OP 359, Field Activity Documentation CABRERA DAILY REPORT 1. PROJECT INFORMATION PROJECT NAME/LOCATION: SUPPLEMENTAL RADIOLOGICAL SURVEY **DATE:** 06/8/17 Former UNC Manufacturing Facility, New Haven, CT **REPORT No.** 076 CONTRACT #: **CABRERA PROJECT #: 10-1007.00 TASK #:** 016 FIELD SITE MANAGER: Mike Plonski **PROJECT MANAGER:** Rob Flowers 2. WEATHER **TEMPERATURE RANGE:** 48-76 degrees F WIND SPEED/DIRECTION: 5-25 mph E TYPE: NONE **AMOUNT: 0.00"** YES \square No PRECIPITATION LAST 24 HOURS: BAROMETRIC PRESSURE: 30.01" **HUMIDITY: 50-95% HEAT INDEX RANGE:** N/A **DELAY TIME (HOURS): N/A** WEATHER DELAYS: ☐ YES \square No 3. SUMMARY OF WORK Conducted safety meeting prior to beginning field activities. Cabrera completed daily quality control checks on gamma spec and other radiological counting instrumentation. Cabrera continued radiological surveys of the floor surface in the main area of 6H. 4. MATERIALS & EQUIPMENT BROUGHT ON-SITE Receipt inspection required & completed? \square Yes \boxtimes No 5. INSPECTIONS **TYPE** DESCRIPTION ACTION **PREPARATORY** INITIAL **FOLLOW-UP** ARE ANY DEFICIENCIES NOTED IN FOLLOW-UP INSPECTIONS? YES NO

| 6. DEFICIENCIES CORRECTED | | | | | | | | | |
|------------------------------------|---|-------------------|--------------------|---|-------------------|-----------|--|--|--|
| DEFICIENCY # | REPORT REFERE | ENCE | DESCRIPTION ACTION | | | | | | |
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| 7. TESTS F | PERFORMED | | | | | | | | |
| SPECIFICATION REFERENCE | Түг | PE | | Test & Res | ULT | | | | |
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| ARE TEST RESUL | ARE TEST RESULTS ATTACHED? YES NO NO NA - IF NO, EXPLAIN: | | | | | | | | |
| | | | | | | | | | |
| 8. CABRE | RA PERSONNEL (| ON-SITE | | | | | | | |
| EMPLOYEE | NAME | ٦ | TITLE | TASK(S) PERFORMED | | | | | |
| Mike Plonski Site Radiatio | | te Radiation Safe | ty Lead (SRSL) | Summary of Work" (8 Hrs) | | | | | |
| Jon Cote | HF | PTECH | | See Section 3 "Summary of Work" (8 Hrs) | | | | | |
| 9. SUBCONTRACTOR PERSONNEL ON-SITE | | | | | | | | | |
| SUBCONTRACTOR NAME | | Јов D UTY | TASK(S) PERFORMED | | # OF PERSONNEL | Man-Hours | | | |
| | | | | | | | | | |
| | | | | TOTALS | | | | | |

| 10. EQUIPMENT & MATERIALS ON-SITE | | | | | | | | |
|-----------------------------------|--|---------------------|----------------|------------------|------------------|--|--|--|
| VENDOR | EQUIPMENT | SERIAL #. | ACTIVE OR IDLE | DATE RECEIVED | DATE RETURNED | | | |
| ERG | 1 Ludlum 2360 scaler/rate meter with 43-93 Zinc sulphide scintillation probe | 184909/ PR298426 | Active | 02/21/2017 | | | | |
| ERG | 1 Ludlum 2360 scaler/rate meter with 43-93 zinc sulphide scintillation probe | 193638/ PR199836 | Active | 02/21/2017 | | | | |
| ERG | 1 Ludlum 2360 scaler/rate meter | 220242 | Active | 02/21/2017 | | | | |
| ERG | 1 Ludlum 2221 scaler/ digital rate meter with FIDLER sodium iodide scintillation probe | 190205/ PR01807D | Active | 02/21/2017 | | | | |
| ERG | 1 Ludlum 2929 scaler sample counter with 43-10-1 zinc sulphide scintillation probe | 200051/ PR215948 | Active | 02/21/2017 | | | | |
| ERG | 1 Ludlum model 12 meter with 44-9 Geiger- Mueller probe | 276863/ PR147787 | Active | 02/21/2017 | | | | |
| ERG | Escort ELF Lapel Air sampler | A3-48588 | | 02/21/2017 | | | | |
| ERG | 1 MircoRem meter | 2079 | | 02/21/2017 | | | | |
| ERG | 1 Low volume air sampler | | | 02/21/2017 | | | | |
| ERG | 1 Low volume air sampler | | | 02/21/2017 | | | | |
| Cabrera | 1 Th-230 check source | 5648-06 | Active | 02/21/2017 | | | | |
| Cabrera | 1 Tc-99 check source | 5634-05 | Active | 02/21/2017 | | | | |
| Cabrera | 1 Co-60 check source | 267D21 | Active | 02/21/2017 | | | | |
| Cabrera | 1 Ludlum model 2224-1 scaler/rate meter with 43-93 Zinc sulphide scintillation probe | 227246/ PR244549 | Active | 02/21/2017 | | | | |
| Cabrera | 1 Ludlum Model 3 rate meter with 44-9 Geiger-Mueller probe | 219266/ PR | Active | 02/21/2017 | | | | |
| Canberra | Gamma Spectroscopy Instrument (Canberra REGe) | SN 8381 | Active | 03/06/2017 | | | | |
| United Rentals | 1 Bobcat T5 90 Skid Steer | | Active | 02/21/2017 | | | | |
| United Rentals | 1 set of forks, and 1 grapple bucket for Skid Steer | | Active | 02/21/2017 | | | | |
| United Rentals | 1 Magnum 130 tow behind generator | | | 02/21/2017 | 6/6/2017 | | | |
| NEMF | Wheel Scale | | | 02/21/2017 | | | | |
| Williams Scotsman | 1 8' by 20' connex box | | Active | 06/22/2016 | | | | |
| United Rentals | Scaffold | | | 03/23/2017 | 5/23/2017 | | | |
| United Rentals | 1 heater | | | 03/23/2017 | | | | |
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| 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) | | |
| BFLU000011 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~12.35 Tons | | |
| GFLU001451 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~10.05 Tons | | |
| GFLU002120 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~ 12.4Tons | | |
| GFLU002008 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~12.09 Tons | | |
| GFLU001483 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~12.93 Tons | | |
| GFLU002198 | solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~7.83 Tons | | |
| BFLU000074 | solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~7.81 Tons | | |
| ERRU000226 | solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~7.34 Tons | | |
| ERRU000312 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~12.34 Tons | | |
| MHFU-002362 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~11.38 Tons | | |
| GFLU-002165 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~11.78 Tons | | |
| GFLU-002002 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~11.65 Tons | | |
| GFLU002079 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 6H | ~12.74 Tons | | |
| GFLU-001032 | \$olid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~8 Tons | | |
| EERU-000310 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~8 Tons | | |
| GFLU-001742 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~8 Tons | | |
| GFLU-002123 | Solid | Soil/ Garbage/ Debris/ ACM | Intermodal | Building 3H | ~8 Tons | | |
| | | | | Totals | ~174.69 Tons | | |
| 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 (min) Does not include setup | Photo File # | | | |
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| ATTACH SEPARATE | PAGES AS NEED | ED. SEPARAT | E PAGES INCL | .UDED? TYES NO | | | | | |
| 13 CHANCES | S/DELAYS/CONF | LICTS | | | | | | | |
| Any Changes in S | | | y? ☐ Yes | No | | | | | |
| If YES, EXPLAIN: | | | | | | | | | |
| DID A DELAY OR W | ORK STOPPAGE C | CCUR TODAY | (? ☐ Yes | ⊠ No | | | | | |
| IF YES, EXPLAIN: | | | | | | | | | |
| HAS ANYTHING DEVELOPED IN THE WORK WHICH MAY LEAD TO A CHANGE? Yes No | | | | | | | | | |
| IF YES, EXPLAIN: | IF YES, EXPLAIN: | | | | | | | | |
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| 14. VERBAL INSTRUCTIONS RECEIVED: | | | | | | | | | |
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| 15. HEALTH & SAFETY SUMMARY | | | | | | | | |
|--|--|-------------|---|--|--|--|--|--|
| SAFETY BRIEFINGS | | | | | | | | |
| WAS A SAFETY MEETING HELD? YES No TOPIC DISCUSSED: PPE, machine safety (skid steer, scissor lift), slipstrips-falls, slippery conditions | | | | | | | | |
| SAFETY INSPECTIONS | | | | | | | | |
| Was a Safety Inspec | TION CONDUCTED? YES | S 🛛 No | | | | | | |
| DEFICIENCIES NOTED: | DEFICIENCIES NOTED: YES NO DESCRIBE: | | | | | | | |
| | | DESCRIBE: | | | | | | |
| SUMMARY OF WORK P | 1 | | | | | | | |
| TYPE OF WORK: | Refer to description provided in Section 3 | | | | | | | |
| CHEMICALS USED: | None | None | | | | | | |
| PPE LEVEL: | Safety shoes, hard hats, and eye protection, safety vest | | | | | | | |
| INCIDENT & NEAR MISS | S/OBSERVATION REPORTING | | | | | | | |
| ANY INCIDENTS ON-SIT | TE TODAY? YES NO | DESCRIPTION | N: | | | | | |
| CABRERA INCIDENT RE | PORTING FORM ATTACHED: | ☐ YES ⊠ | No | | | | | |
| CLIENT SPECIFIC INCID | ENT REPORTING FORM ATTA | CHED: YE | s 🖂 No | | | | | |
| | ANY NEAR MISSES/OBSERVATIONS ON-SITE TODAY? YES NO DESCRIPTION: | | | | | | | |
| H&S RECOMMENDATION | ONS | | | | | | | |
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| 16. REMARKS | | | | | | | | |
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| 17. VERIFICATIO | N STATEMENT | | | | | | | |
| | te and correct and all materi h the contract plans and spe | | oment used and work performed during this reporting period accept as noted above. | | | | | |
| NAME/TITLE: Mike Plo | onski | | SIGNATURE: | | | | | |
| DATE: 06/09/17 | | | | | | | | |
| | | | | | | | | |
| 18. PROJECT MA | ANAGER REVIEW & ACCEP | TANCE | | | | | | |
| REMARKS AND/OR EXC | CEPTIONS TO REPORT: | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| ACCEPTANCE | | | | | | | | |
| NAME/TITLE: Greg Br | ight, Deputy Project Manage | er | SIGNATURE: | | | | | |
| DATE: 06/09/17 | | | | | | | | |
| | | | | | | | | |

PHOTOS



An area of 3H that was previously inaccessible to survey.

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?
 - 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

| PROJECT NO. | DATE/TIME | | WEATHER CONDITIONS | | | | |
|--------------------------------------|--------------------------------|--------------------------------------|------------------------------------|-------|-------|--|--|
| | 6-8-17 | 0700 Sunny | | 705 | | | |
| | | pic – check one | | | | | |
| Today's Scope of Work (All tasks) | yes □ n/a | | Slips, Trips, & Falls | ☐ yes | □ n/a | | |
| Schedule / New Work / Scope Changes | Smoking, Eating, & Drinking [| | ☐ yes | □ n/a | | | |
| Reviewed Procedures, AHA, etc. | Washroom / Facilities Location | | ☐ yes | □ n/a | | | |
| Emergency Action Plan & Procedures | ☐ yes ☐ n/a | Heat/Cold Stress | | ☐ yes | □ n/a | | |
| Communications Protocol | ☐ yes ☐ n/a | Exclusion Areas | Exclusion Areas Barricades / Cones | | □ n/a | | |
| Required PPE | ☐ yes ☐ n/a | Required Permits | , Passes, Keys, etc. | ☐ yes | ☐ n/a | | |
| Required Monitoring / Instruments | ☐ yes ☐ n/a | Decon Procedures / IDW Mgmt. | | ☐ yes | □ n/a | | |
| Site Control / Work Zones / Security | ☐ yes ☐ n/a | Eqpmt. Inspections/Safety Checklists | | ☐ yes | □ n/a | | |
| Safety Meeting Attendees | | | | | | | |
| Print Name Jon Cote | | | Signature c. Co | | | | |
| Myla Dlas V | Safety Mee | eting Leader | 1/4/ | | | | |
| Name of Meeting Leade | Signature | | | | | | |