

Central Plateau Cleanup Company
JOB HAZARD ANALYSIS/ACTIVITY HAZARD ANALYSIS FOR SUBCONTRACTORS

(JHA/AHA)

Date: _____

Project No.: _____ Task Order/Contract No.: _____

Prepared By: _____

Company: _____ Building: _____ Area: _____

Work Scope/Description: _____

	Primary	Contractor Safety
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Work Supervisor: _____

Radio/Phone No.: _____

Specific Work Location(s): _____

KNOWN OR POTENTIAL HAZARDS

		Yes	No	Reference			Yes	No	Reference
1. Radiation Area Work	√ •	<input type="checkbox"/>	<input type="checkbox"/>	RWP/CPCC-00175	15. Hoisting and Rigging	√ ■	<input type="checkbox"/>	<input type="checkbox"/>	DOE-RL-92-36
2. Hazardous Waste Operations	√ •	<input type="checkbox"/>	<input type="checkbox"/>	29 CFR 1910.120 29 CFR 1926.65	16. Ergonomics (e.g., repetitive motion, awkward positions, same position)		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40463
3. Confined Space	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	DOE-0360	17. Electrical Hazards	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	DOE-0359
4. Hot Work	√ •	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-FP-40421	18. Asbestos Work	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40482 CPCC-STD-SH-52894
5. Roof Work	• ■	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40112	19. Lead Work	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40498
6. Fall Hazards (≥ 6 ft)	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	DOE-0346	20. Hazardous Materials/ MSDS/SDS	√	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40516
7. Excavation/Trenching	• ■	<input type="checkbox"/>	<input type="checkbox"/>	DOE-0344	21. Respiratory Hazards	√	<input type="checkbox"/>	<input type="checkbox"/>	DOE-0352
8. Ladders and Scaffolding	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-STD-SH-40314 HMIS-PRO-SP-095	22. Biological Hazards (e.g., animals, feces, insects)		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-17916
9. Aerial Lifts	√ ■	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-52718	23. Signs and Barricades		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40445
10. Heavy Equipment	√ ■	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-POL-SH-54212 DOE-0359	24. Sharp Objects		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-STD-SH-40518
11. Lock and Tag	√ • ■	<input type="checkbox"/>	<input type="checkbox"/>	DOE-0336	25. Pinch Points		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-STD-SH-40518
12. Site/Vehicle Traffic		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-STD-SH-40445	26. Hazards from Falling Objects		<input type="checkbox"/>	<input type="checkbox"/>	29 CFR 1926.502
13. Noise Exposure	√	<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-40479	27. Other:		<input type="checkbox"/>	<input type="checkbox"/>	
14. Heat Stress		<input type="checkbox"/>	<input type="checkbox"/>	CPCC-PRO-SH-121	28. Other:		<input type="checkbox"/>	<input type="checkbox"/>	

- √ Requires formal/special training
- Requires a permit/form/report

- Requires certification or competent/qualified person designation

SPECIFIC HAZARD ANALYSIS AND SAFE WORK REQUIREMENTS

Known and/or potential hazards, including any marked "Yes" above, are further evaluated and specific measures are identified on subsequent pages. This discussion must include identification of the work activity, the specific hazards present, and the safe work requirements/controls (*including a hazards assessment/modification for PPE*) to be used to alleviate/control the hazard(s).

MINIMUM DRESS/PPE REQUIREMENTS: Hard Hat, Safety Glasses, Substantial Footwear, Long Pants, Shirt with Sleeves

Other (*exceptions to minimum PPE requirements, and the circumstances for them, are addressed here or on continuation pages*)

Supervisor: _____

Contractor Safety/IH: _____

Print First and Last Name

Signature / Date

Print First and Last Name

Signature / Date

CPCCo Safety/IH: _____

Print First and Last Name

Signature / Date

JOB HAZARD ANALYSIS/ACTIVITY HAZARD ANALYSIS FOR SUBCONTRACTORS (Continued)

(JHA/AHA)

Project No.:

Task Order/Contract No.:

Work Activity	Hazards Present	Required Safety Measures/PPE

JHA/AHA ATTENDANCE ROSTER

Print First and Last Name	Signature	Craft/PositionTitle	Organization