



**CABRERA SERVICES**  
RADIOLOGICAL • ENVIRONMENTAL • REMEDIATION

Daily Safety Toolbox Meeting		
Project Name: <u>FOREST GLEN</u>	Project Number:	
Location: <u>WRAMC</u>	Date/Time: <u>11/16/09</u>	
General Scope of Work: <u>BRING INSTS. ONSITE, CALIBRATE, TAKE REF. READINGS IN B-501, BEGIN SURVEY IN GILLETTE BUILDING</u>		
Emergency Telephone Numbers		
Police: <u>911</u>	Fire: <u>911</u>	Ambulance: <u>911</u>
Other (UXO, Facility, etc.):		
Name:	Phone #:	
Name:	Phone #:	
Name:	Phone #:	
Name:	Phone #:	
Day's Work Tasks		
Task 1: <u>SET-UP INSTS. IN B-503</u>	Task 2: <u>TAKE BACKGROUND REF READINGS IN B-501</u>	
Task 3: <u>START SURVEY OF GILLETTE BLDG</u>	Task 4: <u>RETURN TO B-503 FOR SMEAR COUNTING &amp; PAPERWORK</u>	
Task 5:	Task 6:	
Training Requirements: <u>CABRERA RW TRAINING, HAZWOPER, MEDICAL</u>		
Safety and Health Information		
Job Safety Analysis Completed for this Work?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RWP Permit:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No RWP #
Confined Space Permit:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No #
Radiation Hazards: <u>POSSIBLE MINIMAL CONTAMINATION</u>		
Chemical Hazards (including marking tape, decon agents, etc.): <u>NOPEK P-10 GAS</u>		
Physical Hazards: <u>SLIPS, TRIPS, FALLS, STRUCK BY, SPANS/STRAINS</u>		
Work Control Methods (JHA, Work Plan, monitoring, etc.): <u>WORK PLAN (SAP) SHSP</u>		
PPE: <u>LEVEL D</u>		
Special Equipment (Generators, ISOCS, Backhoes, etc.): <u>HAND-HELD RAD INSTRUMENTS</u>		
Types of Communication: <u>CELL PHONES / VERBAL</u>		
Special Topics: <u>BE AWARE OF SURROUNDINGS &amp; SECURITY REQ</u>		





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Daily Safety Toolbox Meeting	
Project Name: <u>FOREST GLED SURVEY</u>	Project Number:
Location: <u>WRAMC</u>	Date/Time: <u>11/17/09 0730</u>
General Scope of Work: <u>PERFORM SURVEYS IN BUILDINGS 511 &amp; 512</u>	

Emergency Telephone Numbers		
Police: <u>911</u>	Fire: <u>911</u>	Ambulance: <u>911</u>
Other (UXO, Facility, etc.):		
Name:	Phone #:	
Name:	Phone #:	
Name:	Phone #:	
Name:	Phone #:	

Day's Work Tasks	
Task 1: <u>QA INSTRUMENTS</u>	Task 2: <u>TRANSPORT EQUIP TO BUILDINGS 511 &amp; 512</u>
Task 3: <u>PERFORM RAD SURVEYS</u>	Task 4: <u>REMOVE TILE/CARPET AS NEEDED</u>
Task 5: <u>BRING EQUIP BACK TO B-503</u>	Task 6:
Training Requirements: <u>RW, HAZWOPER</u>	

Safety and Health Information			
Job Safety Analysis Completed for this Work?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
RWP Permit:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	RWP #
Confined Space Permit:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	#
Radiation Hazards: <u>NONE EXPECTED, VERY LOW POSSIBILITY FOR CONTAM.</u>			
Chemical Hazards (including marking tape, decon agents, etc.): <u>NONE</u>			
Physical Hazards: <u>SLIPS, TRIPS, FALLS, UNEVEN SURFACES, STROLL BY TRAFFIC, ANIMAL SAFETY, PROPER TRANSPORT OF P-10</u>			
Work Control Methods (JHA, Work Plan, monitoring, etc.): <u>JHA</u>			
PPE: <u>LEVEL "D" SAFETY GLASSES WHEN CHIPPING TILE</u>			
Special Equipment (Generators, ISOCS, Backhoes, etc.): <u>HAND HELD TOOLS &amp; INSTR.</u>			
Types of Communication: <u>CELL PHONES</u>			
Special Topics:			





Daily Safety Toolbox Meeting			
Project Name: FOREST GLEN SURVEY		Project Number: 08-3800.04	
Location: WRAMC		Date/Time: 11/18/09 0730	
General Scope of Work: QA INSTRUMENTS, TRANSPORT INSTS/SUPPLIES TO GILLETTE BLDG, PERFORM SURVEYS @ GILLETTE			
Emergency Telephone Numbers			
Police: 911		Fire: 911	Ambulance: 911
Other (UXO, Facility, etc.):			
Name:		Phone #:	
Name:		Phone #:	
Name:		Phone #:	
Name:		Phone #:	
Day's Work Tasks			
Task 1: QA INSTS.		Task 2: TRANSPORT SUPPLIES TO GILLETTE	
Task 3: PERFORM SURVEY @ GILLETTE		Task 4: COMPLETE CLOSE-OUT TASKS	
Task 5:		Task 6:	
Training Requirements: RW, HAZWOPER			
Safety and Health Information			
Job Safety Analysis Completed for this Work?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RWP Permit:		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No RWP #
Confined Space Permit:		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No #
Radiation Hazards: SLIGHT POTENTIAL FOR MINIMAL CONTAMINATION			
Chemical Hazards (including marking tape, decon agents, etc.): P-10 GAS			
Physical Hazards: SLIPS/TRIPS/FALLS, STRUCK BY, UNEVEN SURFACES, PINCH POINTS, TRAFFIC			
Work Control Methods (JHA, Work Plan, monitoring, etc.): SAP/SHSIP			
PPE: LEVEL D			
Special Equipment (Generators, ISOCs, Backhoes, etc.): HAND-HELD INSTS.			
Types of Communication: CELL PHONES			
Special Topics: DRIVING SAFETY			

