS-17,
Fort Lewis WA				
SUBJECT: An	nual Workplace Expos	ure Assessment (WE	A), Water and Sew	er Shop, Bldg 7913
1 Premie	· 一个个个时,一个个时间是这个人的一个人的是是人的是是是是	provides findings SA	(b)(6)	
(b)(6)	performed an annua	WEA of the Water s	and Sewer Shop, Bl	dg 7913 on 14 May
2005. (b)(6)	provided info	rmation and assistance		

2. Background.

- a. IAW AR 385-10, Army Safety Program, industrial hygiene at the direction of the Surgeon General will provide technical guidance to Army Staff and the Army Medical Department in the evaluation and control of actual or potential occupational health hazards in Army work areas. WEAs are provided as a courtesy to commanders, supervisors, Safety and Occupational Health for use in the management of the Occupational Health Program.
- b. We performed a baseline Workplace Exposure Assessment (WEA) in 14 July 2003. The Priority Action Code (PAC) of 1 was based on hazard potential, and established the need for an annual review of this work site.
- c. During the WEA, we reviewed the findings and recommendations from the initial WEA survey and compliance with the following Occupational Health and Safety Administration (OSHA), and Department of the Army (DA) programs; Hearing Conservation, Hazard Communication, Confined Space, and Respiratory Protection. Significant findings and recommendations are listed below.

3. Findings...

a. Personnel working in this section are periodically required to repair water mains constructed of coment asbestos pipe. All cutting of the asbestos pipe is performed using the wet method for dust control.

MCHJ-PV-IH

SUBJECT: Annual Workplace Exposure Assessment (WEA), Water and Sewer Shop, Bldg 7913

- b. Personnel performing maintenance on asbestos containing material (cement asbestos water mains) have not received required asbestos training. Any repair or maintenance of ACM including thermal system insulation is classified as "class III" and can only be performed by personnel who have attended worker level asbestos training. IAW 29 CFR 1926.1101(k)(9)(v).
- c. Waste asbestos generated by repair of the water main is required to be disposed IAW proper waste disposal methods.

4. Recommendations.

- a. Designate specific workers to perform repairs on coment asbestos water mains. Use of a negative pressure respirator with a N100 filter will protect workers from potential airborne asbestos fibers.
- b. Schedule designated workers for aspestos workers training, (Contact (b)(6) for specific requirements and a source for training, (29 CPR 1926, 1101(k)(9)(v).
- c. Scheduled designated workers for (b)(6) testing through Occupational Health at 968-4048. (29 CFR 1910.134)
- d. Contact Industrial Hygiene for assistance in developing your required respiratory protection program at phone 968-4331. (29 CFR1910.134)
- e. Contac (b)(6)

 for guidence on waste disposal requirements following a water main repair.

We would like to thank you and your workers for their cooperation and assistance during this survey. If you have any questions or comments concerning this evaluation, please contact (b)(6) at 968-3174 or Chef Kahla at 968-4335.

Encl
as

Chief, Industri (Hygiene Service
Department of Preventive Medicine

CF.
Chief, M & R. (b)(6)
PW Asbestos Mgr. (b)(6)
Garrison Safety Office (b)(6)

MEMORANDUM FOR Chief, Occupational Health, Preventive Medicine Service, Madigan Army Medical Center, Tacoma WA 98431

SUBJECT: Industrial Hygiene Workplace Exposure Assessment Review of the DPW, Water Treatment Plant, Bidg 7973, Fon Levis, Wa 98433

1. A copy of the subject workplace exposure assessment review is enclosed. This assessment was conducted to comply with Army Regulation 40-5, Preventive Medicine and is provided to help facilitate your medical surveillance program for employees who belong to the Similar Exposure Group; WL and WG-5409 – Water Plant Operators assigned to the PW Water Treatment Plant.

2. If yo	jihave que	siions conce	orning the e	nclosed pleas	e contact (b)(6)	at phon
968-317	4 or the un	stions conce dersigned a	t 968-4331.			
 		HARLES		(b)(6)	and and	
	i chi					
L. andsex						
Engl "			70			
46					Industrial Hygiene	
18414	A A A A A A A A A A A A A A A A A A A			Depar	tment of Preventiv	e Medicine

Workplace Exposure Assessment (WEA) Review Directorate of Public Works Water Treatment, Shop 7 June 2005

The baseline WEA for the Water Treatment Shop was completed on 14 May 2003. The annual WEA was completed by this service on 14 May 2005 in accordance with Title 29, Code of Federal Regulations (CFR) rev, Section 1960.25 (c), Qualifications of Safety and Health Inspectors and Agency Inspections. Any changes are noted below.

Personnel Assigned:

	Name		Posifi	ion	Job Series
(b)(6)		W	ater Plant Opt	erator, Leader	WL5409-09
(b)(6)			Water Plant	Operator	WG5409-09
(b)(6)			Water Plant	Operator	WG 5409-09
(b)(6)			Water Plant	Operator	WG:5409-09
(b)(6)			Water Plant	Operator	WG 5409-09

Noise: Personnel working in this shop are still required to receive annual audiograms as stated in the initial workplace exposure assessment. Noise levels experienced by personnel in this section ranged between \$2 and 106 decibels (A) weighting. Both plugs and muffs are available for workers use.

Chemical Use: There have been no significant changes in chemical usage since the initial WEA. The laboratory flow hood meets the requirement of NFPA 45 for control of hazardous chemicals.

Personal Protective Equipment: Personnel in this shop are provided with safety shoes, boots, rubber boots, rain gear, leather gloves, ear plugs, ear muffs, safety glasses, earhard bib overalls and coats. Face shields and rubber gloves are available to protect workers from hazards of the job. All PPE was in good repair and sufficient to protect workers.

Ergonomics: Personnel working in this shop are not required to perform tasks which have the potential to cause work related musculoskeletal injuries. Management emphasizes proper lifting and handling methods. Multiple workers (buddy system) is used to perform duties where a potential exists to create an injury. No immediate concerns are noted at this time and practices appear to be working properly.

Occupational Surveillance Considerations: Occupational Vision Program

Existing Engineering Controls: Laboratory Flow Hood

Environmental monitoring / Sampling needed: None at this time

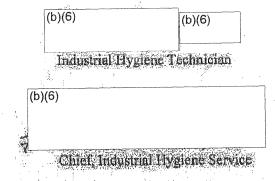


EXHIBIT 102



DEPARTMENT OF THE ARMY

INSTALLATION MANAGEMENT COMMAND UNITED STATES ARMY GARRISON, FORT LEWIS BOX 339500, MAIL STOP 1AA FORT LEWIS WASHINGTON 98433-9500

IMWE-LEW-SO

ATTENTION OF

MEMORANDUM FOR RECORD

7 May 2007

SUBJECT: Report of Hazard, Waste Water Treatment Plant Digester Arm

1. Last year, while I was on leave, the office received a phone	e call from a (b)(6)
(b)(6) expressing concerns over an event that had happen	ed there. Digester vent
arm broke off and fell onto digester. The initial response was (b)(6) who was acting safety director, and (b)(6)	handled by (b)(6)
who was acting safety director, and (b)(6)	who responded to the
site. spoke with (b) (b)(6) on my return to duty. There w	as no damage to digester,
but (b) stated that these hazards existed:	• **

- a. The permanent vent line on a swing arm was replaced with flex line lying on top of the digester. This line is the primary means of venting hazardous gases from the digester. The concern was that the flex line does not provide the same level of safety as the permanent swing arm and line.
- b. The supervisor had responded to the event, and had returned to do the work himself, but did not check in with Plant Operations per plant SOP. The hazard is that the plant is operating but the primary operator does not know there are people out working around the system.
- c. The supervisor failed to use non-sparking tools during repair work on digester. Flammable gases can be present in combustible concentrations.
- 2. (b)(6) assessed the hazards during his initial visit. He observed the broken arm lying where it fell, but posing no immediate further danger. Fort Lewis Fire had responded, and found no emergent medical or hazardous material situation. The flex line installation, though not a permanent design solution, seems to provide adequate, safe venting, and raises and lowers with the height of the digester as the system requires. (b)(6) spoke with the supervisor involved, who admitted that had not followed his own SOP regarding checking in and using non-sparking tools, but that be would observe SOP in the future.
- 3. There are no specific OSHA standards OSHA standards regarding waste water treatment plants. Rather, numerous individual different standards apply, such as the hazard communication standard (29 CFR 1910.1200), emergency response (29 CFR 1910.120), energy control, (29 CFR 1910.147), permit-required confined space entry (29 CFR 1910.146), and others. In this case, the supervisor did not follow the internal work control SOP, but there were no apparent residual violations of OSHA standards.

4.	POC this action is the undersigned	d, IMWE-LEW-SO, 253-967-6764.
	•	(b)(6)
		Senior Safety Director

EXHIBIT 103

Public Works, Fort Lewis		
ocedure: CONFINED SI Document ID: PWU-001	ACE ENTRY	
Document Owner:	Approval:	Revision: #1 Revision Date:
(b)(6)	(b)(6)	3/01/2007
Title: QUALITY CONTR SPECIALIST	OL Title: PROJECT MANAGER OPERATIONS &	Original Date: 01/07/02
OPERATIONS & MAINTENANCE DIVISIO	MAINTENANCE DIVISION N	

- 1. PURPOSE. To establish policies and procedures for Public Works Operations and Maintenance Division (PW O&M) implementation of the Confined Space Program in accordance with 29 CFR 1910.146 Permit Required Confined Spaces.
- 2. APPLICABILITY. This regulation applies to all PW employees, activities, and units, including sub-installations, under this directorate.

3. REFERENCES.

- a. 29 CFR 1910.146 Permit Required Confined Space.
- b. 29 CFR 1910.134 Respiratory Protection.
- c. 29 CFR 1910 Subpart Q Welding, Cutting, and Brazing
- d. 29 CFR 1910.147 Lockout/Tagout
- e. EM 385-1-1-6 Confined Space US Army Corps of Engineers Safety and Health Manual

4. BACKGROUND.

- a. Effective 15 April 1993 the Occupational Safety and Health Administration (OSHA) requires that employers develop and manage a program for Permit-required Confined Spaces (ref. a). This statutory regulation is applicable to government agencies by Executive Order 12196.
- b. The PW O&M Division Confined Space Entry program is intended to meet the above regulation and more importantly, to protect the safety of workers who may enter into confined Spaces by minimizing or eliminating the hazards related to such entries.
 - c. Definitions and abbreviations used in this regulation are located in the glossary.

5. GENERAL REQUIREMENTS.

- a. O&M Sections will evaluate each workplace to determine if they contain confined spaces and pern required confined spaces. Sections will also maintain an inventory of all of their confined spaces. The decision logic at Appendix A will assist you in evaluating a space to meet this requirement. Technical support is also available at Preventive Medicine Service, Industrial Hygiene Branch.
- b. If the workplace contains permit-confined spaces, then exposed employees will be informed, by posting danger signs (Appendix B) or by other effective means. Note that spaces that are locked or require the use of a tool to open do not require a danger sign (for example manholes do not require a sign because they require a tool to open.
- c. If the Section decides that its employees will enter confined spaces, it will implement the confined space entry program below.

6. CONFINED SPACE ENTRY PROGRAM.

- a. Entry Without Permit/Attendant. Confined spaces may be entered without the need for a written permit or attendant provided that:
 - (1) The space is determined not to be a permit required confined space, (Appendix A) or
- (2) The space can be maintained in a safe condition for entry by mechanical ventilation alone 'Note that any hot work or chemical use will introduce air contaminates into the confined space thus requiring a infined space permit);
- (3) All spaces will be considered permit-required confined spaces until pre-entry procedures demonstrate otherwise. By using the checklist at Appendix C and following the atmospheric test procedures at Appendix D, the lead worker will be able to determine if entry into the confined space requires a permit. If all questions are answered yes, entry into the confined space is authorized without the use of the confined space entry permit. If any of the questions on the checklist are answered "NO" the confined space will not be entered. The LEAD WORKER will do the completion of the checklist. This checklist will be kept at the job site for the duration of the job. If circumstances dictate an interruption in the work, then confined space must be reevaluated and a new checklist must be completed.
- (4) If an initial entry of the confined space is necessary to obtain the data required for safe entry, the entry will be in accordance with a <u>permit required confined space entry</u>;

b. Permit Required Confined Space Entry. (PRCS)

(1) All permit required confined space entries will have a written Safe Operating Plan (SOP) which specifies the parameters for safe entry. The minimum information for an acceptable SOP is contained in Appendix E.

- (2) With each Permit Required Confined Space Entry there must be an <u>Authorizing Supervisor</u>, * ttendant, <u>Authorized Entrant(s)</u> and <u>Detector Monitor</u>. Each will be trained and know the duties of their sition as specified in Appendix F. Note that the Supervisor and/or the Attendant can be the Detector Monitor.
- (3) Confined Space Training: All participants involved in a Confined Space Entry shall be trained by a Certified Confined Space Trainer.
- (a) Trained employees shall be individually issued a card (to be carried on their person), reflecting the type and date of official training completion.
 - (b) Training records shall be maintained (at a minimum), in a secure training database.
- (4) The Confined Space Entry Permit (Appendix G) must be completed before approval can be given to enter a permit required confined space. The authorized supervisor will complete the permit. This permit verifies completion of surveillance, testing, space ventilation, entry procedures, and rescue procedures. This permit must be kept at the worksite for the duration of the job. If circumstances cause an interruption in the work or change in the conditions for which entry was approved, a new Confined Space Entry Permit must be completed.
- (5) The surrounding area will be surveyed to avoid hazards such as drifting vapors from tanks, piping, or sewers. Pedestrian, vehicle, or other barriers will be used to protect entrants from external hazards.
- (6) The confined space atmosphere will be tested to determine whether dangerous air contamination and/or oxygen deficiency exits. A direct reading gas monitor will be used. The gas monitor shall be standardized throughout the organization. The authorized supervisor will perform air monitoring only after successfully completing gas detector training for their monitor (training by the monitor's manufacturer astitutes acceptable monitor training). The minimum parameters to be monitored are oxygen, LEL (Lower explosive Limit) and the specific toxic(s). The SOP and the entry permit will dictate the specific toxic to be monitored. When testing for atmospheric hazards, test first for oxygen, then for combustible gases and vapors, and then for toxic gases and vapors.
- (a) If the oxygen content (at sea level) is below 19.5% (oxygen deficiency) or above 23.5% (oxygen-enriched), the following will be done:
 - The oxygen will be increased or decreased by ventilation.
 - Following initial ventilation, the confined space will be re-tested; and if the atmosphere is still oxygen deficient or enriched the ventilating process will be repeated and the space re-tested.
 - If the oxygen deficiency or enrichment cannot be corrected by three vent re-test cycles the confined space will be closed and "DANGER" signs posted. The Industrial Hygiene Branch will then be contacted for further instructions
- (b) If flammable gas levels exceed 10% of the LEL, entry will not be made. The Authorizing Supervisor will contact the Fire Department for further instructions.
- (c) If substances are present in concentrations in excess of the permissible exposure limits (PEL's), but there is no likelihood of an Immediately Dangerous to Life and Health (IDLH) atmosphere or f engulfment, entrants will wear appropriate respiratory protection in accordance with Reference b.

- (7) All test results will be recorded on the Confined Space Entry Permit (Appendix G) and the ermit will be kept at the worksite for the duration of the job. Employees will be able to review the testing results at any time.
- (8) The most hazardous conditions will govern when work is being performed in two adjoining, connecting spaces.
- (9) Mechanical ventilation systems, where applicable, will be set at 100% outside air. Where possible, open additional manholes/port holes to increase air circulation. After suitable ventilation period, repeat the testing.
- (10) At least one attendant will be outside the permit space into which entry is authorized for the duration of the entry operation.
- (11) To facilitate <u>non-entry rescue</u>, retrieval systems or methods will be used whenever an authorized entrant enters a permit space, unless the retrieval equipment would increase the overall risk of entry or would not contribute to the rescue the entrant. Retrieval systems will meet the following requirement:
- (a) Each authorized entrant will use a chest or full body harness, with a retrieval line attached at the center or the entrant's back near shoulder level, or above the entrant's head.
- (b) The other end of the retrieval line will be attached to a mechanical device or fixed point outside the permit space in a manner that rescue can begin as soon as rescue is necessary. A mechanical vice will be available to retrieve personnel from vertical type permit spaces more than 5 feet deep.

APPENDIX A

Permit-required Confined Space Decision Logic

Does the space meet all of the following criteria?

- 1. Is large enough and so configured that an employee can bodily enter and perform assigned work; and
- 2. Has limited or restricted means for entry or exit (tanks, vessels, silos, storage bins, hoppers, vaults, and pits); and
 - 3. Is not designed for continuous employee occupancy.

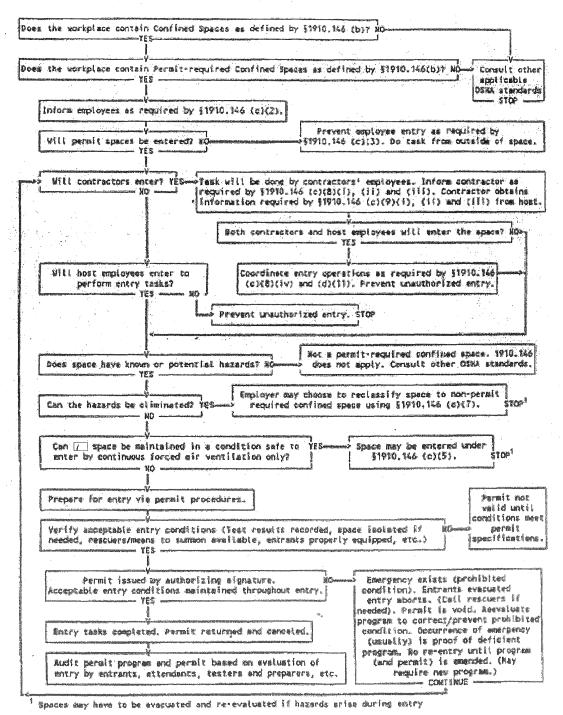
If <u>all three questions were answered yes</u>, then the space is considered a confined space. If one or more questions were no, the space in not a confined space and this permit-required confined space regulation will not apply.

If it has been determined that the space meets the above definition for a confined space and the space has <u>one or more</u> of the following characteristics the space will be considered a <u>permit required space</u>:

- 1. Contains or has the potential to contain a hazardous atmosphere; or
- 2. Contains a material that has the potential for engulfing an entrant; or
- 3. Has the internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slops downward and tapers to a small cross-section; or
 - 4. Contains any other recognized serious safety or health hazard.

Note: All confined spaces are considered permit required confined spaces until proven otherwise. By using the checklist at Appendix C you will be able to determine if entry into the confined space requires a permit. If you can answer yes to all the questions on this checklist you may enter the confined space without the use of a confined space entry permit. The completion of the checklist at Appendix C is mandatory prior to any entry.

APPENDIX A TO §1910.146—PERMIT-REQUIRED CONFINED SPACE DECISION FLOW CHART



APPENDIX B

Confined Space Placard



DO NOT ENTER
PERMIT REQUIRED CONFINED SPACE

FOR INFORMATION CONTACT

APPENDIX C Pre-entry Check List

A confined space either is entered through an opening other than a door (such as a ma					
requires the use of a ladder or rungs to reach the working level. This checklist must like aits mosts those criteria	oe filled out	whe	enever	the	e
job site meets these criteria.		Ye	S	No	,
1. Did your survey of the surrounding area show it to be free of hazards such as drift vapors from tanks, piping, or severs?	ing	()		(
2. Does your knowledge of the task to be performed in this confined space make it li it will remain free of dangerous contaminants while occupied? Note that any hot wo chemical use will introduce air contaminants into the confined space thus requiring a confined space permit.	rk or	())	()
3. Are you competent/trained in the operation of the gas monitor to be used;	•	()	()
4. Has the gas monitor been calibrated this shift?		()	()
5. Did you test the atmosphere of the confined space prior to entry?		()	()
Oxygen Greater than 19.5 percent but less than 23.5 percent?		()	()
LEL Reading below 10 percent?		()	(,
Toxic Below the PEL or TLV?		()	()—
6. Are the above results acceptable?		()	()
If any of the above questions are answered "NO", DO NOT ENTER THE SPACE.					
Job Location:	·	N-Call Million and - Figure	ма-фезимортализация	N-47284490000000	
Supervisor/Lead Signature:	Date:	Proprieta establismo Proprieta (Constituto de Constituto de Constituto de Constituto de Constituto de Constitu		p. Milanjana	
Comments:					
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APPENDIX D

ATMOSPHERIC TEST PROCEDURES

Prior to any entry, confined spaces and permit-required confined spaces will be tested for oxygen concentration, combustible gas, and toxic contaminants, in that order, with a direct-reading instrument or instruments before it is entered.

I. TEST CRITERIA

- 1. Only trained personnel will perform air monitoring as directed by the Authorizing Supervisor.
- 2. Initial testing of the atmosphere of a confined space will be done from outside the space by inserting a remote sampling probe into the space.
 - 3. As applicable tests will be redone periodically, as specified on the entry permit or SOP

II. TEST PROCEDURE

- 1. Warm-up procedures and calibration will be performed per the manufacturers instructions
- 2. Tests will be performed as follows:
- (a) Insert the probe assembly into the confined space through a vent hole or other opening and cords the readings. Where no openings exist, pry open the entrance cover just enough to allow the insertion of the probe.

WARNING: Use extreme care when prying open entrance covers, an explosive buildup or pressure can occur from chemical reactions within a confined space.

- (b) Insert the probe into the space to within two feet of the top for a duration specified by the manufacturers instruction manual (at least fifteen seconds) and record the readings.
- (c) Lower the probe to within about two feet of the bottom of the space and hold it there as (b)(as the manufacturers instruction manual specifies. Be careful not to immerse the probe in any standing liquid. Record the readings on the entry permit.

<u>NOTE</u>: If an extension tube is used for deep spaces, extend the waiting time, in accordance with the manufacturers instructions.

- 3. Upon initial entry, test all areas around irregular surfaces of the interior
- 4. If any change in conditions occurs within the subject confined space or in the vicinity (i.e. odors; 'istress, disorientation, or illness of entrants; equipment failure; failure of ventilation; presence of unauthorized

personnel, etc.), or if the entrant(s) leaves the space for periods in excess of thirty minutes, the atmosphere will re-tested.

- III. OXYGEN DEFICIENCY OR ENRICHMENT. If the oxygen content is below 19.5% (oxygen deficiency, or above 23.5% (oxygen-enriched), the following will be done:
 - 1. The oxygen will be increased or decreased by ventilation.
- 2. Following initial ventilation, the confined space will be re-tested; and if the atmosphere is still oxygen deficient or enriched the ventilating process will be repeated and the space re-tested.
- 3. If the oxygen deficiency or enrichment cannot be corrected by three vent re-test cycles the confined space will be closed and "DANGER" signs posted. The Industrial Hygiene Branch will then be contacted for further instructions
- IV. FLAMMABILITY. If flammable gas levels exceed 10% of the LEL, no entry will be made. The authorizing supervisor will contact the Directorte of Emergency Services (DES) for further instructions.
- V. TOXICITY. If substances are present in concentrations in excess of the permissible exposure limits (PEL's), but there is no likelihood of an IDLH atmosphere or of engulfment, entrants will wear appropriate respiratory protection in accordance with 29 CFR 1910.134—Respiratory protection.

APPENDIX E

Safe Operating Plan (SOP) for Permit Required Confined Space

INSTRUCTIONS FOR PREPARATION OF SAFE OPERATING PLAN

The purpose of a safe operating plan (SOP) for a Permit Required Confined Space is to ensure that all entries into confined spaces are pre-planned with sufficient detail and coordination to prevent accidents and injury to workers

Safe operating plans will be prepared for routine or predictable entries into confined spaces and will describe the hazards associated with those spaces. Routine or predictable entries are those that can be reasonably expected for the performance of scheduled or unscheduled assembly, maintenance, or inspection.

<u>NOTE:</u> Non-routine entries into confined spaces for which no SOP has been prepared should be coordinated with Industrial Hygiene Branch of Preventive Medicine Service.

Required Contents. SOP's will provide the following information, at a minimum:

- Purpose of proposed Entry. The reason the SOP is needed.
- Scope: The nature of the operation to be performed. Identify the affected organization division/subdivision or organization.

NOTE: Each SOP will be re-evaluated every twelve months and re-issued or canceled, as appropriate.

- Safety and health requirements: Special conditions and precautions
- Support requirements. The degree and type of support required from other organizations.

NOTE: The SOP will be coordinated with all such affected support organizations.

- Impact on other operations. The probable effect of the operation on other work being performed in the area and the precautions that will be taken to prevent a hazardous interaction.
- Emergency operations. The proposed emergency responses, including the method for removing incapacitated personnel (e.g. use of tripod or other retrieval gear) and the means for contacting the Installation Rescue Team.
- A copy of the SOP for the specific Confined Space operation will be attached to the Entry Permit
- All SOP's for Entry into Permit Required Confined Spaces will be subject to audits by the Command Safety Office, Industrial Hygiene Branch and the DES.

- Revisions to SOP's. The SOP will be revised if any of the following conditions occurs:
 - 1. The method of operation changes.
 - 2. Support requirements change.

APPENDIX F

Responsibilities of Authorized Entrants; Authorized Attendants; Authorized Supervisor; and Detector Monitors

Authorized Engrants:

- 1. Know the hazards that may be faced during entry, including information on the mode, signs or symptoms, and consequences of the exposures;
- 2. Properly use equipment as required by this regulation;
- 3. Communicate with the attendant as necessary to enable the attendant to monitor entrant status and to enable the attendant to alert entrants of the need to evacuate the space if required;
- 4. Alert the attendant whenever:
 - The entrant recognizes any warning sign or symptom of exposure to a dangerous situation; or
 - The entrant detects a prohibited condition.
- 5. Exit from the permit space as quickly as possible whenever:
 - An order to evacuate is given by the attendant or the entry supervisor,
 - The entrant recognizes any warning sign or symptom of exposure to a dangerous situation,
 - * The entrant detects a prohibited condition, or
 - · An evacuation alarm is activated.

Authorized Attendants:

- 1. Remain outside in the immediate vicinity of the confined space throughout the duration of the work effort within, except for:
 - · Self-preservation;
 - When another qualified person can act as a substitute.
- 2. Maintain continuous contact with entrant(s).
- 3. Be alert to any changes in conditions in the confined space or in the vicinity. Warn entrant(s) of potential hazards, and order entrants to exit when:

- A condition not permitted by the Entry Permit or an uncontrolled hazard occurs:
- Entrants show any signs of distress;

NOTE: Symptoms of distress may include mental confusion, irrationality, irritability, dizziness, light-headedness, fullness in the head, ringing sensation in the ears, nausea, headache, labored breathing, sensation of apparent suffocation, unconsciousness, immobility, unusual behavior, failure to respond to communication, or other signs of illness or extreme discomfort.

- Any change occurs, such as the presence of toxic substances or equipment failure, that could pose a hazard to the entrants;
 - Any form of combustion occurs;
 - It is necessary to leave the post, and no qualified person is available as a substitute.
- 4. Warn unauthorized persons not to enter the confined space and advise entrants and the authorizing supervisor of unauthorized entries. To the extent possible, prevent unauthorized persons from entering the space.
- 5. Notify the Installation Rescue Team (DES) and request emergency assistance if an emergency occurs. The DES Fort Lewis Fire Dept. will coordinate rescue resources as needed.

NOTE: The person reporting emergencies will be ready to state full details, to the degree known, of the nature, location, and duration of the emergency.

6. Make no entry for rescue purposes.

NOTE: Rescues are to be made only by Installation Authorized Rescue Teams. The attendant will provide whatever emergency assistance (i.e., operating retrieval line or apparatus) which can be rendered without making any entry.

7. Performs no duties that might interfere with the attendant's primary duty to monitor and protect the authorized entrants.

Authorizing supervisor. Supervisors authorizing entry into a confined space will:

- 1. Know the hazards that may be faced during entry, including information on the mode, signs or symptoms, and consequences of the exposure;
- 2. Prepare an entry permit for; each permit required confined space entry. Refer to the pertinent safe operating plan (SOP). Ensure and note on the permit that the pre-entry requirements have been met and that all hazards are controlled. If tests are inconclusive or indicate probable hazards, or safety of the space is uncertain, consult with Industrial Hygiene. Notify the Fire Department if a fire or explosion hazard exist.
- 3. Terminate the entry and cancels the permit when:

- (a) The entry operations covered by the entry permit have been completed; or
- (b) A condition that is not allowed under the entry permit arises in or near the permit space.
- 4. Verify that rescue services are available and the means for summoning them are operable. On site Professional Technical Support during entry, if necessary, shall be contracted through DES.
- 5. Remove unauthorized individuals who enter or attempt to enter the permit space during entry operations.
- 6. Attach the pertinent SOP to the entry permit.

Detector Monitor:

- 1. Be trained in the operation, limitations, and maintenance of detector equipment.
- 2. Ensure that the detectors are in proper working order and are properly calibrated.
- 3. Test the permit space for oxygen content, flammability, and toxicity, as specified by the entry permit or the authorizing supervisor.
- 4. Record oxygen, gas/vapor, and toxicity detector readings on the entry permit.
- 5. Notify the Authorizing Supervisor if;
 - Tests are inconclusive;
 - Tests indicate probable hazards;
 - There are questions about the safety of the confined space.
- 6. Re-test the atmosphere as work proceeds, at intervals specified by the entry permit or the Authorizing Supervisor, or as changing conditions require.

APPENDIX G Confined Space Entry Permit

SOP. Attach a safe operating plan (SOP) for spaces into which entries will be made.

, , , ,	-414-4					CONF	FINED SPACE	ENTRY PERI
COMPANY/LOCA	TION			DEPARTMEN	łT:		DATE:	
CONFINED SPAC	E TO BE ENTERED:			PERMIT EXP	TRATION DATE/TIME			
			eren eren eren eren eren eren eren eren					
	ARDS IN CONFINED					ENTRY AND WORK:		
	ficiency (less 19.5 %				espirator	Modelined	Lighting (Explosi	
Flammable flammable	gases or vapors (gre limit, or greater than 2	ater than 10% of the I 23.5% oxvoen at sea I	ower evel)		eline and safety harno otective clothing		Fire Extinguisher	
	s or vapors (greater th				earing protection	Constitution	Emergency Esca Equipment	apo momorai
Mechanica	, ,				aring protection	entranto.	Resuscitators - I	nhalor
Electrical s	hock		ř	Ot	her	nancon management according to the control of the c		-
Materials h	armful to the skin			and the second				
Engulfmen					quipment/tools:			
Configurati				- Committee - Comm	w voltage ound-fault current inte	errunters		
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Confined Spaces

Public Works Boiler Plants Permit Required Confined Spaces

11/29

-	Plant #3LC Building # 09576 & 09580	Entry	T	Plant # 6 Building # 09785	Entry
1	# 1 Boiler Fireside (09576)	Annual		# 1 Boiler Fireside	
L	# 2 Boiler Fireside (09576)	Annual	1	# 2 Boiler Fireside	
1	# 3 Boiler Fireside (09576)	Annual	1	# 3 Boiler Fireside	
	# 5 Boiler Fireside (09580)	Annual	1	I# 5 Boiler Fireside	Annual
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h	D.A. Tank (09576)	Villa		Stack	Aimaei
	D.A. Tank (09580)			# 1 Boiler Waterside	
	Stack (09580)		L	# 2 Boiler Waterside	
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L	# 3 Boiler Fireside (09580)			D. A. Tank	Ailiuai
L	# 4 Boiler Fireside (09580)	Annual			
	<u> </u>	Annual		Condensate Holding Tank	
	Stack (# 5 Boiler)		1	# 1 Fuel Oil Tank Heater	
	# 1 Fuel Oil Tank Heater (09580)		·	# 2 Fuel Oil Tank Heater	
	# 2 Fuel Oil Tank Heater (09580)		19	# 3 Fuel Oil Tank Heater	
	Flash Tank(09580)	· -	-		
17	Condensate Return Tank		-		
	D. 11.11	P= 4			Book .
	Building # 01452	Entry	 	Building # 01450	Entry
1	Gabriel Boller Fireside	Annual	1	Gabriel Boiler Fireside	Annual
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				# 2 Boiler Fireside	
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			-	Bullding # 09631	
	Building # 09500		1	# 1Boiler Fireside	
1	# 1 Boller Fireside	Annual	-	# 2 Boiler Fireside	
			3	# 3 Boller Fireside	
-	Building # 09665		4	# 4 Boiler Fireside	
1	#1 Boiler Fireside		5	D. A. Tank	
2	# 2 Boller Fireside		6	Condensate Tank	
3	Kewanne Boller Fireside	Annual			
	200000000000000000000000000000000000000			Building # 02027	
	Building # 02026		1	Burnham Boiler Fireside	Annual
1	Burnham Boiler Fireside	Annual	2	Cleaver Brooks Boiler Fireside	Annual
2	Cleaver Brooks Boiler Fireside	Annual			****

Public Works Boiler Plants Permit Required Confined Spaces

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11/29/01

	Plant # 12 Building # 03295	Entry		Plant # 10 Building # 03292	Entry
1	# 1 Boiler Fireside	Annual	1	# 1.Boiler Fireside	
2	# 2 Boiler Fireside	Annual	2	# 2 Boiler Fireside	
3	#3 Boiler Fireside	Annual	3	# 3 Boiler Fireside	
4	# 1 Boiler Waterside	Annual	4	# 4 Boiler Fireside	Annual
5	# 2 Boiler Waterside	Annual	5	# 5 Boiler Fireside	Annual
6	# 3 Boiler Waterside	Annual	6	# 1 Expansion Tank	Bi-Annual
7	# 1 Scubber		7	# 2 Expansion Tank	Bi-Annual
8	# 2 Scubber		8	Stack	
9	#3 Scubber		9	No. 1 Fuel Oil Tank Heater	
10	# 1 E, F, G, & H Baghouse(s)	,	10	No. 2 Fuel Oil Tank Heater	
11	# 2 E, F, G, & H Baghouse(s)	***************************************	11	No. 3 Fuel Oil Tank Heater	
12	#3 E, F, G, & H Baghouse(s) .		12	No. 4 Fuel Oil Tank Heater	
13	Lime Slurry Tank		13	No. 5 Fuel Oil Tank Heater	
	Fly Ash Hopper				
E	Stack	A			
	Lime Silo				
	Pug Mill				
18	Slaker Room				
19	Refuse Collection Pit				
	Plant # 9 Building # 03152	Entry		Plant # 11 Building # 03292	Entry
L	# 1 Boiler Fireside	Annual	i	# 1 Boiler Fireside	Annual
1	# 2 Boiler Fireside	Annual		# 2 Boiler Fireside	Annual.
S	# 3 Boiler Fireside	Annual	-	# 1 Boiler Waterside	Annual
I	# 4 Boller Fireside	, , , , , , , , , , , , , , , , , , ,	4	# 2 Boiler Waterside	Annual
L	# 5 Boiler Fireside		5	Condensate Return Tank	
-	# 1 Expansion Tank	Bi-Annual	6	D. A. Tank	the street break are proposed to the special street and the street are proposed to the street are street and the street are street a
7	# 2 Expansion Tank	Bi-Annual	7	Blowdown Tank	
8	Incinerator Fireside				
9	Stack				
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£	No. 1 Fuel Oil Tank Heater				
12	No. 2 Fuel Oil Tank Heater				1
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-					
15	No. 5 Fuel Oil Tank Heater				

Confined Space Inventory

[b] Fort Lewis confined space inventory is in this linked document:



Glossary Definitions

Acceptable environmental conditions: Conditions under which workers are permitted to enter a Confined Space, including the permissible oxygen, flammability, and toxicity levels.

Attendant: A trained person who-remains outside a Confined Space and acts as an observer and contact for the Entrants, maintains communication, and can call immediate rescue services if needed.

Authorized Entrant: A trained employee who is designated by the Authorizing supervisor (or Designee) to enter a Confined Space. An Attendant may be an Authorized Entrant, rotating duties with the Entrant, if the Entry Permit so states.

Authorizing supervisor: The supervisor responsible for authorizing Entry into a Confined Space and for ensuring that safe procedures are followed for such entries.

Blanking, **blinding**: The absolute closure of a pipe, line, or duct, by fastening across its bore a solid plate or "cap" capable of withstanding the maximum upstream pressure.

Confined Space: See Permit Required Confined Space.

Designee: A person who is trained in Confined Space Entry and who is designated by the Authorizing upervisor to perform the duties of the Authorizing supervisor for a specific Entry.

valves and by opening and locking or tagging a drain or vent valve in the line between the two closed valves.

Emergency: Any event (including any failure of hazard control, ventilation, or monitoring equipment) occurring internally or externally to the *Confined Space* that could endanger *Entrants*.

Engulfment: The surrounding and capture of a person by finely divided particulate matter or by a liquid.

Entrant: See Authorized Entrant.

Entry: The act by which a person intentionally passes through an opening into a Confined Space. The Entrant is considered to have entered as soon as any part of an employee's face breaks the plane of an opening into the space.

Entry Permit: The written authorization for Entry into a Confined Space for a stated purpose during a given time, which certifies that all potential hazards have been evaluated and are controlled.

Entry Supervisor: A person (such as the employer, Forman, or crew chief) responsible for determining if acceptable Entry conditions are present at a permit space where Entry is planned, for authorizing Entry and overseeing Entry operations, and for terminating Entry as required by this regulation.

Note: An *Entry Supervisor* also may serve as an *Attendant* or as an *Authorized Entrant*, as (b)(as that person trained and equipped as required by this regulation for each role (or (b) fills. Also, the duties of *Entry Supervisor* may be passed from one individual to another during the course of an *Entry* operation.

Harness (parachute type): A device that encircles the thighs and torso in a webbed structure, and to which a retrieval line is attached for the emergency removal of a person from a Confined Space.

Hazardous Atmosphere: An atmosphere presenting a potential for death, disablement, injury, or acute illness from one or more of the following causes:

- 1) The presence of less than 19.5 percent or more than 23.5 percent oxygen by volume;
- 2) The presence of a flammable gas, vapor, or mist equal to or in excess of 10 percent of its lower flammable limit (LFL);
- 3) A concentration of airborne combustible dust that obscures vision at a distance of five feet or less:
- 4) A concentration of any toxic, corrosive, or asphyxiate substance above the *Permissible Exposure Limit (PEL)* or above the numerical limit given for the substance in the Material Safety Data Sheet for that substance;
- Any other condition that is known to present a safety or acute health hazard or is immediately dangerous to life or health.

Hot Work: An operation, such as welding, cutting, burning, heating, or the use of live electrical devices that involves actions or materials that can provide a source of ignition.

Iot Work Permit: A written authorization to perform operations (e.g., riveting, welding, cutting, burning, and heating) capable of providing a source of ignition.

Immediately Dangerous to Life and Health (IDLH): Any condition that poses an immediate threat to life may result in irreversible or immediate severe health effects, may result in eye damage or irritation, or may impair escape.

Inerting: The process of making the atmosphere of a *Confined Space* non-flammable, non-explosive, or otherwise chemically non reactive by displacing or diluting the original atmosphere with steam or a gas (such as nitrogen) that is non-reactive with the contents of that space.

Installation Rescue Team: A group of two or more employees trained and designated to perform rescues from a Confined Space.

NOTE: The Installation Rescue Team will be the (b)(Fire Department or their authorized equivalent

Isolation: The preventing of any potentially hazardous form of physical, mechanical, or electrical energy from entering a **Confined Space** by the use of blanking/blinding, double block-and-bleed, **Lockout** and **tag**, or some similar effective means.

Allen ..

Ine Breaking: The intentional opening within a *Confined Space* of a pipe, line, or duct that carries mmable, toxic, or corrosive material, an inert gas, or any fluid at a pressure or temperature capable of causing ary.

Lockout: A mechanical means to close off an energy source (switch, circuit breaker, or control) by affixing an approved Lockout device. See OSHA Reg. 29CFR1910.47

Lower Flammability Limit (LFL): The minimum concentration of a flammable gas or vapor in air (usually expressed in percent by volume at sea level) that will ignite if an ignition source is present.

Low Hazard Confined Space: A Confined Space where there is an extremely low likelihood that an IDLH or Engulfment hazard could occur, and where all other serious hazards are controlled.

Non-Permitted Condition: Any condition in which a hazard potential exceeds the limits authorized by the Entry Permit.

Non-Permit Confined Space: A Confined Space that does not contain or, with respect to atmospheric hazards, have the potential to contain any hazard, have the potential to contain and hazard capable of causing death or serious physical harm.

Oxygen Deficient Atmosphere: An atmosphere containing less than 19.5 percent oxygen by volume.

Oxygen Enriched Atmosphere: An atmosphere with a concentration of more than 23.5 percent oxygen by olume.

xygen/Flammable Gas/Toxic Detector(s): A direct-reading instrument or instruments equipped with a remote sampling probe and capable of detecting oxygen deficiency and hazardous levels of flammable and toxic materials.

Permissible Exposure Limit (PEL): The legally established maximum eight-hour time weighted average (TWA) concentration or ceiling concentration of a contaminant.

Permit Required Confined Space: An enclosed space requiring an **Entry Permit** that a) is large enough and so configured that an employee can bodily enter and perform assigned work; b) has limited means of **Entry** or exit; c) is not designed for continuous employee occupancy; and d) has one or more of the following characteristics:

- · Contains or has the potential to contain a Hazardous Atmosphere;
- Contains a material that might engulf an *Entrant*;
- Has an internal configuration (such as inwardly converging walls or a floor that slopes downward and tapers to a smaller cross-section) that could cause the entrapment or asphyxiation of an *Entrant*.
- · Has any other recognized serious safety or health hazard.

Prohibited Condition: Any condition in a permit space that is not allowed by the permit during the period when 'ntry is authorized.

Purging: The process of removing any residual hazardous substances from a **Confined Space** to provide non hazardous working conditions that can be maintained by ventilation.

Retrieval System: Equipment (including a retrieval line, chest or full-body *Harness*, wristlets, if appropriate and a lifting device or anchor) used for non-entry rescue of persons from permit spaces.

Routine Entry: An Entry into a Confined Space that can be reasonably expected or predicted.

Safe Operating Plan (SOP): A documented plan for conducting a routine or predicted Entry into a specific Confined Space, with sufficient detail and coordination to prevent accidents and injury to workers.

Tagout: The placement of a properly filled out danger/warning tag on an energy-isolating device (Lockout). See OSHA Lockout/Tagout Regs. Ref: 29CFR1910.47

Testing: The process by which the hazards that may confront **Entrants** of a permit space are identified and evaluated. **Testing** includes specifying the tests that are to be performed in the permit space.

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TABLE OF CONTENTS

- I. Purpose
- II. Scope
- III. Responsibilities
- IV. General
- V. Training
- I. <u>PURPOSE</u>: To provide guidance and establish policies and procedures on how the Directorate of Public Works (DPW), Operations and Maintenance Division (O&M), manages safety.
- II. <u>SCOPE</u>: This plan applies to all personnel working in O&M Division under normal working conditions or during an emergency situation. The following procedures/references shall be included as part of the Safety Plan:
 - a. Public Works Safety Policy
 - b. Division Emergency Operations Plans
 - c. Confined Space Entry SOP
 - d. Lockout/Tagout SOP
 - e. Asbestos SOP
 - f. Fire Prevention and Protection SOP
 - g. Excavation SOP
 - h. Dig Permit SOP
 - i. Hazardous Spill SOP
 - j. Driver and Operator Standardization SOP
 - k. Abbreviated Accident Prevention Plan (AAPP)

III. RESPONSIBLITIES:

- a. All Thy O&M Section supervisors will ensure full and effective implementation of the Safety Plan:
 - (1) Establishing internal program standards and procedures for assigned personnel.
 - (2) Ensuring established standards conform.
 - (3) Continuously enforcing compliance with established standards.
 - (4) Providing resources needed to begin and maintain the plan elements.
 - (5) Initiate a third party investigation on all accidents using Fort Lewis Safety Office investigation procedures.
 - (6) Ensure training of all affected personnel on Confined Space Entry, Lockout/Tagout, Asbestos Awareness, Dig Permits, Hazardous Spills, Respirator Protection/PPE, Driver and Operator Certifications.
 - (7) Maintain current calibration of all safety equipment, and personal protective equipment.
 - (8) Enter a PCAR for all outstanding safety issues.
 - (9) Ensure that an AAPP (required), is executed for all projects, is posted at each project site and is easily accessible to the affected workforce. Although an AAPP document is not required for general maintenance and repair, the worker and/or supervisor shall assess possible hazards onsite and take appropriate action.
- b. Each Section Safety Coordinator will:

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- (1) Be familiar with the contents, operation, and status of the O&M Safety Plan, to include detailed knowledge of each of the program elements as applied within each section.
- 2) Perform monthly safety inspections of the section, and report findings to the Supervisor.
- (3) Perform monthly safety meetings to include:
 - (a) Written minutes from previous meeting with subjects discussed.
 - (b) Themed safety training i.e. Forklift, Ladders, Scaffolding, Electrical Haz., Trip Haz., etc..
 - (b) Dated Sign in roster titled with the theme of the of the training.
- c. Supervisors will be familiar with the contents, operation, and status of the O&M Safety Plan, and ensure their area of operations conforms to the established standards, to include:
 - (1) The required training of personnel;
 - (2) Adherence to the routine and emergency protective measures.
- d. All personnel will familiarize themselves with the Safety Plan for O&M Division and will make use of the protective measures provided.

IV. GENERAL:

- a. Written Plan. Copies of this program will be available for review in each work area.
- b. All personnel with the potential to be exposed to breathing hazards shall be "fit tested" for donning of respirator's during their occupational health physical.
- c. All shift operators shall maintain periodic radio/phone checks with each other throughout the shift.
- d. All employees working on a ladder greater than six feet in height will require a two men operation.
- 8. Safety issues not sufficiently addressed in this plan shall reference EMM 385-1-1

V. TRAINING:

- Training shall be performed on an annual basis for Confined Space and Lockout/ Tagout and quarterly for Spill and Safety.
- b. Each section shall establish a training plan for every employee that provides all OSHA, and Army safety training.
- c. All training records will be managed by the O&M Division secretary and recorded electronically in the O&M Training folder.

Deleted: An observance of a Lockout/ Tagout shall be performed annually for all personnel authorized.

VI. <u>REFERENCES</u>:

- 6. 29 CFR 1910.146 Permit Required Confined Space.
- b. 29 CFR 1910.134 Respiratory Protection.
- c. 29 CFR 1910.147 Control of Hazardous Energy Source.
- d. 29 CFR 1910.333 Electrical Work Practice Standards
- e. FL REG 600-55 Driver and Operator Standardization Program.
- f. Public Works Safety Policy Letter
- g. EMM 385-1-1 Safety and Health Requirements Manual (US ARMY CORPS OF ENGINEERS)

VII. APPENDICES:

A. ABBREVIATED ACCIDENT PREVENTION PLAN

Deleted: IV

APPENDIX A

PUBLIC WORKS, FORT LEWIS, WASHINGTON ABBREVIATED ACCIDENT PREVENTION PLAN (AAPP)

NOTE: For Pre-Project Hazard Assessment (Please Type or Print)

Pate of Site Visit:		
roject Site Location:		
Vork Order / Contract #:	Task / Phase:	
repared by:	Signature:	paliticide
Date:Tele: ()	E-mail Address:	
ublic Works Project Manager (I	PWPM):	
lame:	Tel: ()	
Accepted by: Fort Lewis Safety	Office (FLSO):	

Notice: Public Works personnel, contractors and all subcontractors must comply with all Occupation Safety and Health Administration (OSHA) laws, state and local mandates and adhere to the requirements of EM 385-1-1, Corps of Engineers Safety and Health Requirements Manual. This AAPP is not intended to define full compliance with OSHA or other safety laws, codes or regulations. Compliance with OSHA and other safety laws, codes or regulations, and maintaining a safe work environment for contractor or subcontractor employees remains the Contractor's responsibility.

Inis is an UNCONTROLLED DOCOMENT printed 00/13/0/ for reference only. The current copy is on-line on the Public Works intranet at https://pwonline.
NOTE: This AAPP is to be used for initial pre-project safety assessment only and must be accepted by the FLSO prior to incorporation into the Project Safety Plan. Photographs and Video Recording necessary for hazard assessment shall be attached to this AAPP.

PURPOSE OF THE S	ITE VISIT. (Example: project planning, reco	rds review, investigation, inspection)
PRESENT USAGE. (C	heck <u>ALL</u> that apply)	
() Barracks	() Medical Clinic	() Historical *
() Administrative	() Dental Clinic	() Industrial
() Motor pool	() Dining Facility	() Landfill
() Airfield	() Recreational *	() Nature Area
() Hangar	() Commercial	() Agricultural
() Facility Support	() Child Development Center (CDC)	() Occupied
() Hospital	() School	() Unoccupied
() Other- Specify		
* Notify Cultural Reso	urces, in writing, for approval:) Approved
·) Disapproved
. PERSONNEL RESPO	NSTRILITIES	
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Contractor or PW Tear	n Leader (TI)	
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ічапіе;	Office:	(

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Address:	Tel: ()	·
members. The TL and/or SSHO shall	il hold a tailgate meeting to discu	equirements contained in this AAPP to all tean ss the information contained in this AAPP and SSHO responsibilities may be performed by
Ctt. C. C. t. a. d V. alt. Off and (CCC)	no).	•
Site Safety and Health Officer (SS)	HO):	
Name:		Office:
Address:		Tel: ()
SSHO Responsibilities: The SSHO of this AAPP during site visit/projec Team Members (Other than those lis	t activities.	ion/briefing and oversight of the requirements
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()
Name:	Org:	Tel: ()

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Team Member Responsibilities: All Team Members are required to read and be briefed on the requirements contained in this AAPP during the tailgate meeting held by the TL or SSHO. Team members will sign the TL's Site Visit Team S\(\)atempted team on Page 8 signifying they understand and will comply with the requirements. This statement is to be maintained in the on-site Safety Plan files through the entire life of the task order or project. The statement should be completed prior to the actual project activities taking place. It does not have to accompany the AAPP submitted for review. All team members shall identify any known allergies and required medications at the initial team meeting.

Public Works Intranet at https://pwonline.

4. GENERAL DESCRIPTION OF SITE ACTIVITIES. (Check ALL that apply)

() Building	() Interstitial Space	() Utility Vault
() Roof	() Flooring	() Confined Space
() Equip Room	() Walis	() Fence Line
() Basement	() Ceiling	() Off Road
() Crawl space	() Coatings/Surfacing	() Off Path/Trail
() Attic	() Mechanical Room	() On Path/Trail
() Hallway	() Boiler	() On/Over Water
() Excavation	() Trench	() Stack
() Other-Specify:		

5. HAZARD EVALUATION.

Check <u>ALL</u> hazards that could be present or encountered during the site/field visit or project activities. <u>ALL</u> potential hazards checked must include a brief of mitigation measures. Document each with the corresponding topic listed on Pages 6 and 7. After hazard and mitigation measures have been identified and addressed, continue completing paragraphs 6 thru 13.

() Cold Stress	() Excavations	() Biological
() Heat Stress	() Work from Elevation	() Chemical
() Slip/Trips/Falls	() Material Handling	() Environment
() Squatting/Bending	() Water Hazards	() Wildlife
() Eye Hazard () Foot Hazard	() Confined Space () Weather	
() Overhead Hazard	() Insects	() Traffic Hazard
() Head Hazard	() Flammable Materials	() Tools
() Climbing Hazard	() Toxic Materials	() Terrain
() Noise Hazard	() Fauna	() Flora
() Hand Hazard_	() Asbestos	() Lead
Other Hazards not listed:	() Dust	() Excrement
()	()	()

()	()	
HAZARD EVALUATION RISK ASSESS	SMENT.	
() HIGH RISK () MEDIUM RI	ISK () LOW RISK	
isk Assessment Levels:		
	icant risk to personnel, equipment, or property, even after vities are not to be conducted during site visits. Contact the	
Iedium Risk Those activities or tasks that present grete visit tasks, and require more than routine supervision	eater risk to personnel, equipment, or property than normal	
ow Risk Those activities or tests that present no great ppropriate.	ter risk than normal site visit tasks. Routine supervision is	
COMMUNICATION. Means of communication		
) Cell Phone () Two-Way Radio () Desk Te	elephone () Other:	
NOTE: Test Communication devices at start of each sh	ift to verify proper operation.	
NOTE: Test Communication devices at start of each sh	ift to verify proper operation.	
, FIRST AID/CPR REQUIREMENTS. W	nen a medical facility or physician is not accessible within ent of injuries, at least one contractor/PW employee present ninister First Aid and CPR and shall provide and make	
FIRST AID/CPR REQUIREMENTS. We with the site visit/project activities shall be qualified to administration available a properly equipped First Aid Kit to tre	nen a medical facility or physician is not accessible within ent of injuries, at least one contractor/PW employee present ninister First Aid and CPR and shall provide and make at their team members, as needed.	
. FIRST AID/CPR REQUIREMENTS. We we minutes of an injury to an employees for the treatment the site visit/project activities shall be qualified to adminishing available a properly equipped First Aid Kit to tree	nen a medical facility or physician is not accessible within ent of injuries, at least one contractor/PW employee present ninister First Aid and CPR and shall provide and make at their team members, as needed.	
FIRST AID/CPR REQUIREMENTS. We we minutes of an injury to an employees for the treatment the site visit/project activities shall be qualified to admadily available a properly equipped First Aid Kit to tree pectal Note: Provide and Post a map with direction	nen a medical facility or physician is not accessible within ent of injuries, at least one contractor/PW employee present ninister First Aid and CPR and shall provide and make at their team members, as needed.	
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FIRST AID/CPR REQUIREMENTS. Wive minutes of an injury to an employees for the treatment the site visit/project activities shall be qualified to adneadily available a properly equipped First Aid Kit to trespectal Note: Provide and Post a map with direction Pirst Aid/CPR Certified Person(s) on Team:	nen a medical facility or physician is not accessible within ent of injuries, at least one contractor/PW employee present ninister First Aid and CPR and shall provide and make at their team members, as needed. s on how to get to the hospital. Tel: () Tel: ()	

8

Installation/Government/Private Facility is arrangements must be made prior to the sit	ingements shall be made for medical treatment. When an sto provide any emergency response or medical treatment, those the visit/project activities. A means of transporting injured or ill persons Company Vehicle, Government Vehicle, etc. as identified below:
() POV () Company Vehicle	() Gov't Vehicle () Other:
Emergency numbers call letters, etc., and to summons emergency response organiza	the method(s) OTHER THAN 911, e.g. cell phone, two-way radio, etc tions shall be identified below:
MEDICAL FACILITY	SUMMONS METHOD/#
FIRE DEPARTMENT	SUMMONS METHOD/#
MILITARY POLICE	SUMMONS METHOD/#
LOCAL POLICE	SUMMONS METHOD/#
PW PM	SUMMONS METHOD/#
SSHO	SUMMONS METHOD/#
FACILITIES POC	SUMMONS METHOD/#
OTHER	SUMMONS METHOD/#
10. TRAINING. The Contractor/TL is responsible for brief required training requirements determined	fing their employees as well as all subcontractors and shall meet the to the contractor/TL/SSHO to be applicable in this AAPP.
See Paragraphs 5 and 8.	
11. MINIMUM SAFETY REQU	TREMENTS.
A. If conditions change or hazards arise	not previously anticipated or not covered by this AAPP, the
Team Members are to stop the activit SSHO.	ties, leave the area if it is hazardous, and notify the TL and/or
B. Restricted or Posted areas. DO NOT	ENTER without permission of the Installation or Proponent

9

Organization. Smoke in designated areas only.

- C. If task involves access to a remote or restricted area, the Two-Person or BUDDY System will be used. The two persons must maintain contact by line of sight and orally at all times. Emergency Communication (Two-Way Radio, Cell phone or similar device) must be maintained at all times under these conditions.
- D. Avoid overgrown vegetation, tall grass, and similar areas if possible. In seasons of insects and reptiles, protective measures such as boots, chaps, and repellants should be used when needed. The Buddy System will always be used i8n these areas. Emergency communication (Two-Way Radio, Cell phone, or similar device) must be maintained at all times under these conditions.
- E. Always walk facing traffic, in a single file, and each person must wear a reflective vest when walking along roadways. Flashlights are required during periods of poor visibility e.g. dawn, dusk, after dark, fog, etc.
- F. Electrical energized equipment. Do not enter swifthgear room or switchyards without an escort who is Familiar with the area and/or the associated hazards.
- G. Excavated Area. Do not enter trenches and holes without an escort who is familiar with the area and/or the associated hazards.

12. PERSONAL PROTECTIVE CLOTHING AND EQUIPMENT (PPE).

- A. Appropriate clothing shall be worn to abate the hazards identified in Paragraph 5 above. Employees shall wear clothing suitable for the weather and work conditions. As a minimum, to trousers, a sleeved shirt, and leather, safety toe or other protective footwear are required. Footwear will be commensurate with hazards anticipated or identified.
- B. PW and Contractor employees shall, as a minimum wear:
 - 1. A hard hat on all construction and renovation jobs or where overhead hazards exist.
 - 2. Safety glasses with side shields are required when eye hazards exist.
 - 3. Hearing protection is required when sound levels reach or exceed allowable limits.
- 13. ACCIDENT REPORTING. In the event of an accident, the contractor/employee will notify

Public Works Intranet at https://pwonline.

the TL/SSHO/Supervisor <u>IMMEDIATELY</u>. The contractor is responsible for conducting accident investigations for their personnel. PW employees shall complete and submit to their supervisor, the appropriate CA accident report forms.

PW Procedure: Public Works SAFETY PLAN Document ID:		
Document Owner:	Approval:	Revision:
(b)(6)	(b)(6)	Revision Date:
Deputy Director of Public Works	Director of Public Works	Original Date: 1 July 2002

Public Works SAFETY PLAN



TABLE OF CONTENTS

- I. Purpose
- II. Scope
- III. Responsibilities
- IV. General
- V. Training
- I. <u>PURPOSE</u>: To provide guidance and establish policies and procedures on how the Public Works (PW) manages safety.
- II. <u>SCOPE</u>: This plan applies to all personnel working in Public Works under normal working conditions or during an emergency situation. The following procedures shall be included in the Safety Plan:
 - a. Public Works Safety Policy
 - b. Division Emergency Operations Plans
 - c. Public Works Confined Space Entry SOP
 - d. Public Works Lockout/ Tagout SOP
 - e. Public Works asbestos SOP

III. RESPONSIBLITIES:

- a. All PW supervisors and work leaders will ensure full and effective implementation of the Safety Plan:
 - [1] Establishing internal program standards and procedures for assigned personnel.
 - (2) Ensuring established standards conform.
 - (3) Continuously enforcing compliance with established standards.
 - (4) Providing resources needed to begin and maintain the plan elements.
 - (5) Initiate a third party investigation on all accidents using Fort Lewis Safety Office investigation procedures.
 - (6) Ensure training of all affected personnel on Confined Space Entry, Lockout/ Tagout, Spill response, respirator/PPE, & Safety.
 - [7] Maintain current calibration of all safety equipment, and personal protective equipment.
 - (8) Enter a PCAR for all outstanding safety issues.

- b. Each Section Safety Coordinator will:
 - (1) Be familiar with the contents, operation, and status of the PW Safety Plan, to include detailed knowledge of each of the program elements as applied within each section.
 - (2) Perform monthly safety inspections of the section, and report findings to the Supervisor per AR .
 - (3) Perform monthly safety meetings with written subjects discussed for each PW section per AR
- c. Supervisors will be familiar with the contents, operation, and status of the PW Safety Plan, and ensure their area of operations conforms to the established standards, to include:
 - (1) the required training of personnel;
 - (2) Adherence to the routine and emergency protective measures.
- d. All personnel will familiarize themselves with the Safety Plan for Public Works, and will make use of the protective measures provided.

IV. GENERAL:

- a. Written Plan. Copies of this program will be available for review in each work area.
- b. All personnel with the potential to be exposed to breathing hazards shall be "fit tested" for donning of respirator's during their occupational health physical.
- All employees shall be able to attend quarterly Public Works safety meetings upon request.
- d. All shift operators shall maintain periodic radio/phone checks with each other throughout the shift.
- e. All employees working on a ladder greater than six feet in height will require a two men operation.
- f. Safety shall be the topic of the PW Staff meeting at least quarterly in conjunction with ISO 14001 review. All accidents will be reviewed at this time.

V. TRAINING:

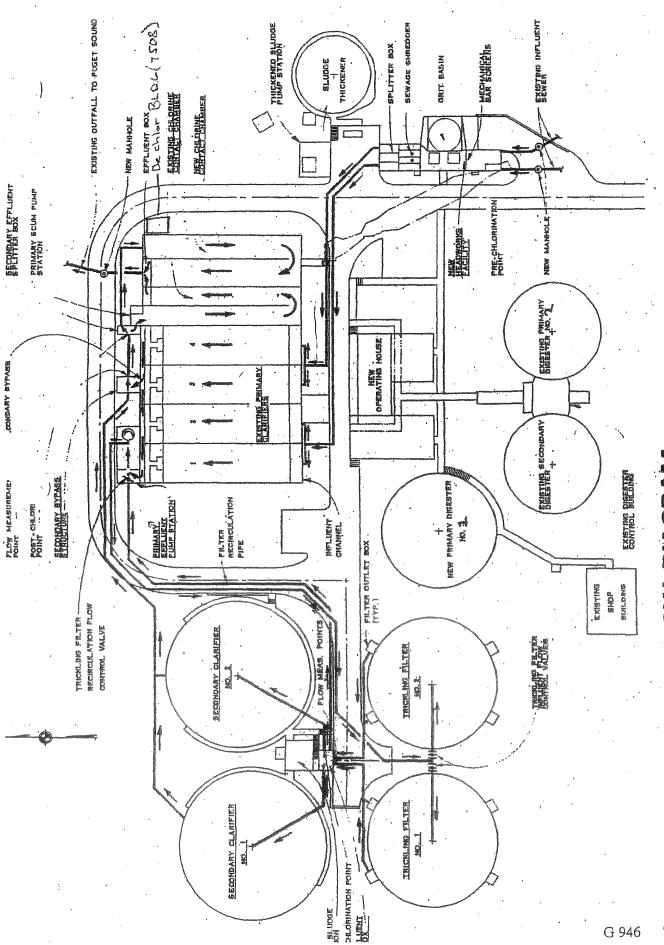
- a. Training shall be performed on an annual basis for Confined Space and Lockout/ Tagout and quarterly for Spill and Safety. An observance of a Lockout/ Tagout shall be performed annually for all personnel authorized.
- b. Each section shall establish a training plan for every employee that provides all OSHA, and Army safety training.
- c. All training records will be managed and kept by the supervisor in his office and electronically on the PW "I" drive in the I:Util Div/Training folder.

VI. <u>REFERENCES</u>:

- a. 29 CFR 1910.146 Permit Required Confined Space.
- b. 29 CFR 1910.134 Respiratory Protection.
- c. 29 CFR 1910.147 Control of Hazardous Energy Source.
- d. 29 CFR 1910.333 Electrical Work Practice Standards.
- e. Public Works Safety Policy Letter dated 30 June 2002

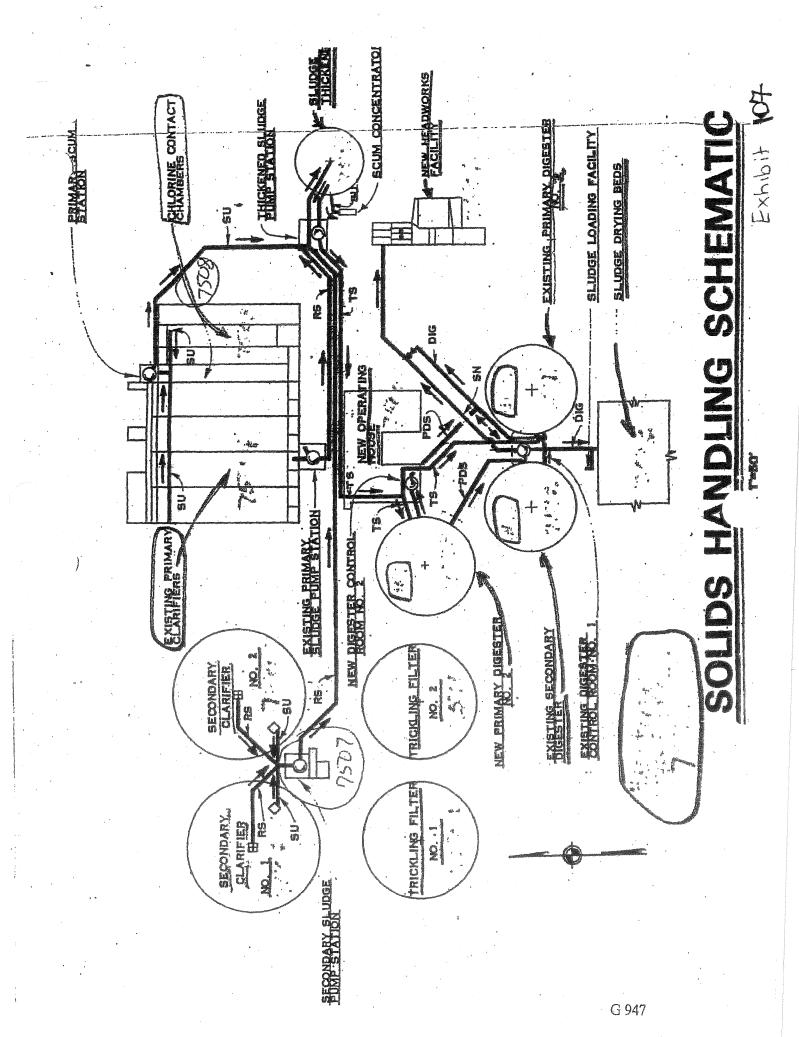
(b)(6)

Deputy Director of Public Works



FLOW DIAGRAM

M



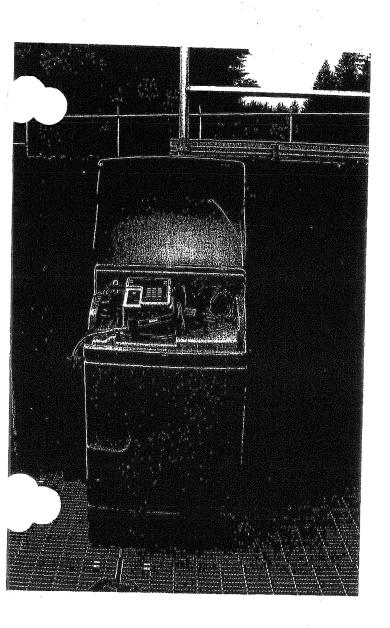


Exhibit 108
Influent Composite Sampler

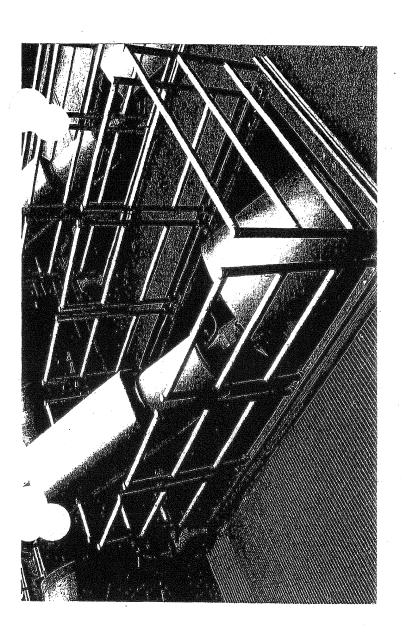


Exhibit 109

Influent Screens

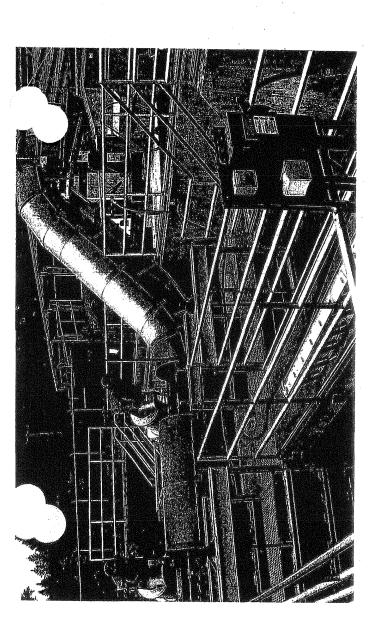


Exhibit 110

Influent Screen Conveyor & Dumpster

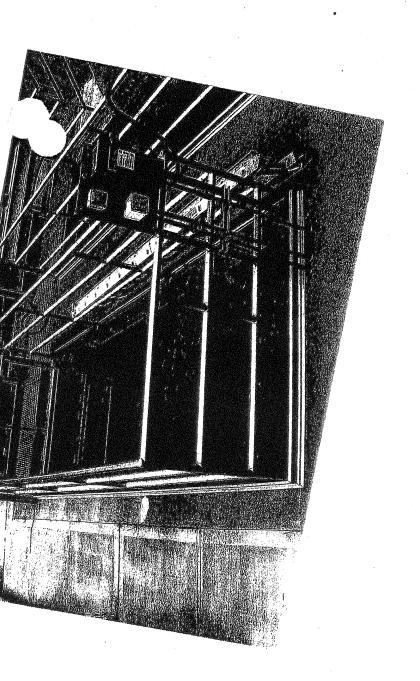


Exhibit 111

Aerated Grit Chamber

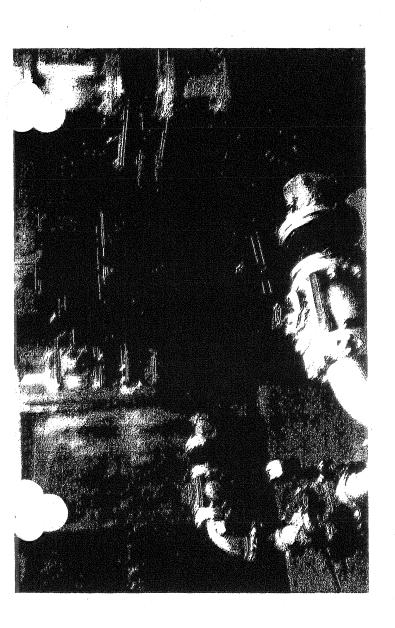
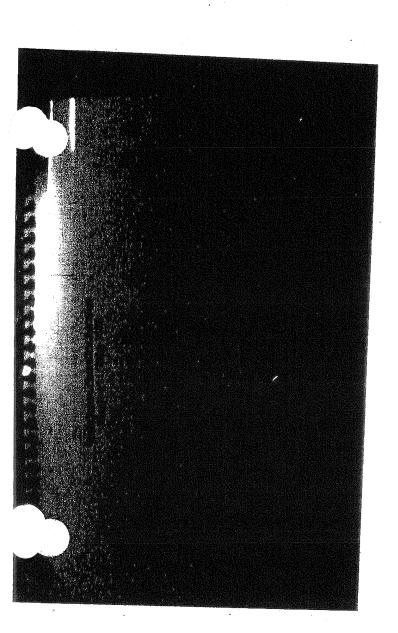
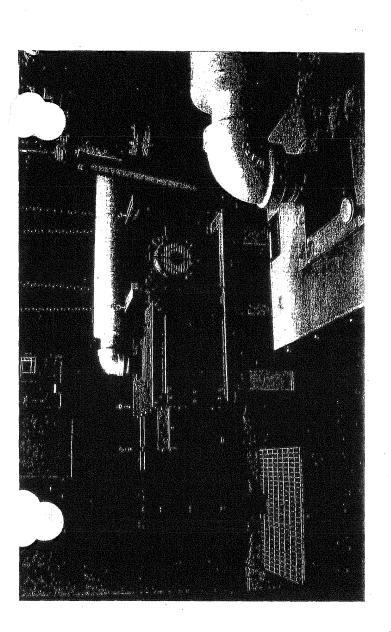


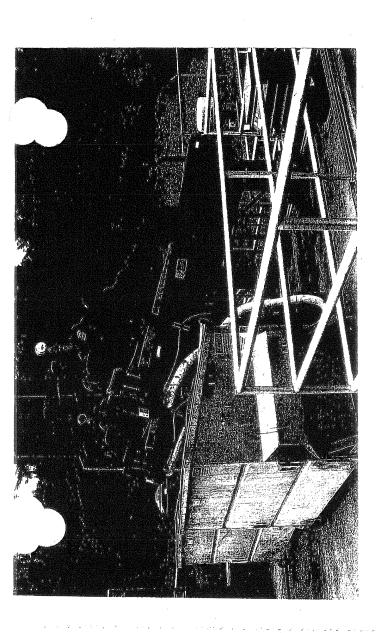
Exhibit 112
Pumps



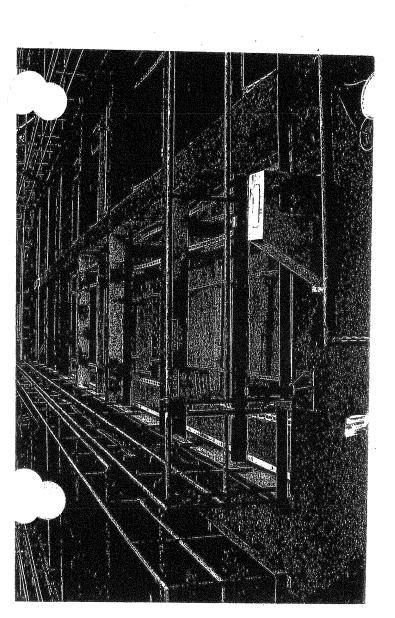
Aeration Headworks Narrative



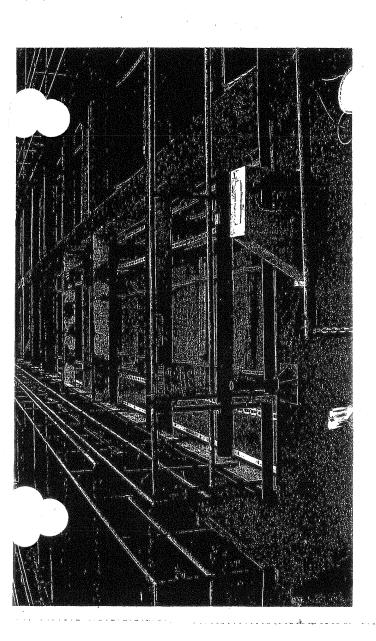
Blowers for Grit Chamber



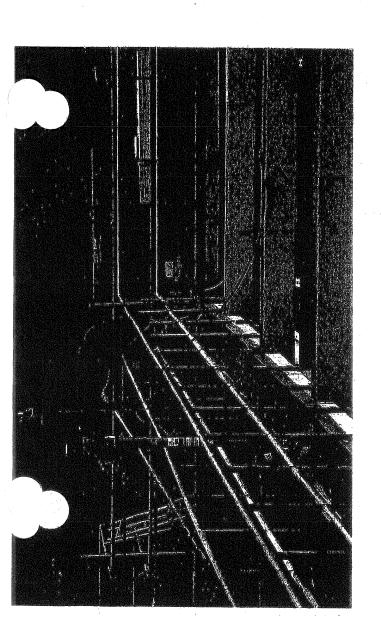
Grit removal conveyor and dumpster



Primary Clarifier #3



Primary Clarifier #3 (2)



Primary Clarifier #2

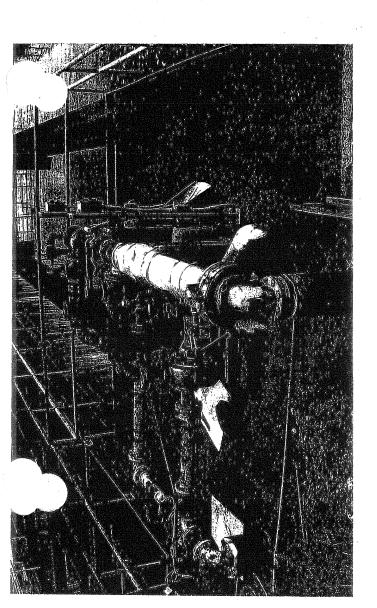
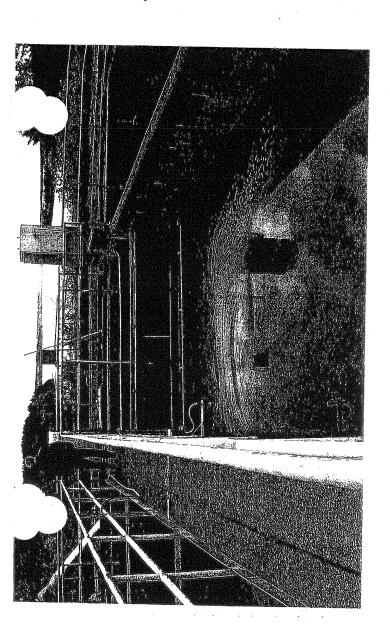
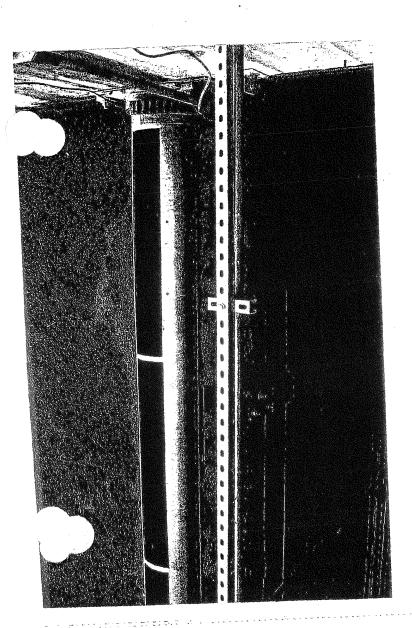


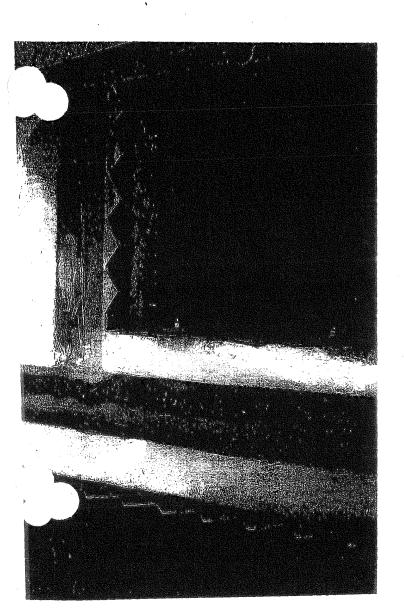
Exhibit 119
Pumps



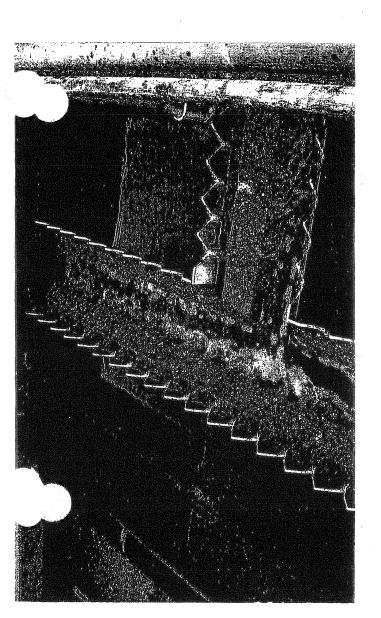
Chlorine Contact Chamber (CCC)



CCC Scum Collector & Baffle



Primary Clarifier-empty



Primary Clarifier-active



Primary
Clarifier-active
(2)