**ENVIRONMENTAL HEALTH AND SAFETY PLAN TEMPLATE**

The New York City Department of Design and Construction (NYCDDC) requires Contractors and Consultants to submit an Environmental Health and Safety Plan (EHASP) for projects that require handling, transportation, and disposal of potential and identified contaminated and hazardous materials and for which the NYCDDC’s Standard Specification for Handling, Transportation, and Disposal of Potential and Identified Contaminated and Hazardous Materials (Section 8.01S Health and Safety) has been included in the Contract. This EHASP Template was prepared to be used as a guide to help Contractors and Consultants prepare a EHASP that is compliant with applicable State and Local rules and regulations including NYCDDC’s rules and regulations.

The EHASP shall be prepared as a stand-alone document. The EHASP shall be submitted to the NYCDDC Office of Environmental and Hazmat Services (OEHS) [formerly known as Office of Environmental and Geotechnical Services (OEGS)] for review and acceptance prior to performing any field sampling activities. This EHASP Template is meant to be a guide to help environmental professionals with the development of an EHASP that is compliant with NYCDDC rules and regulations.

This EHASP shall be completed in accordance with NYCDDC’s Specifications for Handling, Transportation, and Disposal of Potential and Identified Contaminated and Hazardous Materials (Section 8.01S Health and Safety).

**INSTRUCTIONS FOR COMPLETING THE EHASP TEMPLATE**

Each section of this EHASP Template includes instructions and fillable text fields denoted in blue. Read the instructions for each section before completing that section. The blue text indicates information to include in each text field. Click on the blue text and start typing. This EHASP Template is an editable document file to which you may add tables and additional text. For sections of the EHASP Template that do not apply, insert “Not Applicable” in the text field and check the “Not Applicable” box where available. Any edits to black text should be completed using track changes.

**REGULATORY REFERENCES**

The following State and Local rules and regulations noted below are offered as references that can be viewed to assist with the completion of the EHASP Template. The list, along with hyperlinks to the regulatory references, is not all inclusive but offers some general guidance.

* NYSDEC Spill Guidance Manual
	+ https://www.dec.ny.gov/regulations/2634.html
* NYSDEC CP-51 – Soil Cleanup Guidance Policy
	+ https://www.dec.ny.gov/docs/remediation\_hudson\_pdf/cpsoil.pdf
* NYSDEC Spills Technology Remediation Series (STARS) Guidance Documents
	+ https://www.dec.ny.gov/regulations/2393.html
* NYSDEC DER-10 – Technical Guidance for Site Investigation and Remediation
	+ https://www.dec.ny.gov/regulations/67386.html
* NYSDEC Soil Cleanup Objective (SCOs)
	+ https://www.dec.ny.gov/docs/remediation\_hudson\_pdf/part375.pdf
* NYSDEC Groundwater Quality Standards (GWQS)

While the NYCDDC has made every effort to ensure the accuracy of all instructions contained in this EHASP Template, it is the Rules and Regulations of the City and State of New York, not the Template, that govern your obligations with respect to the preparation of the EHASP.

This plan is not designed to address mechanical or general construction safety concerns, nor to supersede or replace any Occupational Safety and Health Administration (OSHA) regulation and/or local and state construction codes or regulations.

**Environmental Health and Safety Plan**

**EHASP Prepared for:**

Insert Project Name

Insert Capital Project ID Number

Insert Project/Site Address/Location

 Insert Project/Site Phone Number



New York City Department of Design and Construction

30-30 Thomson Avenue, Queens, NY 11101

Insert Contractor Name

Insert Address, City, State, Zip Code

**EHASP Prepared By:**

Insert Company or Organization Name

Insert Contact Name

Insert Address, City, State, Zip Code

 Insert Phone Number

Insert Fax/Email

**EHASP Preparation Date:**

Insert Date

**EHASP Revision Date:**

Insert Date

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Appendix C Map of Route to Nearest Hospital

Appendix D Map of Evacuation Routes from the Site

Acronyms

The following acronyms are referenced in this EHASP Template. Any additional acronyms included in the EHASP should be added to the table below.

|  |  |
| --- | --- |
| **Item** | **Description** |
| APRS | Air Purifying Respirators |
| GWQS | Groundwater Quality Standards |
| EHASP | Environmental Health and Safety Plan |
| HAZWOPER | Hazardous Waste Operations and Emergency Response |
| JSA | Job Safety Assessment |
| NIOSH | National Institute for Occupational Safety and Health |
| NYCDDC | New York City Department of Design and Construction |
| OSHA | Occupational Safety and Health Administration |
| PPE | Personal Protective Equipment |
| SCOS | Soil Cleanup Objectives |
| SDS | Safety Data Sheets |
|  STARS | Spills Technology Remediation Series |
| USGS | United States Geological Survey  |
| VOCs | Volatile Organic Compounds |
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Revision Log

The following revision log should be completed with the initial submission and subsequent revisions. The revision date noting two digits for the month, two digits for the day, and four digits for the year (i.e., 00/00/0000) should be entered in the Date column. The Revision Number should offer revision number with two digits (i.e., 00, 01, 02, 03 – noting 00 as the initial submission) with EHASP as the descriptor (i.e., EHASP-00, EHASP-01, EHASP-02). Revision Description column should contain brief description of changes and/or initial submission.

|  |  |  |
| --- | --- | --- |
| **Date** | **Revision Number** | **Description** |
| 00/00/0000 | EHASP-00 | Initial submission for NYCDDC for review. |
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Certification Statement

EHASP Certification by Insert Name of Certified Industrial Hygienist

1. Insert Name of Certified Industrial Hygienist certifies that this EHASP dated Insert Date and all information included is true, accurate, and complete to the best of our professional knowledge and judgement; and
2. This EHASP has been prepared in accordance with all applicable rules and regulations; and
3. This EHASP has been prepared in conformance with NYCDDC Specifications for Handling, Transportation, and Disposal of Potential and Identified Contaminated and Hazardous Materials (Section 8.01 S.1)

Insert Author’s Signature

Insert Author’s Name / Affiliation / Date

# INTRODUCTION AND PROJECT PURPOSE

## Project Discussion

Instructions:

1. *Provide a general description of the project and construction activities at the site.*
2. *Identify the project* *activity that will result in the need to handle, transport, and dispose of potential and identified contaminated and hazardous materials; why a EHASP has been prepared; and that it has been certified by a Certified Industrial Hygienist (see Certification Statement).*
3. *Identify the key personnel and their contact information.*

Insert Text Here

The key personnel for the project are identified below with their contact information:

**Key Personnel**

1. Name: Insert Text Here

Company/Organization: Insert Text Here

Title: Insert Text Here

Phone Number: Insert Text Here

Email: Insert Text Here

1. Name: Insert Text Here

Company/Organization: Insert Text Here

Title: Insert Text Here

Phone Number: Insert Text Here

Email: Insert Text Here

1. Name: Insert Text Here

Company/Organization: Insert Text Here

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Company/Organization: Insert Text Here

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Phone Number: Insert Text Here

Email: Insert Text Here

1. Name: Insert Text Here

Company/Organization: Insert Text Here

Title: Insert Text Here

Phone Number: Insert Text Here

Email: Insert Text Here

## Site Description

Instructions:

1. *Provide a general description of site, including natural and constructed features.*
2. *Identify the size and location of the site.*
3. *Describe the existing land use of the site and surrounding area.*
4. *Provide a Project Location Map as Figure 1. Following this section is an 8 ½” by 11” portrait border template to be utilized for the preparation of Figure 1.*
5. *Provide ownership information for the site if it is not owned by New York City.*

|  |
| --- |
| **Project Site**Capital Project ID Number: Insert Text HereStreet/Location: Insert Text HereCity: Insert Text HereState: New YorkZip Code: Insert Text HereBorough: Insert Text HereBlock(s) and Lot(s): Insert Text Here from GISBusiness Days and Hours for the Project: Insert Text Here |

**General Site Description**

Insert Text Here

Project Location Map is included as **Figure 1.**

**INSERT NEW FIGURE 1 CONTAINING THE PROJECT NAME, CAPITAL PROJECT ID AND ADDRESS**



# WORKER TRAINING PROCEDURES AND MEDICAL SURVEILLANCE

## OSHA Training

Instructions:

1. *Identify that site workers will receive the 10-hour Occupational Safety and Health Administration (OSHA) Construction Training.*
2. *Identify that site workers entering hazardous waste exclusion zones will also receive the 40-hour Hazardous Waste Operations and Emergency Response (HAZWOPER) Standard Training with the 8-hour annual refresher training.*
3. *Identify that the Job Superintendent will receive 30-hour OSHA Construction Training.*
4. *Identify that on-site management and supervisors who directly supervise workers engaged in hazardous waste operations receive the 40-hour HAZWOPER Training and at least 8 hours of additional specialized training on managing these operations.*

Insert Text Here

## New Employee Training and Refresher Training

Instructions:

1. *Describe the new employee orientation and training that will be received.*
2. *Identify when employees will receive refresher training and describe what this training will be.*

Insert Text Here

## Specific Required Training

Instructions:

1. *Identify that specific training will be provided to the site workers who will conduct certain activities or tasks such as confined space. Discuss when this training will be provided.*
2. *Identify that daily job briefings will be conducted to provide information on any hazards associated with tasks that will be conducted that day.*

Insert Text Here

## Medical Surveillance

Instructions:

1. *Identify that medical surveillance will be conducted for all site workers who will enter hazardous waste exclusion zones.*
2. *Identify that baseline medical examinations will be conducted on these personnel.*
3. *Discuss that these personnel will also have to identify that they have the ability to wear National Institute for Occupational Safety and Health (NIOSH) approved respirators.*
4. *Provide the name, office address, and phone number of the medical consultant utilized.*

Insert Text Here

The medical consultant utilized to conduct medical surveillance for this project and their contact information is identified below:

**Medical Consultant**

Name: Insert Text Here

Office Address: Insert Text Here

Phone Number: Insert Text Here

## Record Keeping

Instructions:

*Identify and provide the specific training and medical records appropriate for the scope of work associated with this EHASP.*

All workers, including contractors and subcontractors, must review and sign this EHASP. Worker training and medical records as appropriate for the proposed scope of work must be retained for 36 months and must be made part of this EHASP. Records include, but are not limited to:

* OSHA 40-hour HAZWOPER Standard Training with the 8-hour annual refresher training certificate
* OSHA Outreach 10-hour and 30-hour Construction Training certificate
* OSHA Medical Clearance (1910.134, 1910.120), including Respiratory Protection Medical Clearance and Medical Surveillance Records
* Record of the daily job briefings
* Confined space permits, as needed.
* And other required site-specific safety certificates (e.g., work on railways, etc.).

## Training

All those who work at sites where contamination is or may be present must recognize and understand the potential hazards to health and safety. The following training schedule is required:

* All personnel who enter the work area while intrusive activities are being performed will have completed a 40-hour training course that meets the requirements of 29 CFR Part 1910, Occupational Safety and Health Standards. Up-to-date 8-hour annual refresher training that meets the 29 CFR 1910 requirements is also required.
* OSHA Outreach 10-hour and 30-hour Construction Training certificates need to be updated every 5 years.
* In addition, some project-specific tasks may require additional training, such as railroad track safety training classes (Refer to USDOT Federal Railroad Administration 49 CFR 214), roadway training classes (Refer to USDOT Federal Highway Administration Manual of Uniform Traffic Control Devices), state/city-specific asbestos training, or training specific to lead.

# HAZARD ASSESSMENT

## Job Safety Assessment (JSA) and Safety Data Sheets (SDSs)

Instructions:

1. *Discuss how a Job Safety Assessment was prepared by the contractor to identify potential hazards. Identify that the Job Safety Assessment for the project is in* ***Appendix A****.*
2. *Describe what Safety Data Sheets (SDS) are and why they are required. Identify that the SDS for the project are in* ***Appendix B****.*
3. *Ensure that the Job Safety Assessments are up to date. JSAs should be reviewed periodically for changes, such as when there are changes in the tools/equipment being used or the scope of work.*

A Job Safety Assessment is a systematic technique of analyzing potential hazards for each task needed for a job. It helps integrate accepted health and safety protocols into a particular organizational operation to implement the safest way to complete the job.

Insert Additional Text Here

Safety Data Sheets are comprehensive documents containing detailed information about a specific substance or mixture used in workplaces, including information such as the properties of each chemical; the physical, health, and environmental health hazards; protective measures; and safety precautions for handling, storing, and transporting the chemical.

Insert Additional Text Here

## Task Specific Hazards

Instructions:

1. *Identify that there are task specific hazards on a construction site. Describe the tasks (i.e., during operation of heavy equipment, during excavation of fill and trenching activities, etc.) and the hazards associated with conducting them on site.*
2. *Identify safety measures that will be implemented to protect site workers when they conduct these tasks.*

Insert Text Here

## Physical Hazards

Instructions:

1. *Identify potential physical hazards (i.e., noise, heat stress, cold stress, etc.) that site workers may encounter during construction.*
2. *Describe how site workers could be affected by these potential physical hazards.*
3. *Identify methods of protection that site workers could use against these hazards.*

Insert Text Here

## Biological Hazards

Instructions:

1. *Identify potential biological hazards (i.e., poisonous plants, dangerous wildlife, insects that could transmit disease, etc.) that site workers may encounter during construction.*
2. *Describe how site workers could be affected by these potential biological hazards.*
3. *Identify methods of protection that site workers could use against these hazards.*

Insert Text Here

# HAZARDOUS SUBSTANCE EVALUATION

## Investigations Conducted for Soil and Groundwater

Instructions:

1. *Describe the investigations conducted to determine the presence of contaminated material on site.*
2. *Utilize the information provided in Section 2 of the Water Handling Plan and Material Handling Plan and Field Sampling Summary Report if prepared for this project.*

**Soil Investigation**

Insert Text Here

**Groundwater Investigation**

Insert Text Here

## Laboratory Analyses

Instructions:

1. *Identify that soil samples and groundwater samples were taken during the investigations and were sent to a laboratory for analysis.*
2. *Describe the results of these analyses.*

Insert Text Here

## Engineering Controls to Mitigate Worker Exposure

Instructions:

1. *Identify that engineering controls will be implemented if necessary to mitigate worker exposure to the hazards identified during the investigation.*
2. *Describe the engineering controls that will be utilized.*

Insert Text Here

## Hazardous Substance Handling Procedures

Instructions:

1. *Describe the hazardous substance handling procedures that will be implemented on site.*
2. *Identify that these procedures will comply with federal, state, and local regulations; NYCDDC Contract Specifications; and the Water Handling Plan and Material Handling Plan prepared for this project.*
3. *Discuss how the materials will be handled or stockpiled for disposal after soil testing is conducted.*
4. *Identify how soil screening will be performed and any personal protective equipment that will be utilized.*
5. *Describe how the excavated material will be transported off site for disposal and tracking of this material with manifests.*
6. *Utilize the information identified in Section 3 of the Material Handling Plan if prepared for this project.*

Insert Text Here

# AIR MONITORING PROCEDURES

## Particulate Matter (Dust) Monitoring

Instructions:

1. *Identify how particulate matter (dust) could be generated on site and when and where dust monitoring will be conducted.*
2. *Identify what equipment will be utilized to conduct particulate matter monitoring on site.*
3. *Describe the circumstances when dust suppression techniques will be implemented and what these techniques will be.*
4. *Identify when workers will be required to wear Air Purifying Respirators (APRs).*

Insert Text Here

## VOC (Vapors/Odors) Monitoring

Instructions:

1. *Identify how volatile organic compounds (VOCs) could be generated on site and when and where VOC monitoring will be conducted.*
2. *Identify what equipment will be utilized to conduct VOC monitoring on site.*
3. *Describe the circumstances when vapor suppression techniques will be implemented and what these techniques will be.*

Insert Text Here

## Activity Specific Air Monitoring

Instructions:

1. *Identify the level of personal protective equipment (PPE) that the worker on site will require. The required level of PPE is activity specific and based on air monitoring results and the properties of contaminants that will be encountered.*
2. *Discuss the methods that will be utilized to reduce exposure risks to workers and the public.*
3. *Identify that the results of all air monitoring will be recorded.*

Insert Text Here

## Personal Protective Equipment

Instructions:

1. *Describe the levels of PPE for different sites based on air monitoring results.*
2. *Identify the PPE that will be utilized for the different site levels.*

Insert Text Here

#  EMERGENCY RESPONSE PROCEDURES

## Types of Emergencies

Instructions:

1. *Identify the types of emergencies (medical, explosion, fire, chemical or hazardous substance spill, etc.) that could occur on site.*
2. *Describe the emergency procedures that will be followed to respond to these emergencies.*

Insert Text Here

## Emergency Coordinators and Contact Numbers

Instructions:

*Identify the name, title, and phone numbers of the employees who have the responsibility to respond to an on-site emergency.*

The emergency coordinators for the site and their phone numbers are identified below:

1. Name: Insert Text Here

Company/Organization: Insert Text Here

Title: Insert Text Here

Phone Number: Insert Text Here

1. Name: Insert Text Here

Company/Organization: Insert Text Here

Title: Insert Text Here

Phone Number: Insert Text Here

1. Name: Insert Text Here

Company/Organization: Insert Text Here

Title: Insert Text Here

Phone Number: Insert Text Here

## Employee Responsibility During an Emergency

Instructions:

1. *Identify the title of the employee who is primarily responsible for responding to an on-site emergency and the title of the backup employee.*
2. *Describe what tasks these employees are expected to conduct during an on-site emergency situation.*
3. *Discuss the spill control and reporting procedures.*

Insert Text Here

## Types and Location of On-Site Emergency

**Equipment**

Instructions:

1. *Provide a list of all emergency equipment on-site.*
2. *Identify where the emergency equipment is located on site.*

All on-site emergency equipment is listed below. The location of this equipment on the site is also identified.

**Emergency Equipment**

Type: Insert Text Here

Location: Insert Text Here

Type: Insert Text Here

Location: Insert Text Here

## Emergency Telephone Numbers

Instructions:

1. *Provide the emergency contact information for the local police department, fire department, and hospital.*
2. *Additional emergency contact information for other entities (spill control, poison control, etc.) should also be identified.*

Below is the emergency contact information for the local police department, fire department, and hospital:

**Police Department**

Name: Insert Text Here

Phone Number: Insert Text Here

**Fire Department**

Name: Insert Text Here

Phone Number: Insert Text Here

**Hospital**

Name: Insert Text Here

Address: Insert Text Here

Phone Number: Insert Text Here

**Any Additional Emergency Entities**

Name: Insert Text Here

Phone Number: Insert Text Here

## Map of Route to Nearest Hospital

Instructions:

Identify that a map of the route to the nearest hospital is provided in **Appendix C**.

A map of the route from the site to Insert Name of Nearest Hospital is provided in Appendix C.

## Site Evacuation

Instructions:

1. Describe the site evacuation safety procedures.
2. Identify that a map of evacuation routes from the site is provided in **Appendix D**.

Insert Text Here

A map of evacuation routes from the site is provided in Appendix D.

#  WORK PRACTICES

## Segregation of Work Areas

Instructions:

1. Identify the designated zones (exclusion, decontamination, and support) that will be established on-site to reduce migration of hazardous material and prevent exposure by unauthorized personnel.
2. Describe where these zones will be located on the site and how site workers will be notified of any location changes.
3. Identify what tasks will be conducted in these zones and where personal protective equipment (PPE) will be required and stored.

Insert Text Here

## Field Safety and Standard Operating Procedures in the Exclusion Zone

Instructions:

1. *Identify the standard operating procedures that will be implemented in the exclusion zone to control hazards on site.*
2. *Provide a brief description of each standard operating procedure.*

Insert Text Here

## Decontamination Procedures

Instructions:

1. In this section, describe how PPE and equipment utilized in the exclusion zone will be decontaminated.
2. Identify the types of PPE that will be disposed of instead of decontaminated. Discuss how this PPE will be collected and disposed of.
3. Discuss how the decontamination water will be collected and disposed of.

Insert Text Here

## 7.4 Confined Space Entry Program

Only personnel who have attended and successfully completed Confined Space Training in accordance with 29 CFR 1926 Subpart AA "Confined Space in Construction", are permitted to enter a non-permit required or permit-required confined space, as defined by OSHA. All Confined Space activities shall be performed in accordance with Confined Space Entry Program. A permit-required confined space has the following characteristics:

* Large enough to bodily enter and perform work.
* Limited means of entry and exit.
* Not designed for continuous human occupancy (e.g., an underground or aboveground storage tank).
* Contains material with the potential to engulf the entrant.
* Is shaped in such a way that someone could be trapped or asphyxiated (e.g., trenches that have inwardly converging walls or a floor that slopes downward and tapers to smaller cross section).
* Contains any other recognized serious safety or health hazards and is subject to the accumulation of toxic or flammable contaminants or an oxygen deficient atmosphere—a condition where one or more of the following exist:
* Unfavorable natural ventilation that could contain or produce dangerous air contaminants;
* Oxygen deficient atmosphere;
* Flammable/explosive atmosphere;
* Dangerous concentrations of air contaminants;
* Limited or restricted means of entry or exit (e.g. tanks, bins, vaults, pits, trenches, manholes etc.);
* Possible unexpected release of hazardous energy; or
* Instability of stored product.

A non-permit required confined space has the following characteristics:

* Large enough to bodily enter and perform work.
* Limited means entry and exit.
* Not designed for continuous human occupancy.
* Contains material with the potential to engulf the entrant.
* Is shaped in such a way that someone could be trapped or asphyxiated.
* Does not contain or have the potential to contain atmospheric hazards capable of causing injury or serious physical harm to the entrant.

If confined space entry is anticipated based on known site/sampling access, insert the Confined Space Entry Program, including all applicable forms, here.

**Appendix A**

**Job Safety Assessment**

**JOB SAFETY ASSESSMENT**

**Job Title** **-** Insert Text Here

|  |  |  |
| --- | --- | --- |
| **Tasks/Procedures** | **Hazards** | **Hazard Control Measures** |
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**Appendix B**

**Safety Data Sheets**

**Appendix C**

**Map of Route to Nearest Hospital**

**Appendix D**

**Map of Evacuation Routes from the Site**