

OP 359, Field Activity Documentation



CABRERA SERVICES
RADIOLOGICAL • ENVIRONMENTAL • REMEDIATION

CABRERA DAILY REPORT

1. PROJECT INFORMATION

PROJECT NAME/LOCATION: SUPPLEMENTAL RADIOLOGICAL SURVEY

DATE: 06/27/16

Former UNC Manufacturing Facility, New Haven, CT

REPORT No. 011

CONTRACT #:

CABRERA PROJECT #: 10-1007.00

TASK #: 015

FIELD SITE MANAGER: Al Craig

PROJECT MANAGER: Rob Flowers

2. WEATHER

TEMPERATURE RANGE: 66-78 degrees F

WIND SPEED/DIRECTION: South, 3 to 15 mph

PRECIPITATION LAST 24 HOURS: YES NO

TYPE: rain

AMOUNT: 0.02"

BAROMETRIC PRESSURE: 30.02"-30.14"

HUMIDITY: 56-87%

HEAT INDEX RANGE: N/A

WEATHER DELAYS: YES NO

DELAY TIME (HOURS): N/A

3. SUMMARY OF WORK

- Continued indoor gamma walkover surveys within Building 6H

4. MATERIALS & EQUIPMENT BROUGHT ON-SITE

Receipt inspection required & completed? Yes No

5. INSPECTIONS

TYPE	DESCRIPTION	ACTION
PREPARATORY		
INITIAL		
FOLLOW-UP		

ARE ANY DEFICIENCIES NOTED IN FOLLOW-UP INSPECTIONS? YES NO – IF YES, EXPLAIN:

6. DEFICIENCIES CORRECTED			
DEFICIENCY #	REPORT REFERENCE	DESCRIPTION	ACTION

7. TESTS PERFORMED		
SPECIFICATION REFERENCE	TYPE	TEST & RESULT

ARE TEST RESULTS ATTACHED? YES NO NA – IF NO, EXPLAIN:

8. CABRERA PERSONNEL ON-SITE		
EMPLOYEE NAME	TITLE	TASK(S) PERFORMED
Nicholas Berliner	Site Radiation Safety Lead (SRSL)	Sections 3 for tasks (8 Hrs)
Alfred Craig	Site Safety and Health Officer (SSHO)	Sections 3 for tasks (8 Hrs)
Michael Plonski	Alternate SRSL	Sections 3 for tasks (2 Hrs)

9. SUBCONTRACTOR PERSONNEL ON-SITE				
SUBCONTRACTOR NAME	JOB DUTY	TASK(S) PERFORMED	# OF PERSONNEL	MAN-HOURS
TOTALS			0	0

10. EQUIPMENT & MATERIALS ON-SITE					
VENDOR	EQUIPMENT	SERIAL #.	ACTIVE OR IDLE	DATE RECEIVED	DATE RETURNED
ERG	1 Ludlum 2360 scaler/rate meter with 43-37 gas proportional probe and 239-1F floor monitor cart	145481 PR178371	Active	6/13/16	
ERG	1 Ludlum 2360 scaler/rate meter with 43-93 zinc sulphide scintillation probe	184913 PR199839	Active	6/13/16	
ERG	1 Ludlum 2929 scaler sample counter with 43-10-1 zinc sulphide scintillation probe	157320 PR157821	Active	6/13/16	
ERG	1 Ludlum 2221 scaler/ digital rate meter with Bicon G-5 sodium iodide scintillation probe	108859 010807B	Active	6/13/16	
Cabrera	1 Th-230 check source	5205-04	Active	6/13/16	
Cabrera	1 Tc-99 check source	5649-06	Active	6/13/16	
Cabrera	1 Co-60 check source	277D161	Active	6/13/16	
Cabrera	1 Ci-36 large-area calibration source	AC-2449	Removed from Site	6/13/16	6/17/16
Cabrera	1 Sr-90 large-area calibration source	AC-2450	Removed from Site	6/13/16	6/17/16
Cabrera	1 Tc-99 large-area calibration source	AC-2448	Removed from Site	6/13/16	6/17/16
Cabrera	1 Th-230 large-area calibration source	AC-2446	Removed from Site	6/13/16	6/17/16
ERG	1 Escort ELF lapel air sampler	A2-32568	Idle	6/13/16	
United Rentals	1 Honda EB 6500 generator	EBLC-1020473	Removed from Site	6/13/16	6/27/16
United Rentals	1 set of six foot by 30 inch rolling scaffold		Idle	6/13/16	
United Rentals	1 Skyjack SJIII 4626 electric scissor lift	10149481	Removed from Site	6/14/16	6/22/16
Cabrera	1 Ludlum 2360 scaler/rate meter with 43-93 zinc sulphide scintillation probe	227246 PR244549	Active	6/15/16	
Cabrera	1 Ludlum 2221 scaler/ digital rate meter with Bicon G-5 sodium iodide scintillation probe	161580 061810A	Active	6/15/16	
Cabrera	1 Ludlum Model 3 rate meter with 44-9 Geiger-Mueller probe	218266 PR299268	Active	6/15/16	
Cabrera	1 Bicon MicroRem meter	1844	Active	6/15/16	
Cabrera	1 Canberra FALCON detector	13000012	Removed from Site	6/17/16	6/17/16
			Idle	6/24/16	
Williams Scotsman	1 8' by 20' connex box		Active	6/22/16	

11. MATERIAL GENERATED/STORED ON-SITE

MATERIAL ID	SOLID, LIQUID, OR MIXED	DESCRIPTION OF MATERIAL	CONTAINER TYPE	DISPOSITION OR LOCATION OF MATERIAL	AMOUNT* (CY OR TONS)
Totals					

ATTACH SEPARATE PAGES AS NEEDED. SEPARATE PAGES INCLUDED? YES NO

12. SAMPLE COLLECTION & ANALYSIS

Sample ID/Spectrum ID	Media (Soil Water, Other)	Sampler Initials	On-Site or Off-Site Lab	Analyses / Type	Count time (sec) Does not include setup	Photo File #

ATTACH SEPARATE PAGES AS NEEDED. SEPARATE PAGES INCLUDED? YES NO

13. CHANGES/DELAYS/CONFLICTS

ANY CHANGES IN SITE CONDITIONS OCCUR TODAY? YES NO

IF YES, EXPLAIN:

DID A DELAY OR WORK STOPPAGE OCCUR TODAY? YES NO

IF YES, EXPLAIN:

HAS ANYTHING DEVELOPED IN THE WORK WHICH MAY LEAD TO A CHANGE? YES NO

IF YES, EXPLAIN:

14. VERBAL INSTRUCTIONS RECEIVED:

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15. HEALTH & SAFETY SUMMARY

SAFETY BRIEFINGS

WAS A SAFETY MEETING HELD? YES NO TOPIC DISCUSSED: Safe completion of tasks described in Section 3

SAFETY INSPECTIONS

WAS A SAFETY INSPECTION CONDUCTED? YES NO

DEFICIENCIES NOTED: YES NO DESCRIBE:

CORRECTIVE ACTIONS TAKEN: YES NO DESCRIBE:

SUMMARY OF WORK PERFORMED

TYPE OF WORK: Refer to description provided in Section 3

CHEMICALS USED: None

PPE LEVEL: Safety shoes, hard hats, and eye protection

INCIDENT & NEAR MISS/OBSERVATION REPORTING

ANY INCIDENTS ON-SITE TODAY? YES NO DESCRIPTION:

CABRERA INCIDENT REPORTING FORM ATTACHED: YES NO

CLIENT SPECIFIC INCIDENT REPORTING FORM ATTACHED: YES NO

ANY NEAR MISSES/OBSERVATIONS ON-SITE TODAY? YES NO DESCRIPTION:

H&S RECOMMENDATIONS

16. REMARKS

An area of elevated activity was located on the floor in the western half of Building 6H. This area was measured with a Ludlum 2360 with 43-93 alpha/beta probe and a smear was collected for removable activity. The total activity was below the DCGL of 5,000 dpm/100 cm², and no removable activity above background was detected via smear. This area was therefore left uncovered with no visible identifying marks remaining.

The six items of interest were shipped via Federal Express to the U.S. DOE Bechtel Marine Propulsion Corporation Knolls Atomic Power Laboratory in Niskayuna, NY on Saturday 6/25/16.

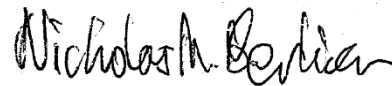
17. VERIFICATION STATEMENT

This report is complete and correct and all materials and equipment used and work performed during this reporting period are in compliance with the contract plans and specifications except as noted above.

NAME/TITLE: Nicholas Berliner, SRSL

SIGNATURE:

DATE: 06/27/16



18. PROJECT MANAGER REVIEW & ACCEPTANCE

REMARKS AND/OR EXCEPTIONS TO REPORT:

ACCEPTANCE

NAME/TITLE: Greg Bright, Deputy Project Manager

SIGNATURE:

DATE: 06/27/16

OP 555 - Safety Meetings



SAFETY MEETING FORM

SIX QUESTIONS FOR SUCCESS – Take two minutes to think through and answer these questions:

1. What are we about to do?
2. What equipment are we going to use?
3. Have I/we been trained to use this equipment?
4. Have I/we been trained to do this job?
5. How can I/we be hurt?
6. How can I/we prevent this incident?

If you and your team aren't prepared to do the assigned work, STOP WORK, and take time to properly prepare.

Project Information

This sign-in log documents the topics of the safety meeting and individual attendance. Personnel who perform work operations onsite are required to attend and acknowledge their ability to ask questions and receipt of such briefings daily. Please provide a brief narrative of the selected topics as applicable to the Project in the comment box (ex. Name of AHA reviewed).

PROJECT NAME & LOCATION
UNC New Haven CT

10-1007.00

DATE/TIME

6-27-2016

WEATHER CONDITIONS

Topic

Discussion – check one

Today's Scope of Work (All tasks)	x <input type="checkbox"/> yes <input type="checkbox"/> n/a	Access / Egress / Slips, Trips, & Falls	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Schedule / New Work / Scope Changes	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Smoking, Eating, & Drinking	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Reviewed Procedures, AHA, etc.	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Washroom / Facilities Location	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Emergency Action Plan & Procedures	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Heat/Cold Stress	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Communications Protocol	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Exclusion Areas Barricades / Cones	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Required PPE	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Required Permits, Passes, Keys, etc.	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Required Monitoring / Instruments	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Decon Procedures / IDW Mgmt.	<input type="checkbox"/> yes <input type="checkbox"/> n/a
Site Control / Work Zones / Security	<input type="checkbox"/> yes <input type="checkbox"/> n/a	Eqpmt. Inspections/Safety Checklists	<input type="checkbox"/> yes <input type="checkbox"/> n/a

OTHER/COMMENTS Building access Surveys

Safety Meeting Attendees

Print Name	Signature
<p><i>Nick Berliner</i></p> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>

Safety Meeting Leader

Al Craig / SSHO

Print Name

Signature