

Moderate Risk Job Safety Analysis

This form must be completed by the contractor and submitted to the Technical Representative identified in the contract for approval prior to work commencement. In addition, this form must be maintained at the site where work is being performed.

Job Title			
Contract Number	Building/Area Argonne		
Contractor			
Contractor	Technical Rep		
Project Manager	Phone No.		
Phone No	Divisional ES&H Coordinator		
Foreman	Phone No Page		
Phone No Page			
ESH Rep	Other		
Phone No Page	<u> </u>		
Designated Competent Person	Argonne Approvals		
Discipline	☐ Approved		
Employee Name	Approved as Noted		
Discipline	Not Approved - Resubmit		
Employee Name			
	Technical Representative Date		
	Divisional ES&H Coordinator Date		

- The contractor ES&H representative must hold an orientation with all employees prior to work identifying the hazards related to their scope of work and have each person sign the signature sheet attached.
- Identify location of **Emergency Telephones** and designated **Tornado Shelters** in relationship to the work site and provide phone numbers: **Laboratory Phone 911, Cellular 630-252-1911**.
- Emphasize compliance with OSHA 29 CFR 1910 and 1926.
- Utilizing the format on attached pages, identify hazards and safety precautions/procedures to mitigate hazards.

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Phase of Work	Safety Hazard	Precautions/Safety Procedures
Argonne Requirements	Argonne ES&H Compliance and Emergency Situations.	All contractor personnel assigned to work on the Argonne site will attend/complete Mini Contractor Safety Orientation (CSO). The contractor must maintain proof of this training on his/her person by carrying the CSO Argonne card provided by the instructor. The contractor must provide proof of this training to the Tech Rep or SI when requested. In addition, all contractor personnel are to attend building/area orientation in relation to their scape of work to opeure they are
		to their scope of work to ensure they are aware of shelters during severe weather or emergency evacuation meeting points as well as any other special conditions in relation to the specific building/area
Vendor Personnel Check-In	Worker Accountability	The contractor must report daily, by contacting the Tech Rep, the number of employees he has on site. Contractor is also responsible for notifying Tech Rep of arrival/departure.
General Conditions	PPE, Unauthorized Personnel In Work Area & Work Safe Practices	ANSI approved safety glasses and sturdy leather work shoes must be worn when servicing the system. All work zones, per scope of work, will be sectioned off or barricaded with ANSI/OSHA compliant signage posted.
Tool Inspection	Broken or Unauthorized Tools	All tools and equipment must be inspected by Argonne Tech Rep prior to use. Any tool or piece of equipment deemed unsatisfactory will be tagged and removed from the worksite. Any tool or piece of equipment that leaves the Argonne site will have to be reinspected upon its return. GFCIs will be utilized on all drop cords and hand held tools.

Review of Emergency Routes and Assembly Point:

Basic	Infor	mai	tion
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Basic Safety Rule Reminders:

- 1. Safety hat and safety glasses with side shields required as a minimum.
- 2. Inspect all tools and equipment for OSHA compliance before use.
- 3. Fall protection required when working heights above 6 feet when handrail or other fall protection is not provided.
- 4. Flag work areas and post warning signs.
- 5. Ground fault circuit interrupters (GFCIs) are required on all 110 and 120 volt receptacles.
- 6. Stairways, passageways, and access ways must be kept free of materials and equipment.
- 7. Orderly housekeeping shall be maintained.
- 8. Report all injuries/illnesses and near misses to the Technical Representative.
- 9. Metal ladders are prohibited.
- 10. NO DUMPING OF ANY KIND SHALL BE PERFORMED ON SITE WITHOUT USE OF A QUALIFIED AND COMPETENT SPOTTER. After dumping their loads, all trucks must lower their beds before driving away.
- 11. Any laser use (class 3a, 3b, or 4) requires Argonne ES&H review.

^{*}Use separate sheets as necessary.

Signature Sheet

Contractor		Building/Area					
Contract Number		Job Title Company (not Argonne)					
Superintendent		ES&H Rep					
ES&H information relative to this job has been reviewed with me by my company ES&H representative.							
Name (please print)	Badge No.	Signature	Date				
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Note: Contractor representative will provide a copy of this sheet with initial signatures and all added signatures to the Argonne Technical Representative.