

OP 359, Field Activity Documentation



CABRERA SERVICES
RADIOLOGICAL • ENVIRONMENTAL • REMEDIATION

CABRERA DAILY REPORT

1. PROJECT INFORMATION

PROJECT NAME/LOCATION: SUPPLEMENTAL RADIOLOGICAL SURVEY

Former UNC Manufacturing Facility, New Haven, CT

DATE: 02/21/17

REPORT No. 001

CONTRACT #:

CABRERA PROJECT #: 10-1007.00

TASK #: 016

FIELD SITE MANAGER: Al Craig

PROJECT MANAGER: Rob Flowers

2. WEATHER

TEMPERATURE RANGE: 27-42degrees F

WIND SPEED/DIRECTION: 6-9 mph NE

PRECIPITATION LAST 24 HOURS: ☐ YES ☒ NO

TYPE: N/A

AMOUNT: N/A

BAROMETRIC PRESSURE: 30.32"

HUMIDITY: 41-87%

HEAT INDEX RANGE: N/A

WEATHER DELAYS: ☐ YES ☒ NO

DELAY TIME (HOURS): N/A

3. SUMMARY OF WORK

Mobilized to the site. Conducted safety meeting. Reviewed APP and AHAs. Received equipment and instruments. Performed snow removal activities to provide truck access to the north side of the building. Began initial instrument QC set up. Moved cars around inside the building to facility work areas. Set up lights in the west corridor rooms and hooked them up to the electricity. Continued site set up.

4. MATERIALS & EQUIPMENT BROUGHT ON-SITE

IMC Liners

Receipt inspection required & completed? ☐ Yes ☒ No

5. INSPECTIONS

TYPE	DESCRIPTION	ACTION
PREPARATORY		
INITIAL		
FOLLOW-UP		
ARE ANY DEFICIENCIES NOTED IN FOLLOW-UP INSPECTIONS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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)	See Section 3 “Summary of Work” (8 Hrs)
Alfred Craig	Site Safety and Health Officer (SSHO)	See Section 3 “Summary of Work” (8 Hrs)
Ann Jacobs	Environmental Scientist	See Section 3 “Summary of Work” (8 Hrs)
Greg Bright	Project Manager	See Section 3 “Summary of Work” (8 Hrs)

9. SUBCONTRACTOR PERSONNEL ON-SITE				
SUBCONTRACTOR NAME	JOB DUTY	TASK(S) PERFORMED	# OF PERSONNEL	MAN-HOURS
AIG	Asbestos abatement	Site Mobilization	3	20
TOTALS			3	20

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		02/21/2017	
ERG	1 Ludlum 2360 scaler/rate meter with 43-93 zinc sulphide scintillation probe	193638/ PR199836		02/21/2017	
ERG	1 Ludlum 2360 scaler/rate meter	220242		02/21/2017	
ERG	1 Ludlum 2221 scaler/ digital rate meter with FIDLER sodium iodide scintillation probe	190205/ PR01807D		02/21/2017	
ERG	1 Ludlum 2929 scaler sample counter with 43-10-1 zinc sulphide scintillation probe	200051/ PR215948		02/21/2017	
ERG	1 Ludlum model 12 meter with 44-9 Geiger-Mueller probe	276863/ PR147787		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		02/21/2017	
Cabrera	1 Tc-99 check source	5634-05		02/21/2017	
Cabrera	1 Co-60 check source	267D21		02/21/2017	
Cabrera	1 Ludlum model 2224-1 scaler/rate meter with 43-93 Zinc sulphide scintillation probe	227246/ PR244549		02/21/2017	
Cabrera	1 Ludlum Model 3 rate meter with 44-9 Geiger-Mueller probe	219266/ PR		02/21/2017	
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	
NEMF	Wheel Scale			02/21/2017	
Williams Scotsman	1 8' by 20' connex box			06/22/2016	

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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF YES, EXPLAIN:	
DID A DELAY OR WORK STOPPAGE OCCUR TODAY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF YES, EXPLAIN:	
HAS ANYTHING DEVELOPED IN THE WORK WHICH MAY LEAD TO A CHANGE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF YES, EXPLAIN:	

14. VERBAL INSTRUCTIONS RECEIVED:

15. HEALTH & SAFETY SUMMARY	
SAFETY BRIEFINGS	
WAS A SAFETY MEETING HELD? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TOPIC DISCUSSED: Safe completion of tasks described in Section 3
SAFETY INSPECTIONS	
WAS A SAFETY INSPECTION CONDUCTED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
DEFICIENCIES NOTED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DESCRIBE:
CORRECTIVE ACTIONS TAKEN: <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DESCRIPTION:
CABRERA INCIDENT REPORTING FORM ATTACHED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO CLIENT SPECIFIC INCIDENT REPORTING FORM ATTACHED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
ANY NEAR MISSES/OBSERVATIONS ON-SITE TODAY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DESCRIPTION:
H&S RECOMMENDATIONS	

16. REMARKS

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: Ann Jacobs	SIGNATURE:
DATE: 02/22/17	

18. PROJECT MANAGER REVIEW & ACCEPTANCE	
REMARKS AND/OR EXCEPTIONS TO REPORT:	
ACCEPTANCE	
NAME/TITLE: Greg Bright, Deputy Project Manager	SIGNATURE:
DATE: 02/22/17	
for Greg Bright	

Photos





