

Appendix H

Daily QC, Safety, SUXOS forms

DAILY QUALITY CONTROL REPORT

DATE: December 4, 2006

DAY	S	M	T	W	TH	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rein	Fog
TEMP: H/L	Hi	71	Low	45	
WIND	Still	Moderate	High	NW@7 mph	
HUMIDITY	Dry	Moderate	High	72%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

<u>Site Prep</u>	
Grids completed, <u>N/A</u>	Grids QC'd this date: <u>00</u>
QC'd to date: <u>N/A</u>	QA'd to date: (<u>2759</u> grids)

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Initial Inspection Site Prep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/4/06, UXOQCS/UXOSO FADL dated 12/04/06, Team FADL dated 12/4/06, Tailgate Safety Meeting dated 12/04/06, JSA Driving dated 12/04/06 (2 pages), Prep for surface removal dated 12/04/06, Initial inspection dated 12/04/06, APP acknowledgment form

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/04/06

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Prep Meetings and Surface Clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Equipment on site		
Type of Equipment	Mob Date	Hours Worked

Today's Activities:
0620 - UXO team mustered at Holiday Inn Express. Give brief on what will be completed during the project.
0700 - All MRS-16 personnel attended safety meeting presented by Al Grant.
Approx. 0800 - Tom G. conducted a project QC prep meeting.
Approx. 0900 - UXO personnel gathered equipment, checked out vehicles etc. in preparation for conducting MEC removal operations.
1215 - On MRS -16. Commenced removing non-MEC range debris and obstacles as well as conducting a surface sweep to identify MEC items that may interfere with vegetation removal.

Note: Six MEC like items in the heavy brush area of the 13.5 acres identified to receive surface and sub-surface clearances were left in place and will be investigated further during tomorrow's surface sweep.

1700 - Secured from field operations.
1715 -1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND None
WEATHER CONDITIONS: Morning 45, afternoon in the 70s.	IMPORTANT TELEPHONE CALLS:



DAILY LOG	DATE	12	04	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0620: UXO team mustered and started the mission briefing.</p> <p>0700: Safety meeting with all personnel involved with the project.</p> <p>0800: Preparatory meeting for all personnel associated with the project.</p> <p>1215: Conducted an initial inspection for site preparation. No deficiencies noted.</p> <p>1230: Worked with Sweep Team the balance of the day.</p> <p>1630: Closed MRS-16 for the day.</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS: cool 45 degrees AM cool 72 degrees PM	N/A IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/04/06



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/04/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, GPS of UXO Grids, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23525 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy west)

Special Equipment: First Aid Kits, Fire Extinguishers, Sonarstest, GPS Equipment

Other: _____

ATTENDEES

NAME-PRINTED

SIGNATURE

John Howe	
John SPARKS	
Harley Davidson	
Joshua Jenkins	
JEFF STEINWAND	
TARA VOLPE	
John Tortolano	
JAMES DRAKE	
Jim MATHISEN	

Meeting Conducted by: A. GRANT

Supervisor: T MATHISEN Manager: KEVIN SEAMANS



JOB SAFETY ANALYSIS

Date: 12/4/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen						
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	<table border="1"> <tr> <td>New:</td> <td>X</td> <td></td> </tr> <tr> <td>Revised:</td> <td></td> <td></td> </tr> </table>	New:	X		Revised:		
	New:		X					
Revised:								
Assembly Point: Main gate MRS-16								
Job Task (What are You Doing)		Audit the Job Audit Time:						
OE Sweep Operations		Supervisor's Comments						
Potential Hazards								
Lifting		Supervisor's Initials						
Slip, Trip, and Falls								
Cuts and abrasions								
Poison oak								
UXO								
Dust								
Recommended Action or Procedure								
Observe walking areas								
Proper lifting technique, weight limit of 60 lbs								
Wear work gloves								
Mod "D" PPE								
Stay with UXO Personnel, Do not pick up any objects								
Use of Dust Mask								
Water intake, stay hydrated								
Crew Name Signatures:	<i>[Signature]</i>	<i>[Signature]</i>						
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>						
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>						
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>						

JOB SAFETY ANALYSIS

Date: 12/4/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Sticker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented/non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>X Coveralls _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>UXO _____</p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <p>OTHER WORK IN AREA</p> <p>X Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of symptoms</p> <p>* How to summon help</p> <p>* How to track personnel</p> <p>Enter and exit the confined space</p> <p>* Maintain contact with all entrants</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION: _____

7148476922

PREPARATORY INSPECTION OUTLINE
(PART I)



Shaw Environmental, Inc.

TERC II - K.2

Contract No.: DACW 05-96-D-0011
Task Order No. 0016
Fort Ord, California

Date: 12/4/06

Title and No. of Technical Section: Draft Final Work Plan, MRS-16 Munitions and Explosives of Concern Removal

Former Fort Ord, California
Surface Removal

Reference Contract Drawings: Figures 1-1 and 1-2

A. Planned Attendants:

	<u>Name</u>	<u>Position</u>	<u>Company</u>
1)	Tom Ghigliotto	CQCSM	PAM
2)	Al Grant	UXOSO/UXOQC	Shaw
3)	Tim Mathisen	SUXOS	Shaw
4)	Dan Nohrden	Site Superintendent	Shaw
5)	Trish Smith	GIS	Shaw
6)	Ashley Rice	GPS	Shaw
7)	Clinton Huckins	QA	USACE
8)	Kevin Siemann	Task Manager	Shaw
9)	Lyle Shurtleff	MMRP Manager	U.S. Army
10)	Shirley Tudor	Biologist	Shaw
11)	Cary Stiebel	MMRP Database Manager	USACE
12)			

B. Submittals required to begin work:

	<u>Item</u>	<u>Submittal No.</u>	<u>Action Code</u>
1)	Draft Final WP MRS-16 MEC Removal		O
2)	SSHP	Rev. 9	A
3)	Associated Activity Hazard Analysis		Approved
4)			
5)			
6)			
7)			

I hereby certify, that to the best of my knowledge and belief, that the above required materials delivered to the job site are the same as those submitted and approved.

Contractor Quality Control Systems Manager

(continued):

PREPARATORY INSPECTION OUTLINE
(PART I)

TERC II - K.2

Contract No.: DACW 05-96-D-0011
Task Order No. 0016
Fort Ord, California

Date: 10/31/06


C. Equipment to be used in executing work:

- 1) Schonstedt GA-52Cx (if required)
- 2) _____
- 3) _____

D. Work areas examined to ascertain that all preliminary work has been completed: Yes

E. Methods and procedures for performing Quality Control, including specific testing requirements:
Three-phase inspections, as required.
Yes

The above methods and procedures have been identified from the project plans and will be performed as specified for the Definable Feature of Work.



Contractor Quality Control Systems Manager

line may be performed by POMFD. The UXO teams will create fuel breaks on the four sides of the site (Figure 1-2). Mechanical vegetation clearance equipment will be used to cut the vegetation. Manual tools such as brush hogs and trimmers may be used in areas where the mechanical cutter cannot gain access, or to trim tree branches. In areas with heavy vegetation that obscures visual inspection of the ground surface, a first cut will be made to a height between 18 and 24 inches above the ground. After visual inspection for MEC, a second cut will be made to a height of no more than 6 inches above ground. In areas with medium to light vegetation where the ground surface can be readily observed before cutting, the vegetation will be cut in one stage to a height of no more than 6 inches above ground. Vegetation cut manually from the fuel breaks will be stockpiled in the burn area as directed by the POMFD.

The UXO team will provide construction support during vegetation clearance in heavily vegetated areas by first conducting a visual survey of the area to be cut to the extent possible and then moving outside of the MSD prior to equipment startup. If during vegetation clearance MEC or an unknown item is encountered, then vegetation clearance will stop and the UXO technician will return to investigate the item. In areas with medium to light vegetation that does not obscure the ground surface, a magnetometer will be used in conjunction with a visual survey of the ground surface for MEC.

The POMFD may complete the fuel break construction by blacklining. If blacklining is performed within the primary containment line, Shaw will delineate the extent of blacklining activities using GPS for future biological monitoring purposes.

In addition to the vegetation removal, timber and rails will be removed from the site as part of the site preparations prior to the burn. Surface debris (e.g., targets) that will impede the geophysical investigation will also be removed.

2.4.2.5 Prescribed Burn Support

Shaw will provide construction support as requested by the POMFD before, during and immediately following the burn.

2.4.3 Surface MEC Removal Procedures

Following the prescribed burn, the UXO team will conduct a surface survey and provide construction support for any additional vegetation clearance that may be required to remove remnant vegetation in the burn area. After vegetation clearance, the UXO team will perform a magnetometer-assisted surface removal of MEC and other metallic debris. The objective will be to remove items that would impede geophysical surveys.

2.4.3.1 Site Set Up

Site setup will include establishing survey control in the field. The border survey delineating the burn boundary will be provided to Shaw by USACE. Shaw will perform a 100' X 100' grid survey of the burn area. Site setup will be performed by the SUXOS, UXOQCS, and one GPS technician. EZs will be established in accordance with Section 2.4.4.9.

2.4.3.2 Geophysical Test Plot for Schonstedt Magnetometers

The purpose of these procedures is to ensure that the Schonstedt magnetometers and metal detectors are functioning properly and optimized for field use. A cleared area will be established, near the administrative office area, where each geophysical instrument intended for use will be tested before and after every field deployment. Simulated MEC items, of the approximate the size and weight of a 37mm projectile, 75mm projectile, a rifle grenade, and a 2.36" rocket, will be buried at various depths and orientations within the calibration area to facilitate the calibration and system control check activities, and to document system performance (see Section 5.0).

Seeded items will be painted orange and identified by a unique Shaw number so that they cannot be mistaken for actual field items. Seeded items will be removed upon completion of the project activities.

2.4.3.3 Magnetometer/Metal Detector Check-Out Procedures

Prior to field use, all magnetometers and metal detectors will be set up following the guidelines in the manufacturer's operating manual for the specific instrument used. Magnetometer instruments used for this project will be Schonstedt GA 52CX magnetometers. All equipment will be operated in a manner consistent with instructions contained in the appropriate operator's manual. All equipment will be function-tested prior to use. Checkout procedures will include:

- Once the instrument has been determined to be working according to the manufacturer's operating manual, the operator will perform a function test using the detection methods described in the manual. A function test will consist of using the instrument over a minimum of two test sources.
- The test sources will be simulants or inert ordnance including 2.36-inch rockets (practice and HEAT), a rifle grenade, and a M48 75mm projectile buried at varying depths to the depth of detection required (see Section 5.0),
- The same sources will be used during each function test to ensure consistency. The instrument detection indication, as described in the operator's manual, will be noted in the instrument logbook.
- Instruments that fail to reproduce a detection indication consistent with previous tests will be checked to ensure that the power supply or batteries are sufficient. If the power

supply is determined to be sufficient and the operator cannot find a fault in accordance with the operator's manual, the instrument will be tagged and removed from service.

- Function tests will be performed each morning before the equipment is put into service.
- If an instrument is determined to be working improperly, the SUXOS and the PM will be immediately notified. Any activities performed using that instrument since its last positive test procedure will be considered invalid and will require reevaluation.
- Upon completion of the function test, the results of the function test will be recorded in the operator's Field Activity Daily Log.

After an instrument has been function-tested at the beginning of each day, the instrument will be checked at least once during every hour of use or each time the instrument is turned on after having been turned off. The instrument indication will be compared to the indication produced during the morning function test. Instruments that fail to produce a consistent indication will be checked and removed from service as required.

2.4.3.4 Vegetation Clearance

Following the prescribed burn, it may be necessary to remove remnant vegetation that did not burn. The UXO team will first conduct a survey to determine that it is safe to enter areas that require vegetation clearance, and will then provide construction support during all vegetation clearance.

Vegetation removal will be accomplished with a combination of mechanical and hand held brush cutting equipment. Brush will be cut as close to ground surface as possible, but no higher than 6 inches to permit proper use of the EM 61 geophysical equipment. Oak trees will not be removed but branches may be trimmed. Manually cut vegetation shall be removed from the area.

2.4.3.5 Surface Removal

Following vegetation clearance, the UXO Team will perform a magnetometer-assisted removal over the whole surface of the fuel breaks and burn area. The removal consists of removing all MEC items and any other metallic object removable by hand encountered on the surface.

The UXO Team will include the following personnel:

- SUXOS
- UXOQCS
- UXOSO
- 1 GPS specialist
- 2 UXO Technician III Team Leaders
- 8 UXO Technicians

The GPS specialist may be a qualified UXO technician, or a survey specialist working alongside a qualified UXO technician. Non-UXO personnel may be used to support UXO technicians for the surface survey and sweep, but the sweep team will be directed and supervised by at least one UXO Tech III. A UXO Tech II will also be included as part of the sweep team. This individual will be responsible for identifying all MEC encountered, and will record the location of the items located during the surface survey and sweep.

The work area will be divided into 100 by 100 foot grids. Wooden stakes will clearly mark each grid corner and each grid will be labeled to identify the grid number. The UXO Team leader will use 100 foot lines (rope) to mark out search lanes. Each search lane will be approximately 5 feet wide and the UXO Team Leader will ensure that each lane is swept in a manner that will cover the entire lane width and overlap into lanes on each side.

The work will be referenced to the existing 100 by 100 foot grids in the Fort Ord GIS. The sweep will locate and remove MEC and metallic scrap from the whole MRS-16 area, including both the fuel breaks and the prescribed burn area. Because one objective for this phase of the work is to remove material that could interfere with the geophysical survey, all visible metallic debris will be removed. Visual inspection will be supplemented by use of hand held magnetometers in areas where surface MEC could be hidden. MD will be segregated from other debris and collected in buckets that will be labeled by grid number for later weighing. MD will be managed as described in Section 2.4.4.17.

Hand held magnetometers used on this site will be the Schonstedt GA-52CX type.

If a MEC item is found during the surface sweep, the location will be conspicuously marked with a red pin flag. Additionally, UXO personnel will complete the Shaw "MEC Information Form" (Appendix F, Form M-1). The location of all MEC items requiring disposal by detonation will be surveyed by GPS. After daily survey by GPS, the red pin flags will be removed. MEC disposal operations will be scheduled weekly or as required through the USACE OE Safety Specialist. It should be noted that a security guard will be present on-site during all hours that UXO crews are not present. MEC disposal procedures are described in Section 2.8.

Metal detectors may be used as required to assist in identifying non-ferrous and ferrous materials. All equipment will be operated as specified in the appropriate operator's manual. All equipment will be function tested in the geophysical test plot prior to each daily use in accordance with the operator's instructions.

Range related debris such as soda cans, paint containers, barrels, etc. will be collected for disposal as trash. In addition, any remaining surface debris that was not removed prior to the burn that will impede the geophysical investigation (e.g., targets) will also be removed.

FIELD WORK VARIANCE

Project Name/Number Fort Ord / 846075 CTO/WAD CTO 16 / WAD 06
Applicable Document: Draft Final Work Plan, MRS-16 Date: 11/30/06
Munitions and Explosives of Concern Removal, Former
Fort Ord, California, August 2006, Revision 1

Problem Description:

Digital Geophysical Mapping (DGM) is to be performed at MRS-16 with the intent to identify anomalies for subsequent excavation by UXO Team. Current plan for field work is to conduct Schonstedt assisted surface removal over the entire site prior to DGM. Approximately 13.5 acres of the site (See Attachment 1) contains significant metallic debris on the surface and subsurface that may preclude identification of distinct anomalies by DGM. Current Work Plan text reads as follows: *In areas where anomaly density is high as shown by the initial DGM, mag and dig or dig and sift operations may be conducted to locate and remove subsurface anomalies prior to the second DGM survey.*

Recommended solution:

Implement the procedures summarized in this FWV.

Impact on present and completed work:

23 grids of subsurface Schonstedt assisted removal to be completed prior to completion of initial DGM survey.

Requested by: Kevin Siemann

Recommended revisions to the plan:

Conduct Schonstedt assisted surface and subsurface removal in 23 grids (See Attachment 2) within the approximately 13.5 acres shown in Attachment 1 prior to DGM implementation. Subsurface removal may allow for better mapping of distinct anomalies during initial DGM phase.

Technical Scope

Majority of the site has minimal metallic debris on the surface, but the former range area (about 13.5 acres) in the western portion of the site has substantial debris on the surface and shallow subsurface. Investigation and removal of subsurface anomalies while doing Schonstedt assisted surface removal within a 23 grid area will be conducted to allow identification of distinct anomalies during follow-on DGM. Subsurface work requires only UXO personnel on-site during intrusive investigations (no sweepers). Information such as production rates obtained during subsurface work within the 23 grid area will be compared against production rates in grids where Schonstedt assisted subsurface removal is performed after DGM to determine most efficient method. Both visually and magnetometer located metallic items will be inspected and categorized as general metallic debris, MD, or MEC. MD items will be weighed and reported as a total weight per grid within the Fort Ord Master Grid System. Any MEC items encountered will also be tracked within the Fort Ord Master Grid System. The following information will be collected for any suspected MEC item located during surface and subsurface investigation and removal: location (surveyed using GPS), nomenclature, orientation, depth, condition, ultimate disposition, and status after further investigation/demolition.

Any MEC encountered will be detonated in place if the item is deemed unsafe to remove. If a MEC item is deemed safe to remove, the item will be stored in a locked bin and detonated later as part of scheduled demolition activities.

All vehicle tracks at MRS-16 will be smoothed out. A qualified biologist will conduct a habitat training session prior to beginning work in MRS-16.

Personnel

Personnel to conduct work To Be Determined, based on availability.

DRAFT



Shaw Environmental, Inc.

Field Work Variance No. TII-015
Page 2 of 2

Clarification Minor Change Major Change

Affects Budget Yes No X
Affects Schedule Yes No X

Signature _____ Date _____
Technical Reviewer

Shaw Approvals:

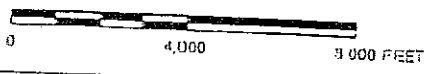
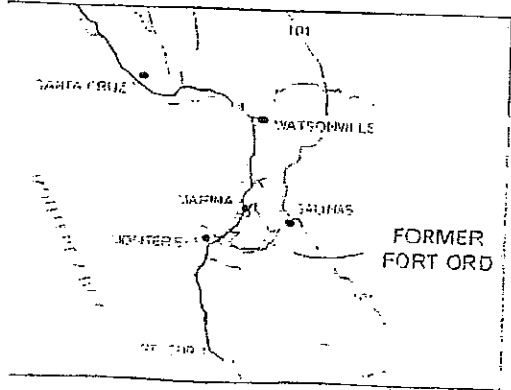
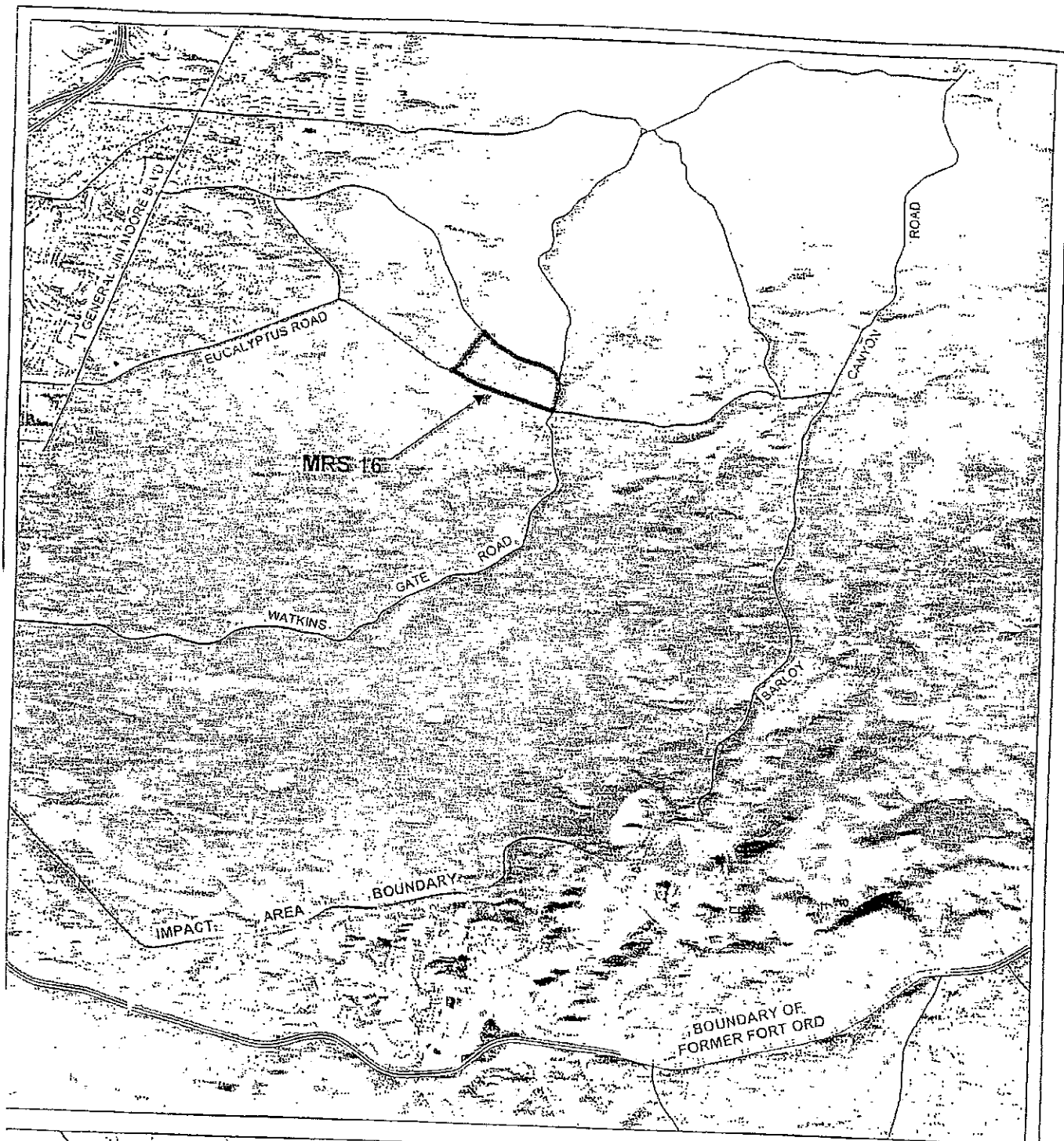
Signature SUXOS Date _____ Signature _____ Date _____
Project Manager

Signature _____ Date _____
UXOQCS

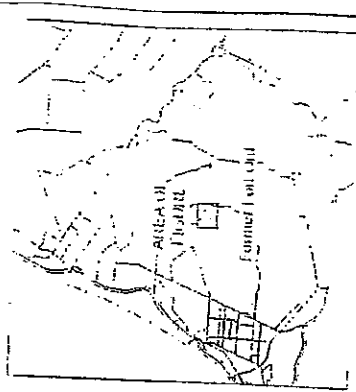
USACE Approval: If Major Change:

Signature _____ Date _____ Signature USACE COR or TM Date _____
OE Safety Specialist

DRAFT



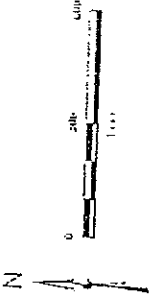
Department of the Army Sacramento District Sacramento, California	
Show DESIGNED P. VELSALL DRAWN P. ELSON CHECKED P. VELSALL DATED	FIGURE 1-1 LOCATION MAP MRS 16 FORMER FORT ORD, CALIFORNIA



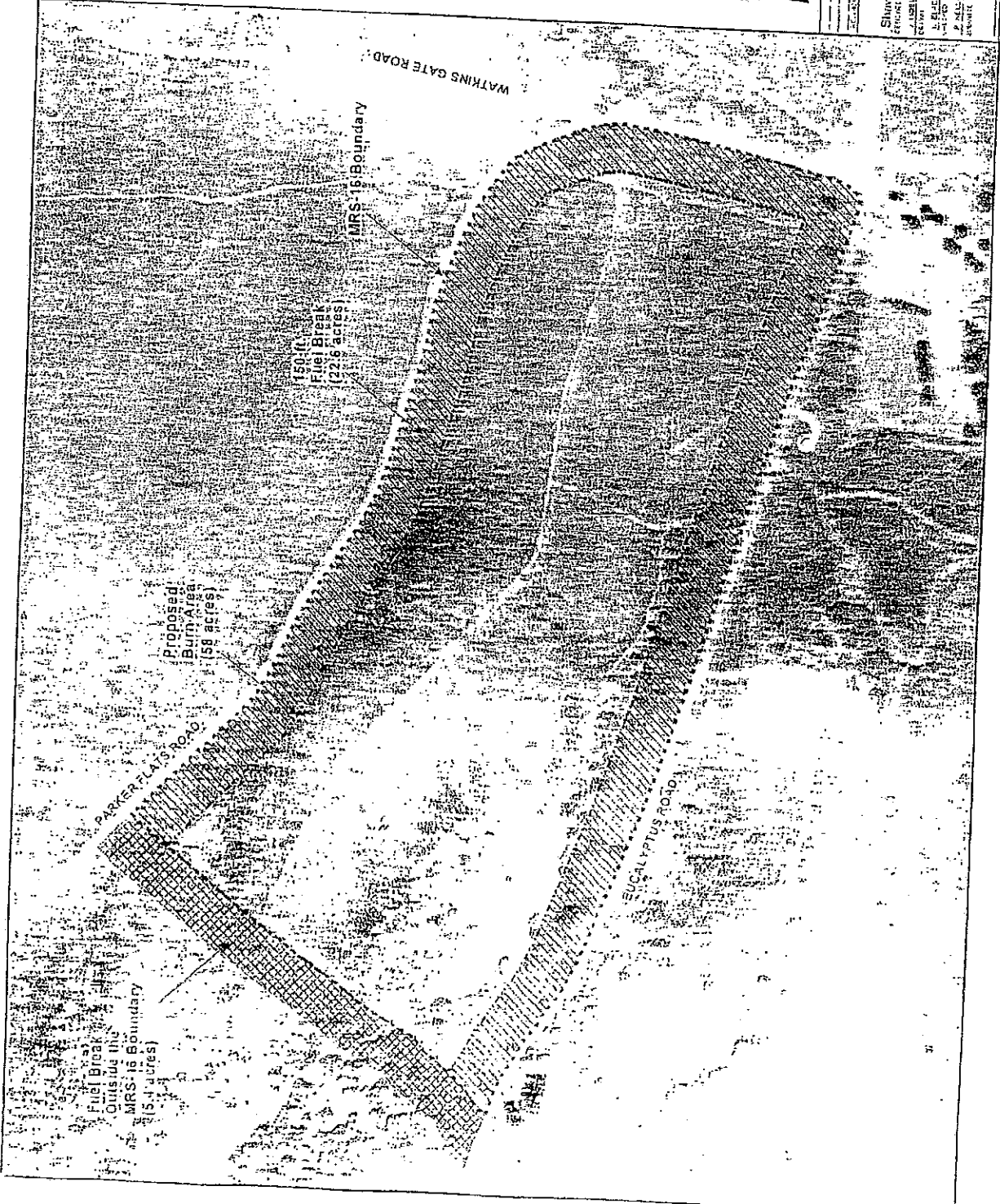
LEGEND

- MRS-16 Boundary
- Proposed Fuel Break
- Fuel Break Area
- Fuel Break Embankment
- MRS-16 Boundary

Based on Plan for several blocks of land
 located along the Highway, a road of 1000'



Sheet	Project	Date	Scale
1	1000'	1947	1" = 100'
2	1000'	1947	1" = 100'
3	1000'	1947	1" = 100'
4	1000'	1947	1" = 100'
5	1000'	1947	1" = 100'
6	1000'	1947	1" = 100'
7	1000'	1947	1" = 100'
8	1000'	1947	1" = 100'
9	1000'	1947	1" = 100'
10	1000'	1947	1" = 100'



Form QC-4

INITIAL PHASE INSPECTION CHECK LIST

Contract No.: DACW 05-96-D-0011
Task Order No. 016
Fort Ord, California

TERC II - K.3

Date: 12/4/06

Title and No. of Technical Section: SITE SETUP

Description and Location of Work Inspected: MIRS-16

Reference Contract Drawings: N/A

A. Key Personnel Present:

	Name	Position	Company
1)	A. GRANT	UXO SAFETY/QC	SCAW
2)	J. MATHISEN	SUXOS	SCAW
3)	B. TUCKWELL	UXO TL	
4)			

B. Materials being used are in strict compliance with the contract plans and specifications: Yes No

If not, explain:

C. Procedures and/or work methods witnessed are in strict compliance with the contract specifications: Yes No

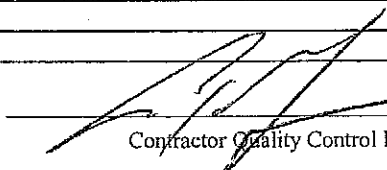
If not, explain:

D. Workmanship is acceptable: Yes No

State where improvement is needed:

E. Workmanship is free of safety violations: Yes No

If no, corrective action taken:


Contractor Quality Control Representative

APP Acknowledgement

WORKER ACKNOWLEDGEMENT OF THE ACCIDENT PREVENTION PLAN (APP) AND SITE ORIENTATION

I have read or been trained to the contents of this APP and I understand the contents. I agree to abide by its requirements. I also have been properly trained, medically monitored, and fit-tested as required for the work that I am to perform. I understand that failure to comply with the provisions of this plan can lead to disciplinary action and possible termination from the project, or Shaw. Documentation of worker acknowledgment will be placed in the Project Records.

Printed Name	Signature	Date
Bruce Trokaski	[Signature]	10/9/06
Tom Chiglinko	[Signature]	12/4/06
Steven Bennett	[Signature]	12/4/06
Ashley Rice	[Signature]	12/4/06
John A. Kauder	[Signature]	12/4/06
TRISH SMITH	[Signature]	12/4/06
Tom Mathison	[Signature]	8-4-06
JAMES DRAKE	[Signature]	12-4-06
John Tortolano	[Signature]	12/4/06
TARA VARE	[Signature]	12/4/06
JEFF STEINWAND	[Signature]	12/4/06
Joshua Jenkins	[Signature]	12/4/06
Harley Davidson	[Signature]	12-4-06
JOHN SHARPS	[Signature]	12-4-06
AL GRAND	[Signature]	12-4-06
VAL VACDIZ	[Signature]	

DAILY QUALITY CONTROL REPORT

DATE: December 5, 2006

DAY	S	M	I	W	TH	F	S
-----	---	---	----------	---	----	---	---

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	71	Low	41	
WIND	Still	<u>Moderate</u>	High	NW@7 mph	
HUMIDITY	Dry	<u>Moderate</u>	High	72%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep	
Grids completed, Surface Swept: 17	Grids QC'd this date: 00
QC'd to date: N/A	QA'd to date:

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Initial Inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

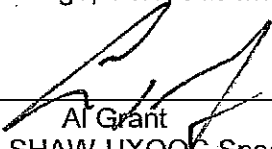
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/5/06, UXOQCS/UXOSO FADL dated 12/05/06, Team FADL dated 12/5/06, Tailgate Safety Meeting dated 12/05/06, JSA Driving dated 12/05/06 (2 pages), Initial for surface removal dated 12/05/06.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/05/06
Date

F1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal **846075**
Field Activity: Site Prep and Surface Clearance.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Equipment on site

Type of Equipment	Mob Date	Hours Worked

Today's Activities:

0630 - At Shaw's field office. Attended safety meeting and operations brief.
0700 - On work site MRS -16. One UXO Team removing range debris and obstacles and the other performing using the portable X-ray unit to further investigate the contents of the MEC like items located yesterday. All 6 - MEC like items were determined to be inert and were transferred to the MEC scrap holding bins near the main gate to the entrance to MRS-16
0700 - 1515 - Jack Tortolano (UXO Tech) provided UXO escort to BLM personnel
Approx: 1500 - UXO Surface Clearance Team reported an unknown pyrotechnic looking items in grid C3B2C4. USACE Safety classified the items as a solid piece of pyrotechnic residue and remove the items to a safe holding area.
1200 - One UXO team commenced surface clearance activities.
Summary: Completed surface clearance on 7 full grids and 10 partial grids. Five 2.36 inch rockets left in place waiting for further investigation tomorrow morning. MEC scrap collected and secured in lockable bin - 14.25 lbs.
1700 - Secured field activities, completed daily's and done for the day at 1800.

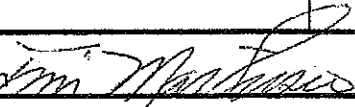
None

WEATHER CONDITIONS:

Morning 41, afternoon in the 70s.

IMPORTANT TELEPHONE CALLS:

SIGNATURE: Tim Mathisen



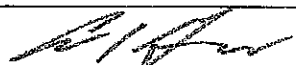
12/5/2006

page 1 of 1



DAILY LOG	DATE	12	05	06
	NO.			
	SHEET	1	OF	1

**UXO Safety/QC FIELD ACTIVITY
DAILY LOG**

PROJECT NAME: MRS-16 Fort Ord		PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate 0700: Teams on site begin X-ray of suspect rockets 1000: Teams started surface sweep of the bowl area 1215: Admin 1500: Conducted a initial inspection for surface sweep operations 1630: Closed MRS-16 for the day. -----Nothing Follows-----		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 41 degrees AM cool 73 degrees PM		IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: A. C. Grant 		DATE: 12/05/06



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

LG

Daily Log	Date:	12	5	2006
	No.			6
	Sheet	1 Of 1		

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA		
0640 Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
0650 Arrived MRS 16, team assignments made, Jack dispatched to BLM, 3 personnel working with backhoe removing obstacles, rest of team x-raying suspected MEC items		
1045 X-raying completed, starting surface sweep, obstacle removal still in progress		
1130 - 1215 Lunch		
1330 Suspected commercial fire starter located, SUXSO notified, removed by USACE		
1400 Obstacle removal stopped due to brush clearance, personnel joined sweep		
1630 MEC Scrap inspected and turned over to SUXOSO		
1650 Returned to office, secured equipment,		
1700 Work completed for today		
<i>Equipment used: 4 rental pickup trucks, 1 backhoe, 11 schonstedts, 5 hand held radios</i>		
<i>Grids surfaced swept: 18 MEC Scrap located: 14.25 lbs</i>		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
USACE OE Safety Huchins		SPECIAL ORDERS AND IMPORTANT DECISIONS:
		NONE
WEATHER CONDITIONS: Temps: 40 - 77		IMPORTANT TELEPHONE CALLS:
Morning: COLD		NONE
Afternoon: Sunny, breeze out of NNE, blowing dust		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: <i>R. Th...</i>		DATE: 5-Dec-06

Grid Summary Sheet

Team #:

Date:

12/5/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3B2A2	12/5/06	12/5/06		X		N	0.5	BDF
C3B2A3				X		N	0	
C3B2A4				X		N		
E3B2B3		12/5/06		X		N		
C3B2C4		Open Item 12/5/06		X		N		
C3B2D5		12/5/06		X		N		
C3B2D6				X		N		
C3B2E5				X		N	0	
C3B2F5				X		N	0	
C3B2F5	12/5/06	12/5/06		X		N	2.5	BDF

Name

Bruce Tinscknell

Reviewed By

Team Leader

SUXOS

QC

Signature/Date

Bruce Tinscknell

Grid Summary Sheet

Team #:

#1
2152006

Date:

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3B2015	12/5/06	12/5/06		X		Y	4	BDA
C3B2016	12/5/06	12/5/06		X		N	4.5	
C3B2016	12/5/06	12/5/06		X		N	0	
C3B2016	12/5/06	12/5/06 <small>ITEM NEEDS TEAM</small>		X		Y	3.25	
C3B2016	12/5/06	12/5/06		X		N	0	
C3B2016	12/5/06	12/5/06			X	N	0	
C3B2017	12/5/06	12/5/06 <small>ITEM NEEDS TEAM</small>			X	Y	0	
C3B2017	12/5/06	12/5/06 <small>ITEM NEEDS TEAM</small>			X	Y	0	BDA

Name

Burt T. [Signature]

Reviewed By

Team Leader

SUXOS

QC

Signature/Date

[Signature] 12/5/06



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 12/5/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Wind Direction: Evacuation Route: Follow route maps		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>Tim Mathisen</i>	<i>John Doe</i>	<i>B. Tincknell</i>
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	



JOB SAFETY ANALYSIS

Date: 12/5/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: Bruce Tincknell Are other crews in area? yes						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">New:</td> <td style="width: 30%; text-align: center;">X</td> <td style="width: 40%;"></td> </tr> <tr> <td>Revised:</td> <td></td> <td></td> </tr> </table>	New:	X		Revised:		
New:	X							
Revised:								

Don't Forget to Fill in Page 2



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/05/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, GPS of UXO Grids, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathison	<i>Tim Mathison</i>
John Howell	<i>John Howell</i>
TARA VOLPE	<i>Tara Volpe</i>
JOHN SPARKS	<i>John Sparks</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
HARLEN DAVIDSON	<i>Harlen Davidson</i>
JAMES DRAKE	<i>James Drake</i>
JEFF STEINWIND	<i>Jeff Steinwind</i>

Meeting Conducted by: A. GARNETT

Supervisor:

Manager:

Form QC-4

INITIAL PHASE INSPECTION CHECK LIST

Contract No.: DACW 05-96-D-0011
Task Order No. 016
Fort Ord, California

TERC II - K.3

Date: 12/6/06

Title and No. of Technical Section: SURFACE SWEEP

Description and Location of Work Inspected: SURFACE UXO SWEEP

Reference Contract Drawings:

A. Key Personnel Present:

	Name	Position	Company
1)	A. GILANT	UXO SAFETY/AC	SHAW
2)	T. MARSHSEN	SUXOS	SHAW
3)	B. TINCKNELL	UXO TL	SHAW
4)			

B. Materials being used are in strict compliance with the contract plans and specifications: Yes No

If not, explain:

C. Procedures and/or work methods witnessed are in strict compliance with the contract specifications: Yes No

If not, explain:

D. Workmanship is acceptable: Yes No

State where improvement is needed:

E. Workmanship is free of safety violations: Yes No

If no, corrective action taken:

Contractor Quality Control Representative

DAILY QUALITY CONTROL REPORT

DATE: December 6, 2006

DAY	S	M	T	W	TH	F	S
-----	---	---	---	----------	----	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	74	Low	31	
WIND	Still	<u>Moderate</u>	High	NW@7 mph	
HUMIDITY	Dry	<u>Moderate</u>	High	72%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

Grids completed, Surface Swept: 50

Grids QC'd this date: 00

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

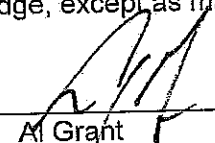
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/6/06, UXOQCS/UXOSO FADL dated 12/06/06, Team FADL dated 12/6/06, Tailgate Safety Meeting dated 12/06/06, JSA dated 12/06/06 (2 pages), Follow-up for surface removal dated 12/06/06,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/06/06

Date

F-1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Site Prep and Surface Clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - At Shaw's field office. Attended safety meeting and operations brief.

0700 - On work site MRS -16. One large UXO Team conducting surface UXO clearance.

0800- 1200 - Jack Tortolano (UXO Tech) over to BLM to provide UXO escort. While providing UXO escort Jack encountered a fuzed 60mm Mortar in the road way. Jack notified USACE OE Safety about the Mortar. USACE Safety instructed Jack to mark the item with flagging tape and move BLM personnel to another area. BLM personnel did not require Jack's services when they moved to another site.

Summary: ONE Dud Fired M49 Trip Flare and ONE Hand Grenade Fuze with Spoon and live cap was located during the surface sweep. Both items were picked up by USACE OE Safety and placed in a safe storage area. A total of 10 - 2.36 inch rockets were left in placed to be X-rayed in the near future. Twenty three full grids and 27 partial grids were completed. MEC scrap colleted: 30.5 lbs.

Note: We did not get a chance to X-ray the 2.36. inch rockets located yesterday due to the vicinity of the working masticator.

1700 - Field operations done for the day.

1800-1845 - Completed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning 31, afternoon in the 70s.	



DAILY LOG	DATE	12	06	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

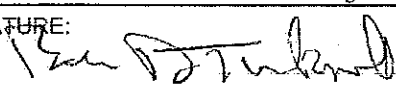
PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate 0700: Teams onsite begin surface sweep operations 1000: Checked on site and conducted a follow-up inspection for surface sweep operations. 1215: Admin 1400: Walked with the teams and observed their methods and looked at their work. All is well. 1630: Closed MRS-16 for the day. <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 31 degrees 73 degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/06/06



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	12	6	2006
	No.			7
	Sheet	1 Of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA		
Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, Jack dispatched to BLM, starting surface sweep,		
Moved sweep team, due to exclusion zone around masticator		
1130 - 1215 Lunch		
Surface sweeps continues		
1630 MEC Scrap inspected and turned over to SUXOSO		
1650 Returned to office, secured equipment,		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks, 1 Polaris utility vehicle, 11 schonstedts, 5 hand held radios		
Grids surfaced swept: 50 MEC Scrap located: 30. 5 lbs		
UXO Located: 1 ea M49 trip flare, 1 ea Grenade fuze, items turned over to USACE for Safe holding.		
Problems encountered: Two flat tires on rental vehicles, seems to happen when turning vehicles around, will discuss during tomorrow's, tailgate		
VISITORS ON SITE: USACE OE Safety Huchins		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: Temps: 38 - 78 Morning: Cool Afternoon: Sunny, breeze out of SW, blowing dust		IMPORTANT TELEPHONE CALLS: NONE
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 6-Dec-06

Grid Summary Sheet

Team #: 1
 Date: 12/6/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A2I7	12/4/06	12/6/06		X		X	1.5	BMP
C3A2I7				X		X		
C3B2A7				X		X	6	
C3B2B8		12/6/06			X			
C3B2A8		12/6/06			X	X		
C3A2I8		12			X	X	6	
C3A2I8		12/6/06			X		6	
B3J4C7		12/6/06			X			
B3J4D7		12/6/06				X		
B3I4E7		12/6/06				X		BMP

Name: Bruce D. Tankensell
 Reviewed By: Bruce D. Tankensell
 Team Leader: SUXOS
 QC: QC

Signature/Date: Bruce D. Tankensell 12/6/06

Grid Summary Sheet

Team #: IT
 Date: 12/6/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid (check appropriate box)			
B3J4F7	12/6/06	12/6/06			X	N		BNT
B3J4G7					X	N		
B3J4H7				X		N	3 LBS	
B3J4J8					X	N		
B3J4K7				X		N		
B3J4L8					X	N		
B3J4J7				X		N		
B3J4K8					X	N		
C3A4A8					X	N		
C3A4A7	12/6/06	12/6/06			X	N		BNT

Name: Bruce D. Truelsen

Reviewed By: SUXOS
 Team Leader: QC

Signature/Date: [Signature]

Grid Summary Sheet

Team #: #1
 Date: 12/6/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid (check appropriate box)			
B3H4B7	12/6/06	12/8/06			X	N		B27
B3H4C7					X	N		
B3H4D6					X	N		
B3H4E6					X	N		
B3H4F6					X	N		
B3H4G6					X	N		
B3H4H6					X	N		
B3H4I6	12/8/06	12/8/06			X	N		B27

Reviewed By
 Team Leader
 SUXOS
 QC

Signature/Date
[Signature] 12/4/06

Name
Bruce D. Tinknell

Grid Summary Sheet

Team #: 2
 Date: 12/6/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid (check appropriate box)			
B3A4B6	12/6/06	12/6/06		X		N	2	BZA
C3A4A6				X		N		
C3A4B6				X		N		
C3A4C6					X	N		
C3A4D6					X	N		
C3A4E5					X	N		
C3A4F5				X		N		
C3A4G5				X		N		
C3A4H5				X		N		
B3A4J5	12/6/06	12/6/06		X		N	63	BZA

Name: Bruce A. Townsend

Reviewed By: SUXOS
 Team Leader: QC

Signature/Date: [Signature]

Grid Summary Sheet

Team #: 1001
 Date: 12/6/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B3J415	12/6/06	12/26/06		X		N	3 (SN)	BPT
B3J415				X		N		
B3J465				X		N		
B3J415				X		N		
B3J425				X		N		
B3J405				X		N	1	
B3J405				X		N		
B3J485					X	N		
B3J404					X	N		
B3J434	12/6/06	12/26/06			X	N		BPT

Reviewed By: B. T. [Signature]
 Team Leader

SUXOS
 QC

Name: B. T. [Signature]



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/06/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, GPS of UXO Grids, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
<i>[Handwritten Signature]</i>	<i>[Handwritten Signature]</i>
John Tatalone	<i>[Handwritten Signature]</i>
Bruce Tatalone	<i>[Handwritten Signature]</i>
Ashley Rice	<i>[Handwritten Signature]</i>
JAMES DRAKE	<i>[Handwritten Signature]</i>
Harley Davidson	<i>[Handwritten Signature]</i>
JEFF STEINWAND	<i>[Handwritten Signature]</i>
TARALYN VOLPE	<i>[Handwritten Signature]</i>
JOHN SPARKS	<i>[Handwritten Signature]</i>

Meeting Conducted by: [Handwritten Signature]

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 12/6/2006
 Job#: 846075
 Permit#:
 Issued By: A.Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/> <input type="checkbox"/>
		Revised: <input type="checkbox"/> <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Scrap Collection		
Metal cutting		
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot Work		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>Al Grant</i>	<i>AM</i>
<i>Tim Mathisen</i>	<i>Tim Mathisen</i>	<i>Tim Mathisen</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>

JOB SAFETY ANALYSIS

Date: 12/5/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- _____ Required
 - _____ Cold Work
 - _____ Hot Work
 - _____ Entry Permit
 - _____ All Conditions Met
 - _____ Signed Off when Complete
 - _____ Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - _____ Special Purpose Gloves
 - _____ Tyvek Suit
 - _____ Acid Suit/Slicker Suit
 - _____ Rubber boots
 - _____ Mono Goggles (vented-non-vented)
 - _____ Face Shield
 - _____ Respirator
 - _____ Fresh Air
 - _____ Ear Protection
 - _____ Safety Harness
 - _____ Burning Goggles
 - _____ Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- _____ Current Inspection
 - _____ Proper Tools for the Job
 - _____ Good Tool Condition
 - _____ Qualifications
 - _____ Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - _____ Safety Shower
 - Evacuation Route
 - _____ Other

- ACCESS**
- _____ Scaffold (properly inspected)
 - _____ Ladder (Tied Off)
 - _____ Manliest
 - _____ Personnel Basket (Inspected & Approved)
 - _____ Operator training
 - _____ Special Provisions
 - _____ Other

- WELDING**
- _____ Flashburns
 - Combustibles
 - Spark Containment
 - _____ Shields
 - _____ Grounding
 - _____ Water Hose
 - Fire extinguisher
 - _____ Fire Blanket
 - Fire Watch
 - _____ Sewer Covers
 - _____ Other

- OVERHEAD WORK**
- _____ Barricades
 - _____ Signs
 - _____ Hole Cover
 - _____ Handrail
 - _____ Other

- ELECTRICAL**
- _____ Locked and Tagged Out
 - _____ Try Start/Stop Switch
 - _____ GFCI Test
 - _____ Assured Grounding
 - _____ Extension Cord Inspection
 - _____ Other

- LIFTING**
- _____ Forklift
 - _____ Cherry Picker
 - _____ Load Chart
 - _____ Angle
 - _____ Crane
 - _____ Chainfall
 - _____ Proper Rigging Practices
 - _____ Manual Lifting
 - _____ Condition of Equipment
 - _____ Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- _____ Electrical Shock
 - _____ Heat Stress
 - _____ Heavy Objects
 - _____ Hot/Cold Surf or Mat
 - _____ Inadequate Lighting
 - _____ Line Breaking
 - _____ Noise
 - _____ Poor Access/Egress
 - _____ Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- _____ Chemical Burn Shin/Eyes
 - _____ Flammable
 - _____ Ingestion
 - _____ Inhalation
 - _____ Skin Contamination
 - _____ Other

- HAZARDS/BODY**
- Fall potential
 - _____ Pinch Points
 - Slip-Trip Potential
 - _____ Other

- OTHER WORK IN AREA**
- _____ Others Working Overhead
 - Type of Work Others Doing
 - _____ PPE Due to Other Work
 - _____ Other

Confined Space
 Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date: _____

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD _____ Report No: **2**

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	Y <i>ALGALAND</i>

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SURFACE SWEEP OPERATIONS
NRS = 16

SEE TAILGATE AND SUXOS FACIL FOR PERSONNEL LIST

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

VISUAL OBSERVATION OF WORK PROGRESS AND
WORK PLAN APPLICATION

USACE QA Representative _____ Date _____

Contractors QC Representative *[Signature]* Date **12/6/06**

DAILY QUALITY CONTROL REPORT

DATE: December 7, 2006

DAY	S	M	T	W	<u>T</u> <u>H</u>	F	S
-----	---	---	---	---	------------------------------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

<u>Sunny</u>	<u>Clear</u>	Overcast	Rein	Fog
Hi	<u>66</u>	Low	<u>32</u>	
Still	<u>Moderate</u>	High	<u>NW@7 mph</u>	
Dry	<u>Moderate</u>	High	<u>72%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

Grids completed, Surface Swept: 39 full grids and 7 partials

date: 00

QC'd this

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

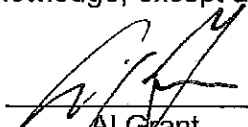
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/7/06, UXOQCS/UXOSO FADL dated 12/07/06, Team FADL dated 12/7/06, Tailgate Safety Meeting dated 12/07/06, JSA dated 12/07/06 (2 pages), Follow-up for surface removal dated 12/07/06,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/07/06
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Site Prep and Surface Clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - At Shaw's field office. Attended safety meeting and operations brief.

0700 - On work site MRS -16. One large UXO Team conducting surface UXO clearance.

Approx - 0800 - Shaw's water truck and base fire truck on site to help control dust created by the masticator.

Approx - 1500 - Shaw's water truck and base fire truck departed the site.

Note: The following MEC items were located during the surface sweep and were removed to a safe holding area by USACE OE Safety: 1 - live M-125 series Signal Cartridge, 1 - Mk 2 Hand Grenade with Live Fuze, with Safety Level and Pin, and 1 - 37mm Projectile Mk 1. ONE 2.36. inch Rocket left in place to be X-Rayed in the near future.

1700 - Secured all field activities.

Summary: Thirty Nine grids and 7 partial grids completed. MEC scrap collected - 42 lbs.

1715 - 1800 - Completed week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning 30, afternoon in the high 60's.	

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	12	7	2006
	No.			8
	Sheet	1 Of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA		
Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, starting surface sweep.		
Jack dispatched to dust suppression team		
1130 - 1215 Lunch		
Surface sweeps continues		
1630 MEC Scrap inspected and turned over to SUXO50		
1650 Returned to office, secured equipment,		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks, 1 Polaris utility vehicle, 1 water truck, 11 schonstedts, 5 hand held radios		
Grids surfaced swept: 44 MEC Scrap located: 42 lbs		
UXO Located: 1 ea 37MM projo, 1 ea Grenade MK II Practice; 1 ea Signal Flare, M125, items turned over to USACE for Safe holding.		
Problems encountered: None		
VISITORS ON SITE USACE OE Safety Hutchins		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: Shaw water truck used to suppress dust during brush cutting
WEATHER CONDITIONS: Temps: 40 - 77 Morning: Cool Afternoon: Sunny, breeze out of SW		IMPORTANT TELEPHONE CALLS: NONE
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE:		DATE: 7-Dec-06

Grid Summary Sheet

Team #: 4

Date: 12/7/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	Oils Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A4B4	12/7/06	12/7/06		X		N	7	B2A
C3A4M	1			X		N	3	B2A
C3A4H1	B3T4TT			X		N		B2A
B3T4TT				X		N		B2A
B3T4H1				X		N	2	B2A
B3T4E8				X		N		B2A

Name: Boss Linknell

Reviewed By: SLXOS
Team Leader

Signature/Date: [Signature] 12/7/06

QC

THIS FORM IS TO BE FILLED OUT BY THE FIELD OPERATOR AT THE END OF EACH DAY'S WORK. IT IS THE RESPONSIBILITY OF THE FIELD OPERATOR TO COMPLETE THIS FORM AND TO SIGN IT. THE INFORMATION ON THIS FORM IS USED FOR RECORD KEEPING AND TO DETERMINE THE STATUS OF THE GRID. THE INFORMATION ON THIS FORM IS NOT TO BE USED FOR ANY OTHER PURPOSE. THE INFORMATION ON THIS FORM IS NOT TO BE USED FOR ANY OTHER PURPOSE.

Grid Summary Sheet

Team #: _____
Date: 12/7/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OIE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B35H12	12/7/06	12/7/06		X		N		B35
C34A2	/	/		X		N		/
C34A82				X		N		
C34A92				X		N		
B35H12				X		N	60	
C34A D2				X		N		
C34A E2	12/7/06			X		N		
C34H E3					X	4286		
C34H E4	12/7/06			X		N		
C34H C1	5	12/7/06		X		N		B35

NAME: Bruce J. Tinknell

Reviewed By: _____
Team Leader: _____

SLXOS

QC

Signature/Date: [Signature]

12/7/06

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Grid Summary Sheet

Team #: 1
 Date: 12/7/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A1B4	12/7/06				X	N		BDM
C3A4E4					X	N		
C3A1E3					X	N		
C3A1D3		12/7/06		X		YMKZ	2	
C3A4C3	12/7/06	12/7/06		X		N		
C3A4E3				X		N		
C3A4A3				X		N	9	
R3J1J3				X		N		
R3J1I3				X		N		
R3J1H3	12/7/06	12/7/06		X		N		BDM

Name: BRUCE D. TINKENS II

Reviewed By: SUXOS
 Team Leader: QC

Signature/Date: [Signature] 12/7/06

Grid Summary Sheet

A

Team #: _____
Date: 12/17/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B354DY	12/7/06	12/7/06		✓		Y 37. mm		BDD
B354E4		12/17/06		✓		N		
B354F4				✓		N		
B354G4				✓		N		
B354H4				✓		N		
B354I4				✓		N		
B354J4				✓		N	3	
C3H4A4				✓		N		
C3H4B4				✓		N		
C3H4C4	12/7/06			✓		Y 22. mm		BDD

Name
Bruce Tucker

Reviewed By
Team Leader
SUXOS

QC

Signature/Date
Bruce Tucker 12/7/2006

Grid Summary Sheet

Team #:
 Date: 12/17/06

1

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B3T4E3	12/7/06	12/7/06		X		2	3	BOJ
B3T4E2				X		2		
B3T4E3				X		2	1	
B3T4D3				X		2		
B3T4E3					X	2		
B3T4D2				X		2		
B3T4E2				X		2		
B3T4E2				X		2		
B3T4C2					X	2		
B3SH2	12/7/06	12/7/06		X		2		BOJ

Name Snores
D. H. H. H. H. H.

Reviewed By
 Team Leader SUXOS
 QC

Signature/Date Ben B. B. B. B. B. 12/7/06

Unexploded Ordnance Tracking Form

UXO GPS ID

PHOTO ID

TEAM

TEAM LEADER

	#	1
--	---	---

Bruce D Tinknell

Grid ID

B3J4BY

INITIAL INFORMATION

Date Found

Initial Condition

Initial Description

Initial Disposition

Initial Comments

12/7/06	NOV	37 mm Fuzed M88	SHA - USACE	HE - 37 mm
---------	-----	-----------------	-------------	------------

Surface?

YES / NO
Circle One

Manual Reference

Initials

Final Abbreviated Description

		Proj. 37mm, Fuzed	
--	--	-------------------	--

DEMO INFORMATION

Demo Date

Demo Completed

Demo Description

Demo Comments

	<input checked="" type="radio"/> YES / <input type="radio"/> NO <i>Circle One</i>		
--	--	--	--

OE Final Disposition

OE Final Condition

OE TRANSFER

--	--	--	--

QUALITY CONTROL INFORMATION

QC Review Passed?

Quality Control Review Comments

Modification Notes

YES / NO <i>Circle One</i>		
-------------------------------	--	--

Signature/Title/Date

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

--	--	--

Unexploded Ordnance Tracking Form

UXO GPS ID

PHOTO ID

TEAM

TEAM LEADER

BOUCE D Wicknell

Grid ID

S3A4D3

INITIAL INFORMATION

Date Found

Initial Condition

Initial Description

Initial Disposition

Initial Comments

12/7/06

DUD

MK2 GRENADE PAC

USACE STA

TURNED OVER TO USACE SD

Surface?

YES / NO
Circle One

Manual Reference

Initials

Final Abbreviated Description

GRENADE HAND, MK2, PAC

DEMO INFORMATION

Demo Date

Demo Completed

YES / NO
Circle One

Demo Description

Demo Comments

OE Final Disposition

OE Final Condition

OE TRANSFER

QUALITY CONTROL INFORMATION

QC Review Passed?

YES / NO
Circle One

Quality Control Review Comments

Modification Notes

Signature/Title/Date

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

Unexploded Ordnance Tracking Form

UXO GPS ID

PHOTO ID

TEAM

TEAM LEADER

Bruce Tinknell

Grid ID

C3 A4 C4

INITIAL INFORMATION

Date Found

Initial Condition

Initial Description

Initial Disposition

Initial Comments

12/7/06

FUSD

GRENADE, ILLUM M125

Marked

TURNED OVER TO USACE TO SHA

Surface?

YES NO
Circle One

Manual Reference

Initials

Final Abbreviated Description

GRENADE, ILLUM, GREEN STAR M125A1

DEMO INFORMATION

Demo Date

Demo Completed

Demo Description

Demo Comments

YES NO
Circle One

OE Final Disposition

OE Final Condition

OE TRANSFER

QUALITY CONTROL INFORMATION

QC Review Passed?

Quality Control Review Comments

Modification Notes

YES NO
Circle One

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

Signature/Title/Date



Shaw E & I, Inc.

DAILY LOG	DATE	12	07	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
-------------------------------	--------------------

FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

- 0630: Tailgate
- 0700: Teams onsite begin surface sweep operations
- 1100: Checked on site and conducted a follow-up inspection for surface sweep operations.
- 1215: Admin
- 1400: Walked with the teams and observed their methods and looked at their work. All is well.
- 1630: Closed MRS-16 for the day.

MEC encountered: See SUXOS FADL

-----Nothing Follows-----

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 31 degrees 73 degrees PM	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: A. C. Grant

DATE: 12/07/06



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/7/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED

SIGNATURE

NAME PRINTED	SIGNATURE
John Tortolano	
JEFF STEINMANN	
John Smith	
Joshua Selkins	
James Deake	
Armeny Rize	
Tim Mathisen	
JOHN HOVER	

Meeting Conducted by: A. Geras

Supervisor: _____

Manager: _____

TAILGATE SAFETY MEETING CONTINUATION SHEET

DATE: 12/05/2006

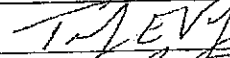
Job Number 846075

Job Name: Fort Ord/Terc II

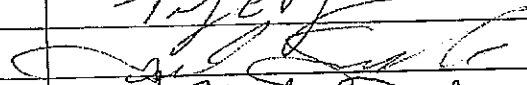
NAME PRINTED

SIGNATURE

TARA VAPE



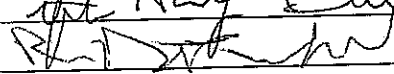
TRISHA SMITH



Harley Davidson



INDOC & TRACKS





Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 12/7/2006
 Job#: 846075
 Permit#:
 Issued By: A.Grant+AN4

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		Supervisor of Work: Tim Mathisen	
Required PPE: MOD "D"	Safety Access / Location		JSA Prepared by: Bruce Tincknell Are other crews in area? yes
	Safe Haven: Shaw main office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16		
Job Task (What are You Doing)		Audit the Job Audit Time:	
OE Sweep Operations		1430	
Potential Hazards		Supervisor's Comments	
Lifting		Good Safety Practices	
Slip, Trip, and Falls			
Cuts and abrasions			
Poison oak			
UXO			
Dust			
Heavy equipment operations		Supervisor's Initials	
Recommended Action or Procedure		AC	
Observe walking areas			
Proper lifting technique, weight limit of 60 lbs			
Wear work gloves			
Mod "D" PPE			
Stay with UXO Personnel, Do not pick up any objects			
Use of Dust Mask			
Water intake, stay hydrated			
Hard hats and reflective vest when spotting for heavy equipment			
Eye contact with equipment operator			
Crew Name Signatures:		12/7/2006	
<i>A. Grant</i>			
<i>Tim Mathisen</i>			
<i>John Smith</i>			
<i>John Smith</i>			
<i>John Smith</i>			
<i>John Smith</i>			

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>_____ Reflective vest near heavy equipment</p> <p><input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p> <hr/>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p>_____ Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p>_____ Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p>_____ Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
--	---	--

SUPERVISOR/FOREMAN RECOMMENDATION:

12/07/06

Form QC-5

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 06 Report No: 4

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	<u>Y</u>
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	<u>Y</u>

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SURFACE CLEARANCE, MRS-16

SEE TAILGATE FOR PERSONNEL ON SITE

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCHENSTEDT'S WERE FUNCTION TESTED AT TEST PLOT

USACE QA Representative _____ Date _____

Contractors QC Representative [Signature] Date 12/7/06

DAILY QUALITY CONTROL REPORT

DATE: December 11, 2006

DAY	S	M	T	W	T	F	S
-----	---	----------	---	---	---	---	---

USACE UXO SAFETY Terry Gleason

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	54	Low	36	
WIND	Still	<u>Moderate</u>	High	NW@2 mph	
HUMIDITY	Dry	<u>Moderate</u>	High	69%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

Grids completed, Surface Swept: 44 grids

QC'd this date: 00

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

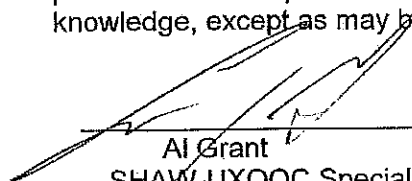
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/11/06, UXOQCS/UXOSO FADL dated 12/11/06, Team FADL dated 12/11/06, Tailgate Safety Meeting dated 12/11/06, JSA dated 12/11/06 (2 pages), Follow-up for surface removal dated 12/11/06, Final Inspection for Vegetation Removal dated 12/11/06

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/11/06

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface Clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - On work site MRS -16. One large UXO Team conducting surface UXO clearance.

Approx. - 1030 - Vegetation removal operations are complete. The masticator has been removed from service.

Summary: A straight forward day, no problems or surprises encountered. Completed grids: 35 full and 9 partial. Collected and removed 96 lbs of MEC scrap. Four MEC items encountered: ONE pile of MK 1 Practice Mines (approx. 12) were left in place waiting future removal, ONE live M125 Signal Cartridge removed by USACE OE Safety and placed in a safe holding area, and TWO 2.36. inch Rockets left in place waiting further investigation using the X-ray unit.

1700 - Secured the field crew.

1800 1830 - Completed admin duties.

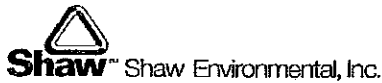
VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning 36, afternoon in the mid 50's.	IMPORTANT TELEPHONE CALLS:



DAILY LOG	DATE	12	11	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate</p> <p>0700: Teams onsite begin surface sweep operations</p> <p>1000: Conducted a Final Inspection for the Vegetation Removal. All is in compliance with the contract.</p> <p>1100: Checked on site and conducted a follow-up inspection for surface sweep operations.</p> <p>1215: Admin</p> <p>1400: Walked with the teams and observed their methods and looked at their work. All is well.</p> <p>1630: Closed MRS-16 for the day.</p> <p>MEC encountered: See SUXOS FADL</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS: cool 36 degrees 57 degrees PM	N/A IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/11/06



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	12	11	2006
	No.			9
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16 Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA, discussed 37mm UXO

Schonstedts checked in test grid. UXO teams gathered PPE and equipment. depart for MRS 16

Arrived MRS 16, team assignments made, starting surface sweep.

1115 - 1200 Lunch

Surface sweeps continue

1630 MEC Scrap inspected and turned over to SUXOSO

1650 Returned to office. secured equipment

1700 Work completed for today

Equipment used: 4 rental pickup trucks. 1 Polaris utility vehicle. 11 schonstedts. 5 hand held radios

Grids surfaced swept. 44 mLC Scrap located. 5 lbs *9600*

UXO Located: 1 ea. Signal Flare, M125. Item turned over to USACE for Safe holding.

Problems encountered: none

VISITORS ON SITE USACE JE Safety Terry Gleason	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS.
---	--

WEATHER CONDITIONS AND TEMPERATURE: Morning: Cool Afternoon: Partly cloudy breeze out of SW	IMPORTANT TELEPHONE CALLS: NONE
---	--

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: *[Handwritten Signature]* DATE: 11 Dec 06

13

Grid Summary Sheet

Team #:

Date:

41
12/1/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UJO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid (check appropriate box)			
C3A3C8	12/1/06	12/11/06		X		N	7	BOT
C3A3D8	/	/		X		N		/
C3A3E8	/	/		X		N		/
C3A3F8	12/1/06	12/11/06			X	N		BOT

Name

Bruce Tinkley

Reviewed By

Team Leader

SUXOS

QC

Signature/Date

Bruce Tinkley 12/1/06

36

Grid Summary Sheet

Team #: 1
Date: 12/11/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid OC/OA (Date)	Grid Dimensions		Grid Found (Y/N)	Of Scrap Weight (lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B3J3D9	12/11/06	12/11/06		X		N		BNA
B3J3D8	12/11/06			X		N		
B3J3E8	12/11/06			X		Y	Y	
B3J3F8	12/11/06	12/11/06		X		N	2	
B3J3G8	12/11/06			X		Y	2	
B3J3H8	12/11/06			X		N	2	
B3J3I8				X		N	2	
B3J3J8				X		N	2	
C3A3A8				X		N	12	
C3A3B8	12/11/06	12/11/06		X		N		BNA

Reviewed by: Ben Stinkneil
Signature/Date: Ben Stinkneil 12/11/06

Reviewed by: SUXOS
Team Leader: OC

Grid Summary Sheet

Team # 12/11/06
 Date 12/11/06

Grid #	Grid Started (Date)	Grid Completed (Date)	Grid C/O/A (Date)	Grid Dimensions		100 x 100 (check appropriate box)	100 Found (Y/N)	Net Weight (Lbs)	Team Leader (Initials)					
				100 x 100	Partial Grid									
C3A3D9	12/11/06	12/11/06		X		X	N	4	BTA					
C3A3C9				X		X	N	8 4						
C3A3B9				X		X	N							
C3A3A9				X		X	N							
B3I3J9				X		X	N							
B3I3I9				X		X	N							
B3I3H9				X		X	N							
B3I3G9				X		X	N							
B3I3F9				X		X	N							
B3I3E9				12/11/06	12/11/06		X				X	N	4	BTA

Reviewed by Steve D. Trackwell Signature/Date 12/11/06
 Team Leader BOBOS
 OR

Grid Summary Sheet

Form # # 1
 Date: 10/11/06

Grid ID	Grid Start Date (Date)	Grid Completed (Date)	Grid C/O/A (Date)	Grid Dimensions		UFO Found (Y/N)	Weight (lbs)	Each Carse (Primary)
				100 x 100 (check appropriate box)	200 x 200 (check appropriate box)			
B3I3I8	12/11/06	12/11/06		X		N		BM
B8I3I8				X		N	3	
C3A3B0				X		N		
C3A3C8				X		N		
C3A3D8				X		N		
C3A3E8				X		N		
C3A3F8				X	X	N		
C3A3F9				X	X	N		
C3A3E9	12/11/06	12/11/06		X		N		BM

Name: Sanchez, J (checked) Reviewed By: Sanchez, J (checked)
 Signature/Date: [Signature]

UFOCIS
 WJ

Page 1

Grid Summary Sheet

#1

Year #

Date: 12/11/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid C/O/A (Date)	Grid Operations		Grid Count (MN)	Off to Top (Days)	Earliest (Date)
				PIC x DUC (check applicable)	Other ops			
B3J4G1	12/11/06	12/11/06		X		2		BOM
B3J4E1				X		2		BOM
B3J4E1				X		2		
B3J4D1				X		2		
B3J4C1				X		2		
B3J3DA					X	2		
B3J3EA					X	2		
B3J3FA				X		2		
B3J3GA				X		2		
B3J3HA	12/11/06	12/11/06		X		2		
B3J3IA						2	1	

Reviewed By: *Bruce D. Tinknell*

Team Leader: *Bruce D. Tinknell*

SUX06

01

Printed: *Bruce D. Tinknell*

Unexploded Ordnance Tracking Form

UXO GPS ID: UXO-1-022 PHOTO ID: TEAM LEADER: BLAKE TANKNELL
 Grid ID: 6353 G8 # 1

INITIAL INFORMATION

Date Found: 10/11/04 Initial Condition: IN SHIPPING CONTAINER Initial Description: SIGNAL FLARE M125 Initial Disposition: FLAGGED Initial Comments: TURNED OVER TO USACE/SEASON

Surface? YES / NO
Circle One

Manual Reference

Initials: Final Abbreviated Description: SIGNAL BOMB, FLARE, M125, IN SHIPPING CAN

DEMO INFORMATION

Demo Date: Demo Completed: YES / NO Demo Description: Demo Comments:
Circle One

OE Final Disposition

OE TRANSFER

QUALITY CONTROL INFORMATION

QC Review Passed? YES / NO Quality Control Review Comments: Modification Notes:
Circle One

Signature/Title/Date

UXO Supervisor/Manager

UXO Quality Control

USACE/Army



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/11/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
<i>Asilevy Rice</i>	<i>[Signature]</i>
JAMES DRAKE	<i>[Signature]</i>
JEFF STEINWALD	<i>[Signature]</i>
John Tostolan	<i>[Signature]</i>
John Hoover	<i>[Signature]</i>
Kevin TROTT	<i>[Signature]</i>
TIM MATHISEN	<i>[Signature]</i>
Harley Davidson	<i>[Signature]</i>
Joshua Seaberg	<i>[Signature]</i>
John Seaberg	<i>[Signature]</i>

Meeting Conducted by: Al Grant

Tim Mathisen
Supervisor:

Kevin Seamans

Manager:

--	--



JOB SAFETY ANALYSIS

Date: 12/11/2006
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: AI Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 12/15/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- _____ Required
 - _____ Cold Work
 - _____ Hot Work
 - _____ Entry Permit
 - _____ All Conditions Met
 - _____ Signed Off when Complete
 - _____ Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - _____ Special Purpose Gloves
 - _____ Tyvek Suit
 - _____ Acid Suit/Slicker Suit
 - _____ Rubber boots
 - _____ Mono Goggles (vented-non-vented)
 - _____ Face Shield
 - _____ Respirator
 - _____ Fresh Air
 - _____ Ear Protection
 - _____ Safety Harness
 - _____ Burning Goggles
 - _____ Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- _____ Current Inspection
 - _____ Proper Tools for the Job
 - _____ Good Tool Condition
 - _____ Qualifications
 - _____ Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - _____ Safety Shower
 - Evacuation Route
 - _____ Other

- ACCESS**
- _____ Scaffold (properly inspected)
 - _____ Ladder (Tied Off)
 - _____ Manliest
 - _____ Personnel Basket (Inspected & Approved)
 - _____ Operator training
 - _____ Special Provisions
 - _____ Other

- WELDING**
- _____ Flashburns
 - _____ Combustibles
 - _____ Spark Containment
 - _____ Shields
 - _____ Grounding
 - _____ Water Hose
 - _____ Fire extinguisher
 - _____ Fire Blanket
 - _____ Fire Watch
 - _____ Sewer Covers
 - _____ Other

- OVERHEAD WORK**
- _____ Barricades
 - _____ Signs
 - _____ Hole Cover
 - _____ Handrail
 - _____ Other

- ELECTRICAL**
- _____ Locked and Tagged Out
 - _____ Try Start/Stop Switch
 - _____ GFCI Test
 - _____ Assured Grounding
 - _____ Extension Cord Inspection
 - _____ Other

- LIFTING**
- _____ Forklift
 - _____ Cherry Picker
 - _____ Load Chart
 - _____ Angle
 - _____ Crane
 - _____ Chainfall
 - _____ Proper Rigging Practices
 - _____ Manual Lifting
 - _____ Condition of Equipment
 - _____ Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- _____ Electrical Shock
 - _____ Heat Stress
 - _____ Heavy Objects
 - _____ Hot/Cold Surf or Mat
 - _____ Inadequate Lighting
 - _____ Line Breaking
 - _____ Noise
 - _____ Poor Access/Egress
 - _____ Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- _____ Chemical Burn Shin/Eyes
 - _____ Flammable
 - _____ Ingestion
 - _____ Inhalation
 - _____ Skin Contamination
 - _____ Other

- HAZARDS/BODY**
- Fall potential
 - _____ Pinch Points
 - Slip-Trip Potential
 - _____ Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - _____ PPE Due to Other Work
 - _____ Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 06 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SURFACE SWEEP OPERATIONS / MRS-16 / SEE SVNS PAGE

ALL WORK IS BEING DONE IAW CONTRACT AND WORK PLAN.

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCHENSTEDT'S CHECKED AT THE TEST PIT

USACE QA Representative _____ Date 12/11/06

Contractors QC Representative [Signature] Date 12/11/06



Shaw Environmental, Inc.

FINAL INSPECTION OUTLINE
(PART I)

TERC II - K 4.3

Date: December 11, 2006

Contract No.: DACW 05-96-D-0011
Project No. 846075
Fort Ord, California

Task Order No. 016

WAD No. 06

Project / Area of Inspection: MRS-16 Post Prescribed Burn Vegetation Removal

A. Definable Features of Work: Vegetation removal Status of Inspection: Complete

Vegetation removal within site boundaries in preparation for Geophysics/Surface Removal.

TERMS OF HIS ASSIGNED SCOPE WERE MET
NO DEFICIENCIES NOTED
GOOD JOB

I hereby certify, that to the best of my knowledge and belief, that the work inspected is complete and all materials and equipment used and work performed were completed in accordance with plans submitted and approved.


Contractor Quality Control Systems Manager

B. Final Acceptance is Approved, Subject to the Correction of the Punchlist Items Below:

None required.

DAILY QUALITY CONTROL REPORT

DATE: December 12, 2006

DAY	S	M	<u>T</u>	W	T	F	S
			H				

USACE UXO SAFETY Terry Gleason

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	<u>54</u>	Low	<u>42</u>	
WIND	Sill	<u>Moderate</u>	High	<u>NW@2 mph</u>	
HUMIDITY	Dry	<u>Moderate</u>	High	<u>98%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

Grids completed, Surface Swept: 38 grids

QC'd this date: 00

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

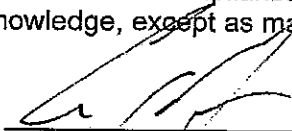
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/12/06, UXOQCS/UXOSO FADL dated 12/12/06, Team FADL dated 12/12/06, Tailgate Safety Meeting dated 12/12/06, JSA dated 12/12/06 (2 pages), Follow-up for surface removal dated 12/12/06,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/12/06

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Surface Clearance and Grid Staking.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
Val Valdez	UXO Tech III	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended morning meetings.
 0700 - On work site MRS -16. One UXO Team conducting surface UXO clearance and One two man UXO Team staking out grids in the bowl area.
 1700 - Secured field operations.

Summary: The Two man UXO Team staked out approximately 65% of the grids located in the bowl area. Completed surface clearance grids: 31 full and 7 partial. Collected 99 pounds of MEC scrap. Thirteen MEC like items were left in place waiting further investigation: 11 - 2.36 inch Rockets and 2 - MK 1 Practice Land Mines.

1730 to 1800 - Performed daily admin functions.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Rain all day, light to heavy, Morning 42, afternoon in the low 50's. Poor soil conditions, muddy.	



DAILY LOG	DATE	12	12	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate</p> <p>0700: Teams onsite begin surface sweep operations</p> <p>1000: Conducted follow-up inspection for surface sweep. All is well.</p> <p>1100: Checked on crew all is well.</p> <p>1215: Admin</p> <p>1400: Walked with the teams and observed their methods and looked at their work. All is well.</p> <p>1630: Closed MRS-16 for the day.</p> <p>MEC encountered: See SUXOS FADL</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 36 degrees 57 degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/12/06



Shaw Environmental, Inc.

LI

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/12/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
ASHLEY RICE	
JEFF STEINWAND	
John Tortolero	
Bruce Trickett	
JAMES DEAKE	
Tim Mathisen	
Justin Jenkins	
Harley Davidson	
JOHN SPARKS	

Meeting Conducted by: Al Grant

Tim Mathisen
Supervisor:

Kevin Seamans

Manager:



JOB SAFETY ANALYSIS

Date: 12/12/2006
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Tim Mathisen JSA Prepared by: AI Grant Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 12/12/2006
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- _____ Required
 - _____ Cold Work
 - _____ Hot Work
 - _____ Entry Permit
 - _____ All Conditions Met
 - _____ Signed Off when Complete
 - _____ Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - _____ Special Purpose Gloves
 - _____ Tyvek Suit
 - _____ Acid Suit/Slicker Suit
 - _____ Rubber boots
 - _____ Mono Goggles (vented-non-vented)
 - _____ Face Shield
 - _____ Respirator
 - _____ Fresh Air
 - _____ Ear Protection
 - _____ Safety Harness
 - _____ Burning Goggles
 - _____ Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- _____ Current Inspection
 - _____ Proper Tools for the Job
 - _____ Good Tool Condition
 - _____ Qualifications
 - _____ Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - _____ Safety Shower
 - Evacuation Route
 - _____ Other

- ACCESS**
- _____ Scaffold (properly inspected)
 - _____ Ladder (Tied Off)
 - _____ Manliest
 - _____ Personnel Basket (Inspected & Approved)
 - _____ Operator training
 - _____ Special Provisions
 - _____ Other

- WELDING**
- _____ Flashburns
 - _____ Combustibles
 - _____ Spark Containment
 - _____ Shields
 - _____ Grounding
 - _____ Water Hose
 - _____ Fire extinguisher
 - _____ Fire Blanket
 - _____ Fire Watch
 - _____ Sewer Covers
 - _____ Other

- OVERHEAD WORK**
- _____ Barricades
 - _____ Signs
 - _____ Hole Cover
 - _____ Handrail
 - _____ Other

- ELECTRICAL**
- _____ Locked and Tagged Out
 - _____ Try Start/Stop Switch
 - _____ GFCI Test
 - _____ Assured Grounding
 - _____ Extension Cord Inspection
 - _____ Other

- LIFTING**
- _____ Forklift
 - _____ Cherry Picker
 - _____ Load Chart
 - _____ Angle
 - _____ Crane
 - _____ Chainfall
 - _____ Proper Rigging Practices
 - _____ Manual Lifting
 - _____ Condition of Equipment
 - _____ Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- _____ Electrical Shock
 - _____ Heat Stress
 - _____ Heavy Objects
 - _____ Hot/Cold Surf or Mat
 - _____ Inadequate Lighting
 - _____ Line Breaking
 - _____ Noise
 - _____ Poor Access/Egress
 - _____ Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- _____ Chemical Burn Shin/Eyes
 - _____ Flammable
 - _____ Ingestion
 - _____ Inhalation
 - _____ Skin Contamination
 - _____ Other

- HAZARDS/BODY**
- Fall potential
 - _____ Pinch Points
 - Slip-Trip Potential
 - _____ Other


- OTHER WORK IN AREA**
- Others Working Overhead
 - _____ Type of Work Others Doing
 - _____ PPE Due to Other Work
 - _____ Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Grid Summary Sheet

Team #: 

Date: 12/18/16

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		LUXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B51515	12/18/16	12/18/16		Y		Y	20	BR
B33835				X		N		
C3A2A5				X		N	15	
C3A3B5				X		N		
C3A3C5				X		N		
C3A3D5				X		N		
C3A3E5				X		N		
C3A3F5	12/18/16	12/18/16		X		N		
C3A3G5	12/18/16				X	Y	3	BR

Name: Steve Timckien

Reviewed By: SUXOS
Team Leader: QC

Signature/Date: [Signature] 12/18/16

3

Grid Summary Sheet

Lead: A
Date: 12/18/16

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid OC/OA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (if applicable)	Partial Grid (if applicable)			
B3J3F7	12/18/16	12/18/16		X		N	10	BOT
B3J3J7				X		N		
B3J3I7		12/18/16		X		N	7	
B3J3H7				X		N	9	
B3J3G7		12/12/16		X		N		
B3J3E5				X		N		
B3J3D5		12/18/16		X		N	3	
B3J3H5	12/18/16			V		N		BOT

Name: Bruce Tomlinville

Reviewed by: Team Leader

BUKOS

QC

Signature/Date: [Signature] 12/18/16

Vertical text on the left side of the page, likely a barcode or scanning artifact.

②

Grid Summary Sheet

Form # 18112101

12/12/06

Unit #	Grid Selected (Date)	Grid Donated/led (Date)	Grid OC/OA (Date)	Grid Dimensions		SP of Floor (ft ²)	# of Steps (ft ²)	Total Area (ft ²)
				100 x 100 (check appropriate box)	Partial Grid			
C3A3B6	12/12/06	12/12/06		X		N	4	B04
C3A3A6	12/12/06			X		N		}
B3J3J6	12/12/06			X		N		
B3J3J6		12/12/06		X		N		
B3J3I6		12/12/06		X		N	9	
B3J3H6		12/12/06		X		N		}
B3I3E6				X		N		
B3I3F6		12/12/07		X		N		
B3I3E6				X	X	N		
B3I3E7	12/12/06			X		N		B07

Name: Doree D. Timlin

Reviewed By: Team Leader

Signature/Date: B. D. D. 12/12/06

SUXOS

910

①

Team #: 4
Date: 5/18/06

Grid Summary Sheet

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A3B7	12/18/06	12/18/06		X		N		BAT
C3A3C7				X		N		
C3A3D7				X		N		
C3A3E7				X		N		
C3A3F7				X		N		
C3A3G6				X	X	N		
C3A3F6				X	X	N	7	
C3A3E6				X		N		
C3A3D6				X		N		
C3A3C6	12/18/06	12/18/06		X	(fill in b)	N		BAT

Name: YOUNG J. THORNTON

Reviewed By: SUXOS
Team Leader: QC

Signature: [Signature]
Date: [Date]

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FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	<u>Y/LO</u>

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SURFACE SWEEP UXO OPERATIONS MRS-16
SEE SVYOS PAGE FOR PERSONNEL PRESENT

* GPS UNIT USED FOR SWEEP OPERATIONS WAS
NOT FUNCTIONING PROPERLY.

REMEDY: WE REPLACED THE GPS UNIT WITH
ANOTHER ONE. ALL IS WELL

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SAMPLES TESTED IN TEST PIT PRIOR TO PUTTING INTO
SERVICE.

USACE QA Representative _____ Date _____

Contractors QC Representative [Signature] Date 12/12/06

DAILY QUALITY CONTROL REPORT

DATE: December 14, 2006

DAY	S	M	T	W	T H	F	S
-----	---	---	---	---	----------------------	---	---

USAGE UXO SAFETY Terry Gleason

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	65	Lo	52	
WIND	Still	<u>Moderate</u>	High	NW@5 mph	
HUMIDITY	Dry	<u>Moderate</u>	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep
Grids completed, Surface Swept: 24 grids QC'd this date: 00

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

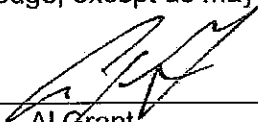
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/14/06, UXOQCS/UXOSO FADL dated 12/14/06, Team FADL dated 12/14/06, Tailgate Safety Meeting dated 12/14/06, JSA dated 12/14/06 (2 pages), Follow-up for surface removal dated 12/14/06,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/14/06
Date

FI

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface Clearance .	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	2
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	2

Today's Activities:

0630 - Attended morning meetings.
 0700 - On work site MRS -16. One large UXO Team conducting surface UXO clearance operations.
 830 - Jack Tortolano and John Sparks secured for the day. Both have their 40 hours for the week due to completing their 8 hour refresher last weekend.
 1700 - Secured field activities.

Summary: Surface clearance: Completed 18 full grids and 5 partials. Collected and removed 78 pounds of MEC scrap. TEN MEC items encountered: TWO M49 Trip Flares were removed by USACE OE Safety and placed in a safe holding area, ONE M1 Practice Mine and SEVEN 2.36 were left in place and will be investigated further.

1800 - 1830 - Performed daily's.

NOTE: Production decreased today due to encountering several large piles of small arms cartridge clips and expended small arms cartridges. Also TWO UXO Techs departed the work site early as mentioned above.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Cloudy/Fogging but nice. Morning 53, afternoon in the mid 60's.	

SIGNATURE: Tim Mathisen

12/14/2006

page 1 of 1



4-6

DAILY LOG	DATE	12	14	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Weekend safety briefing)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations</p> <p>0900: Conducted follow-up inspection for surface sweep. All is well.</p> <p>1100: Checked on crew all is well.</p> <p>1215: Admin</p> <p>1400: Walked with the teams and observed their methods and looked at their work. All is well.</p> <p>1630: Closed MRS-16 for the day.</p> <p>1700: COB</p> <p>MEC encountered: See SUXOS FADL</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>N/A</p>
<p>WEATHER CONDITIONS:</p> <p>cool 54 degrees 67 degrees PM</p>	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/14/06

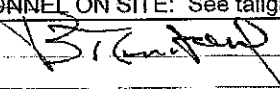


FIELD ACTIVITY DAILY LOG

F1

F1

Daily Log	Date:	12	14	2006
	No.			12
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, wet, slippery conditions discussed		
Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, starting surface sweep, Schonstedts set on Level 2		
0800 Jack Tortolano and John Sparks departed site due to project overtime constraints		
1115 - 1200 Lunch		
Surface sweeps continues		
1630 MEC Scrap inspected and turned over to SUXOSO		
1650 Returned to office, secured and cleaned equipment		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 5 hand held radios, 1 Trimble Survey instrument		
Grids surfaced swept: 23 MEC Scrap located: 78 lbs		
UXO Located: 2 ea M49 Trip flares, turned over to USACESO		
Problems encountered: Several large piles of small arms links and clips encountered today, also loss of 2 personnel to overtime constraints.		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Terry Gleason		
WEATHER CONDITIONS: Temps: 53 - 64		IMPORTANT TELEPHONE CALLS:
Morning: Cool		NONE
Afternoon Cool foggy all day		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 14-Dec-06



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/14/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
TIM MATHESEN	
JOHN HOWER	
JAMES DRAKE	
JOHN TONTANO	
BRUCE TUCKER	
ASHLEY RICE	
JOHN SPARKS	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____

JOB SAFETY ANALYSIS

Date: 12/14/2006
 Job#: 846075
 Permit#:
 Issued By: A.grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>_____ Reflective vest near heavy equipment</p> <p><input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p> <hr/>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p>_____ Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p>_____ Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input checked="" type="checkbox"/> Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
--	---	---

SUPERVISOR/FOREMAN RECOMMENDATION:

Unexploded Ordnance Tracking Form

R19

UXO GPS ID

PHOTO ID

TEAM

TEAM LEADER

UXO-1-848

120-1645-5PG

Z

Grid ID

43A3D1

INITIAL INFORMATION

Date Found

Initial Condition

Initial Description

Initial Disposition

Initial Comments

12/14/06

DUD FIRES

FLARE TRIP, M49

SMA

Surface?

YES NO
Circle One

Manual Reference

Initials

Final Abbreviated Description

FLARE TRIP, M49

DEMO INFORMATION

Demo Date

Demo Completed

Demo Description

Demo Comments

YES NO
Circle One

OE Final Disposition

OE Final Condition

OE TRANSFER

QUALITY CONTROL INFORMATION

QC Review Passed?

Quality Control Review Comments

Modification Notes

YES NO
Circle One

Signature/Title/Date

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

K19

Unexploded Ordnance Tracking Form

UXO GPS ID

PHOTO ID

TEAM

TEAM LEADER

UXO-1-050

100-1653-JPB

TMA

ROBERT TINKNELL

Grid ID

B3 BAIT4

INITIAL INFORMATION

Date Found

Initial Condition

Initial Description

Initial Disposition

Initial Comments

2/19/2006

DUB

M49 FARES

SHA

Surface?

YES NO
Circle One

Manual Reference

Initials

Final Abbreviated Description

FARE, TRIP, M49

DEMO INFORMATION

Demo Date

Demo Completed

Demo Description

Demo Comments

YES NO
Circle One

OE Final Disposition

OE Final Condition

OE TRANSFER

QUALITY CONTROL INFORMATION

QC Review Passed?

Quality Control Review Comments

Modification Notes

Signature/Title/Date

YES NO

Circle One

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

④ 5/6

Grid Summary Sheet

Team #: 12/14/06
 Date: 12/14/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		LUXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A3D2	12/14/06	12/14/06		X		N		BDN
C3A3E1	12/14/06	12/14/06		X		Y 2.34		
C3A3F1				X				
C3A3G1				X			4	
C3A3H1				X		Y 2.32	5	
C3A3I1								
C3A3J1								
C3A3K1								
C3A3L1								
C3A3M1								
C3A3N1								
C3A3O1	12/14/06	12/14/06			X			BDN

Name: RICK THACKER II
 Reviewed By: R. D. [Signature] 12/14/06
 Team Leader: SUXOS
 QC: QC

2

Team #:
Date:

12/14/06
4

Grid Summary Sheet

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OIE Scrap Weight (lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A2IB	12/14/06			X		Y 2.36	4	B27
C3A2IH	12/14/06			X		Y 2.36	3	
C3A2IG	12/14/06	12/19/06		X		N		
C3A2ID		12/14/06		X		N		
C3A2EE		12/14/06		X		Y 2.86	11	
C3A2EB		12/14/06		X		N		
C3A2ED		12/14/06		X		N		
C3A2BA		12/14/06		X		Y 2.36	10	
C3A2AA		12/14/06		X		N		
B-3B2IC	12/14/06			X		N	11	B27

Name: B. J. Wickes
D. Tinknell

Reviewed by:
Team Leader: SUXOS
QC

Signature: [Signature]
Date: 12/14/06

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K 19

Grid Summary Sheet

Team #:
Date:

18/19/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		LUXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B3T2ID	12/14/06	12/14/06		X		N	16	B21
B3T2HD	12/14/06			X		N		
B3T2ED	12/14/06				X	N		
B3T3C1					X	N		
B3T3HT1				X		N	4	B22

Name
Salvatore D. Trickett

Reviewed By
Team Leader
SUXOS
QC

Signature/Date
[Signature] 12/19/06

K.3.1

Form QC-5

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	YES

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

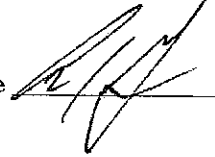
SURFACE SWEEP MRS-16 SEE SUXOS EPDL FOR PERSONNEL LIST

ALL WORK IAW CONTRACT

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCANNING TESTS TESTED AT TEST PIT
BATTERIES CHANGED THIS AM

USACE QA Representative _____ Date _____

Contractors QC Representative  Date 12/14/06

DAILY QUALITY CONTROL REPORT

DATE: December 21, 2006

DAY	S	M	T	W	T	F	S
					H		

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	36	Lo	55	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Moderate	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

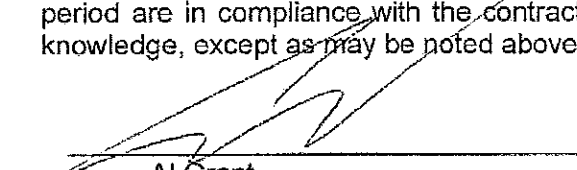
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/21/06, UXOQCS/UXOSO FADL dated 12/21/06, Team FADL dated 12/21/06, Tailgate Safety Meeting dated 12/21/06, JSA dated 12/21/06 (2 pages), Follow-up for surface removal dated 12/21/06,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/20/06

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/21/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep, Metal Cutting, Equipment Operation

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Bruce D. Tinknell	Bruce D. Tinknell
Ashley Rice	Ashley Rice
TARA VOCE	TARA VOCE
Tom Mathisen	Tom Mathisen
JEFF STEINWAND	JEFF STEINWAND
John Jenkins	John Jenkins
JOHN SPARKS	JOHN SPARKS
Harley Davidson	Harley Davidson
JAMES DRAKE	JAMES DRAKE

Meeting Conducted by: AI Grant

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Date: 12/21/2006
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: A. Grant Are other crews in area? yes New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations Metal Cutting Equipment operation		1221
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Fire		NA
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		A
Crew Name Signatures:	A.R. [Signature] [Signature] James Crooke	
[Signature]	[Signature]	
[Signature]	[Signature]	
[Signature]	[Signature]	
[Signature]	[Signature]	

JOB SAFETY ANALYSIS

Date: 12/21/2006
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest near heavy equipment</p> <p><input checked="" type="checkbox"/></p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input checked="" type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input checked="" type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DATE	12/21/2006
NO.	12
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface Clearance .	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	7
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - Continued surface UXO clearance operations in areas on the range which have the heaviest density of MEC scrap.

1400 - Jimmy Drake departed the work site early in order to change his motel location.

Summary: Collected and removed 482 pounds of MEC scrap. No MEC located today. Grids completed: 15 full and 5 partial.

1615 - Personnel returned to the support area and cleaned equipment and vehicles.

1700 - Secured.

2000 2030 - Completed week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning about 36, Afternoon in the mid 50's. Light rain starting about noon.	



DAILY LOG	DATE	12	21	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Winter driving)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1100: Checked on crew all is well.</p> <p>1215: Admin</p> <p>1400: Walked with the teams and observed their methods and looked at their work. All is well.</p> <p>1630: Closed MRS-16 for the day.</p> <p>1700: COB</p> <p>MEC encountered: See SUXOS FADL</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS: cool 36 degrees 55 degrees PM	N/A IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/21/06



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	12	21	2006
	No.			16
	Sheet	1 of 1		

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, cold,		
Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, starting surface sweep, Schonstedts set on Level 2		
1130 - 1215 Lunch		
Surface sweeps continues		
1400 Jimmy Drake departed with SUXOS		
1530 MEC Scrap inspected and turned over to SUXOS		
1600 Returned to office, secured and cleaned equipment		
1700 Work completed for today		
<i>Equipment used: 4 rental pickup trucks , 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument</i>		
<i>Grids surfaced swept: 20 MEC Scrap located: 482 lbs</i>		
<i>UXO Located: No items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
WEATHER CONDITIONS: Temps: 31 - 55		IMPORTANT TELEPHONE CALLS:
Morning: COLD, with frost on ground		NONE
Afternoon Cool, slight breeze ENE		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE:		DATE: 21-Dec-06

Grid Summary Sheet

Team #: 7
 Date: 12/18/06

162

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid OC/OA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A2F7	12/21/06	12/21/06		X		N	100	1760 35
C3A2E1				X		N	50	153 812 500 213
C3A2H1				X		N	36	117 672 75
C3A2J4				X		N	8	15
C3A2K4				X			30	15
C3A2L3				X			30	110
C3A2M3					X		15	8
C3A2N0					X			5
C3A2G2				X			60	19

Name _____

Reviewed By
 Team Leader

SUXOS

OC

Signature/Date _____

Grid Summary Sheet

Team #: 4
 Date: 12/31/12

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A2G2	12/31/12			X		N	205	48 mm
C3A2C3				X		N	5	18
C3A2B3				X		N		125
C3A2A3				X		N	5	1 lb
B3T2A3					X	N		1 lb
B3T2B3					X	N		3 mm
B3T2C3						N		3 mm
B3T2A2				X		N		3 mm
B3T2B2				X		N		3 mm
B3T2C2				X		N		3 mm

Name

Reviewed By

Signature/Date

Team Leader

SUXOS

QC

DAILY QUALITY CONTROL REPORT

DATE: December 26, 2006

DAY	S	M	<u>T</u>	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	<u>41</u>	Lo	<u>57</u>	
WIND	Still	<u>Moderate</u>	High	<u>NW@3mph</u>	
HUMIDITY	Dry	<u>Moderate</u>	High	<u>39%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
0	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
2	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, X-ray operations, Debris removal

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

N/A

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

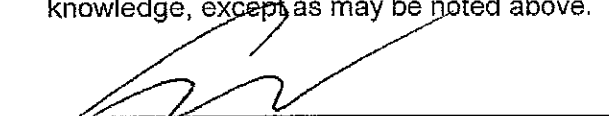
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL dated 12/26/06, Tailgate Safety Meeting dated 12/26/06, JSA dated 12/26/06

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/26/06

Date

FIELD ACTIVITY DAILY LOG

Daily Log	Date:	12	26	06
	No.			
	Sheet	1 of 1		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: MRS 16 Surface clearance

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630: Tailgate, JSA's paperwork. Prep equip for Op w/ James Drake to X Ray area in MRS 16. Transport Polking to MRS 16.

0900: Arrive on site begin OP

1000: COE on site

1015: COE off site

1615: Finish for day 28 - 2.36" rockets were traced or deemed Practice by further investigation, see attached list for Numbers and Grids. Begin Raining. Depart site.

1630: Arrive @ office paperwork Secure equip

1700: COB

VISITORS ON SITE: COE CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Ptty cloudy rain in PM IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: Walker, Drake

SIGNATURE: [Signature] DATE: 12-26-06



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/26/06 Time: 0630 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: UXO / Debris Removal

Chemicals Used: _____

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Diesel, Hydraulic Fluid

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment,

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the event of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-4311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: _____

ATTENDEES

NAME PRINTED

SIGNATURE

NAME PRINTED	SIGNATURE
JAMES DRAKE	<i>James Drake</i>

Meeting Conducted by: Valdez

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

Surface Debris Removal

Date: 12/26/2006
 Job#: 846075
 Permit#: _____
 Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord								
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: MRS 16 Gate Wind Direction: Easterly Evacuation Route:	JSA Prepared by: V. Valdez Are other crews in area? no						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: MRS 16 Gate	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">New:</td> <td style="width: 30%; text-align: center;">x</td> <td style="width: 40%;"></td> </tr> <tr> <td>Revised:</td> <td></td> <td></td> </tr> </table>	New:	x		Revised:		
New:	x							
Revised:								
Job Task (What are You Doing)		Audit the Job Audit Time:						
Removal of surface debris								
Potential Hazards		Supervisor's Comments						
Trips, slips and falls								
Cuts and Lacerations								
Insect/ Snake bites								
Contact Dermatitis								
Handling of heavy objects								
Inclement weather								
UXO								
Recommended Action or Procedure		Supervisor's Initials						
Clear work areas of equipment, tools and debris								
Wear leather gloves								
Avoid insect nesting areas, check likely habitats of snakes in and around work area								
Wear PPE to avoid skin contact with contaminated soil, plants and other skin irritants								
Observe proper lifting techniques, lifting limits 60 lbs. Maximum								
Wear multiple layers of clothing								
Crew Name Signatures:								
<i>James Chalk</i>	<i>[Signature]</i>							



JOB SAFETY ANALYSIS

Radiograph use on UXO

Date: 12-24-06
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord								
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: MRS 16 Gate Wind Direction: Evacuation Route: See Veh Safety Packe	JSA Prepared by: Valdez Are other crews in area? No						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: MRS 16 Gate	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">New:</td> <td style="width:15%; text-align: center;">X</td> <td style="width:70%;"></td> </tr> <tr> <td>Revised:</td> <td></td> <td></td> </tr> </table>	New:	X		Revised:		
New:	X							
Revised:								
Job Task (What are You Doing)		Audit the Job Audit Time:						
Radiograph use on UXO								
Potential Hazards		Supervisor's Comments						
UXO								
Ionizing Radiation								
Slips trips and falls								
Biological Hazards/ Insects Poison oak								
Weather								
Recommended Action or Procedure		Supervisor's Initials						
Observe safeties associated with UXO								
Limit personnel on site								
Maintain safe distance when Operating X-Ray								
Wear Proper PPE								
Use Pre-exposure Lotion and Proper Decon								
Crew Name Signatures:								
<i>Jarvis Drake</i>	<i>[Signature]</i>							

DAILY QUALITY CONTROL REPORT

DATE: December 28, 2006

DAY	S	M	T	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	35	Lo	48	
WIND	Sill	Moderate	High	NW@3mph	
HUMIDITY	Dry	Moderate	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
0	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
2	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, X-ray operations, Debris removal

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

N/A

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

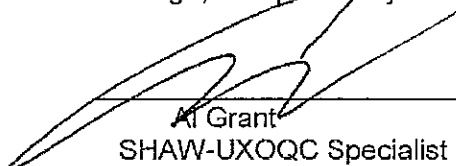
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL dated 12/28/06, Tailgate Safety Meeting dated 12/28/06, JSA dated 12/28/06

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/28/06

Date

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 12-28-04 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca.
 Type of Work: Surface Clearance MRS 16
 Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.
 Chemical Hazards: Chemical, Thermal Burns. Inhalation.
 Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station
 Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Steven Bennett	<i>[Signature]</i>
Doug HOLMES	<i>[Signature]</i>
JAMES DRAKE	<i>[Signature]</i>
Kirk Buisse	<i>[Signature]</i>

Meeting Conducted by: V. Valdez *[Signature]*
 Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Radiograph use on UXO

Date: 12/2/06
 Job#: 846075
 Permit#: _____
 Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: MRS 16 Gate Wind Direction: Evacuation Route: See Veh Safety Packe	JSA Prepared by: Valdez Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: MRS 16 Gate	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Radiograph use on UXO		
Potential Hazards		Supervisor's Comments
UXO		
Ionizing Radiation		
Slips trips and falls		
Biological Hazards/ Insects Poison oak		
Weather		
Recommended Action or Procedure		Supervisor's Initials
Observe safeties associated with UXO		
Limit personnel on site		
Maintain safe distance when Operating X-Ray		
Wear Proper PPE		
Use Pre-exposure Lotion and Proper Decon		
Crew Name Signatures:	<i>KL B...</i>	
<i>James Clark</i>		

FIELD ACTIVITY DAILY LOG

Daily Log	Date:	12	28	06
	No.			
	Sheet	(Of)

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: MRS 16

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630: Tailgate ISA's, prepare equip for op - MRS 16 Debris removal of Xray Rackets w/ Drake, Bennett, Holmes, Busse on Debris Removal.

0730: Arrive on site start on removal of concrete pipe w/ Bennett on Backhoe / Holmes on T4-83

0900: Busse on site

1000: COE on site advises to move concrete pad @ latrine
 Call Tim advise of conversation w/ COE
 Remove concrete @ latrine / cont. Xray OP while crew on concrete.

1400: Xray confirm booster cup in (OE) UXO#: UXO-1-051
 location already noted in GPS for Grid sheets. Grid C3A2IO

1500: COE on site confirmed findings item left on secure site,
 cont. ~~on~~ w/OP.

1630: stop OP for day all Xrays NOT complete, 3 more left
 will complete next week. Return to office secure equip

1700: CAB

VISITORS ON SITE: COE CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Ptly cloudy 40-55° IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: Valdez, Drake, Bennett, ~~Kenneth~~, Holmes, Busse.

SIGNATURE: [Signature] DATE: 12-28-06

Unexploded Ordnance Tracking Form

UXO GPS ID
11X0-1-051

PHOTO ID

TEAM LEADER
Bruce T. Inebral

TEAM
1

Grid ID
C3A210

INITIAL INFORMATION

Date Found	Initial Condition	Initial Description	Initial Disposition	Initial Comments
12/28/01	ARMED <input checked="" type="radio"/> YES / <input type="radio"/> NO <small>Circle One</small>	2.36" ROCKET (HEAT)	LEFT IN PLACE	

Manual Reference

Initials

Final Abbreviated Description

DEMO INFORMATION

Demo Date	Demo Completed	Demo Description	Demo Comments
	<input type="radio"/> YES / <input type="radio"/> NO <small>Circle One</small>		

OE Final Disposition

OE Final Condition

OE TRANSFER

Signature/Title/Date

QUALITY CONTROL INFORMATION

QC Review Passed?	Quality Control Review Comments	Modification Notes
<input type="radio"/> YES / <input type="radio"/> NO <small>Circle One</small>		

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

K1.9

DAILY QUALITY CONTROL REPORT

DATE: December 27, 2006

DAY	S	M	T	W	T	F	S
				H			

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	37	Lo	49	
WIND	Still	<u>Moderate</u>	High	NW@3mph	
HUMIDITY	Dry	<u>Moderate</u>	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
0	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
2	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, X-ray operations, Debris removal

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

N/A

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL dated 12/27/06, Tailgate Safety Meeting dated 12/26/06, JSA dated 12/26/06

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/27/06

Date

Daily Log	Date:	12	27	06
	No.			
	Sheet	1 of 1		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: MRS 16

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630: Tailgate, JSA's, Paperwork. Prep equip for Daily Op. MRS 16 surface clearance of Debris NW OE w/ Kirk (Dumptruck operator), Steve (Backhoe) & Jimmy Drake UAs.

0740: Depart office to transport backhoe & Dumptruck to 16

0755: Arrive @ MRS 16 start loading debris on pad (Piling) in Truck Jimmy Down to mark open pits on site w/ caution tape.

0830: Transport Kirk to office, will return shortly. Back to 16 w/ Steve

0930: Kirk back on site. Took drive on road on top to look for open pits wind blowing very hard. No chance of taking X-rays safely. "Bowl area" gusty but still able to cont. w/ Debris removal.

1100: Complete removal of Piling Debris on pad. Move to removal of cut oak around site.

1330: Into office for paperwork & to enter info on datalogger. Jimmy still out w/ Bennett & Busse remaining debris

1400: Return to MRS 16. Assist w/ Debris Removal

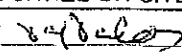
1600: Depart site for office secure equip. Paperwork transfer data

1700: COB

VISITORS ON SITE: COE CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: pty cloudy IMPORTANT TELEPHONE CALLS:
Gusty / strong winds 35-45°

SHAW PERSONNEL ON SITE: Jaldaz, Bennett, Drake, Busse

SIGNATURE:  DATE: 12-27-06

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 12-27-06 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca.
 Type of Work: Surface Clearance MRS 16
 Chemicals Used: Fuels, Hydraulic Oil

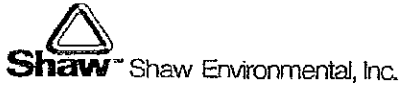
SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.
 Chemical Hazards: Chemical, Thermal Burns. Inhalation.
 Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station
 Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
JAMES DRAKE	<i>James Drake</i>
Kirk Busse	<i>Kirk Busse</i>
Steven Bennett	<i>Steven Bennett</i>

Meeting Conducted by: V. Valdez
 Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Radiograph use on UXO

Date: 12/27/06
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: MRS 16 Gate Wind Direction: Evacuation Route: See Veh Safety Packe	JSA Prepared by: Valdez Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: MRS 16 Gate	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Radiograph use on UXO		
Potential Hazards		Supervisor's Comments
UXO		
Ionizing Radiation		
Slips trips and falls		
Biological Hazards/ Insects Poison oak		
Weather		
Recommended Action or Procedure		Supervisor's Initials
Observe safeties associated with UXO		
Limit personnel on site		
Maintain safe distance when Operating X-Ray		
Wear Proper PPE		
Use Pre-exposure Lotion and Proper Decon		
Crew Name Signatures:		

DAILY QUALITY CONTROL REPORT

DATE: January 03, 2007

DAY	S	M	T	W	T	F	S
				H			

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	31	Lo	55	
WIND	Still	<u>Moderate</u>	High	NW@3mph	
HUMIDITY	Dry	<u>Moderate</u>	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

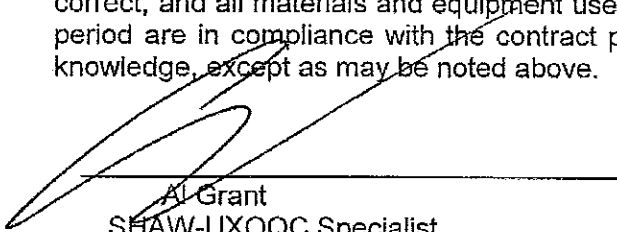
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/03/07 UXOQCS/UXOSO FADL dated 01/03/07, Team FADL dated 01/03/07, Tailgate Safety Meeting dated 01/03/07, JSA dated 01/03/07 (2 pages), Follow-up for surface removal dated 01/03/07.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.


Al Grant
SHAW-UXOQC Specialist

01/03/07
Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/03/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep, Metal Cutting, Equipment Operation

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
John Howell	
JEFF STEINWAND	
Jim Mathisen	
Joshua Jenkins	
Harley Davidson	
TARA VOLPE	
JOHN SPARKS	
Brian T. Tinkler	
ASHLEY RICE	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 01/03/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED

SIGNATURE

James Drake
James Drake
KIA Smith

James Drake
KIA Smith

JOB SAFETY ANALYSIS

Date: 1/3/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>Reflective vest near heavy equipment <input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p><input checked="" type="checkbox"/> Fire extinguisher</p> <p><input checked="" type="checkbox"/> Fire Blanket</p> <p><input checked="" type="checkbox"/> Fire Watch</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing Doing</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
---	---	---

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

F1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface Clearance	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Participated in a preparatory meeting to review FWV.

0730 - Attended biological meeting to discuss procedures when/if Legless Lizards or Tiger Salamanders are encountered.

Approx. 0800 - UXO Clearance Team continued with UXO Surface clearance operations.

1300 to 1630 - UXO QC and SUXOS performed a final inert/demil certification of approx. 1500 pounds of MEC scrap.

1700 - Secured field operations.

Summary: Completed surface clearance on 16 full grids and 10 partials. Collected and removed 6 pounds of MEC scrap and no UXO/MEC items were encountered.

1730 - 1800 - Completed daily's.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning about 48, Afternoon in the late 50's.	IMPORTANT TELEPHONE CALLS:

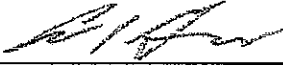


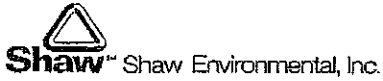
Shaw E & I, Inc.

LC

DAILY LOG	DATE	01	03	07
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate opened building 0630: Tailgate (Topic: Lifting techniques) 0645: Watched the teams check their instruments at the test pit. All the units checked out. 0700: Teams onsite begin surface sweep operations. 0705: Admin 0900: Walked the line with the crew looked at the areas that have been surface cleared. 1100: Checked on crew all is well. 1215: Admin 1400: Walked with the teams and observed their methods and looked at their work. All is well. 1630: Closed MRS-16 for the day. 1700: COB MEC encountered: See SUXOS FADL -----Nothing Follows-----			
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
		N/A	
WEATHER CONDITIONS: cool 31degrees 55 degrees PM		IMPORTANT TELEPHONE CALLS:	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: A. C. Grant 		DATE: 01/03/07	



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	3	2007
	No.			17
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16 Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA,
 Attended prep meeting on intrusive activities in MRS-16
 Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16
 Arrived MRS 16, team assignments made, starting surface sweep, Schonstedts set on Level 2
 1130 - 1215 Lunch
 Surface sweeps continues
 2 personnel x-raying suspected MEC
 2 TECH ONEs assisting SUXOS/QC on scrap certification
 1615 MEC Scrap inspected and turned over to SUXOS
 1640 Connex and gates locked, returned to office, secured and cleaned equipment
 1700 Work completed for today

Equipment used: 4 rental pickup trucks, 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe

Grids surfaced swept: 26 MEC Scrap located: 6 lbs

UXO Located: No items turned over to SHA

Problems encountered: None

VISITORS ON SITE: USACE OE Safety Clint Huckins	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
--	--

WEATHER CONDITIONS: Temps: 31 - 55 Morning: COLD,	IMPORTANT TELEPHONE CALLS: NONE
--	------------------------------------

Afternoon Cool

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: *[Signature]* DATE: 3-Jan-07

Grid Summary Sheet

Team #: 2
 Date: 01/23/07

4
01/23/07

Spiegel

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A1B7	01/23/07					N	52	S
C3A1C7								
C3A1E6								B
C3A1B7	01/23/07			X				43
C3A1H0	01/23/07	01/23/07		X				
C3A1H1	12/21/06	01/23/07		X				

Name _____

Reviewed By _____

Signature/Date _____

Team Leader _____

SUXOS

QC

Grid Summary Sheet

Team #: 4
 Date: 01/02/87

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A1B9	01/03/87	01/03/87		X	X	N	X	RM/ML
C3A1C9				X		N	I	RM/ML
C3A1D9				X		N	with	RM/ML
C3A1E9				X		N		RM/ML
C3A1F9				X		N		RM/ML
C3A1G9				X		N	Q	RM/ML
C3A1E8				X		N		RM/ML
C3A1D8				X		N	Q	RM/ML
C3A1C8				X		N		RM/ML
C3A1B8					X			

Name _____ Reviewed By _____ Signature/Date _____
 Team Leader _____
 SUXOS _____
 QC _____

Grid Summary Sheet

Team #: 2
 Date: 01/23/07

10 people

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		LUXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
B3J2J1	6/03/07	6/03/07			X	N	0	2818 5M
C3HRA1				X		N	0	25M 5A1M
C3AZB1				X		N	0	25M
C3A2C1				X		N	0	20M
E3AHB1				X		N	0	15M N
C3A1C1				X		N	0	15M N
C3A1B1				X		N	0	20M N
C3A1A1					Y	N	0	10
B3J2J1					X	N	0	5
C3A1A1					Y	N	0	5

Name: Bu STINEKULLI
 Reviewed By: SUXOS
 Team Leader: QC
 Signature/Date: _____

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date: _____

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 66 Report No: _____

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	✓

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SURFACE CLEARANCE UXO
MRS-16
SEE SOXOS PAOL FOR PERSONNEL LIST
ALL WORK DONE IAW CONTRACT DOCUMENTS AND WPI'S

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

USACE QA Representative _____ Date _____

Contractors QC Representative [Signature] Date 1/3/06

DAILY QUALITY CONTROL REPORT

DATE: January 04th 2007

DAY	S	M	T	W	<u>T</u> <u>H</u>	F	S
-----	---	---	---	---	------------------------------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	<u>Rain</u>	Fog
TEMP: H/L	Hi	<u>31</u>	Lo	<u>55</u>	
WIND	Still	<u>Moderate</u>	High	<u>NW@3mph</u>	
HUMIDITY	Dry	Moderate	<u>High</u>	<u>90%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

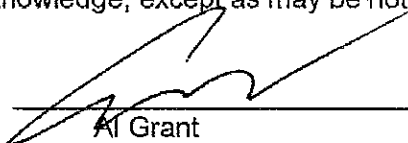
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/04/07 UXOQCS/UXOSO FADL dated 01/04/07, Team FADL dated 01/04/07, Tailgate Safety Meeting dated 01/04/07, JSA dated 01/04/07 (2 pages), Follow-up for surface removal dated 01/04/07,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/04/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/04/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep, Metal Cutting, Equipment Operation

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Jeff Steinwand</u>	<u>[Signature]</u>
<u>TRISHA SMITH</u>	<u>[Signature]</u>
<u>Tom Mathison</u>	<u>[Signature]</u>
<u>JAMES DRAKE</u>	<u>[Signature]</u>
<u>John Tostolami</u>	<u>[Signature]</u>
<u>Harky Davidson</u>	<u>[Signature]</u>
<u>JOHN SPARKS</u>	<u>[Signature]</u>
<u>TARA VULPE</u>	<u>[Signature]</u>

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 1/4/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Metal Cutting		
Equipment operation		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

JOB SAFETY ANALYSIS

Date: 1/4/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DATE	1/4/2007
NO.	14
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface and Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Al Grant	UXO QC/Safety	9
Bruce Tincknell	Team Leader	5.5
Jack Tortolano	Team Leader	5.5
Jimmy Drake	UXO Tech III	3.5
Harley Davidson	UXO Tech III	5.5
John Honer	UXO Tech III	5
Jeff Steinwand	UXO Tech II	5
Tara Volpe	UXO Tech II	5
Josh Jenkins	UXO Tech I	5
John Sparks	UXO Tech I	5

Today's Activities:

0630 - Conducted morning meetings.

0645 - Crew located and loaded materials needed to perform intrusive operations at MRS-16.

Approx. 0800 - Continued with surface clearance activities.

Approx. - 1000 - Surface clearance activities complete except for the 23 grids set aside for simultaneously surface and subsurface clearance operations.

Approx. - 1030 - Commenced surface/subsurface operations on 23 pre-selected grids.

1100 - UXO Team Leader ONE requested to secure field operations at the lunch break due to encountering heavy rain causing slippery/clinging soil conditions at the work site. Shaw's UXO QC/Safety Officer as well as the Corps OE Safety Specialist concurred with the Team's request to shut operations down at the lunch break.

1130 - Several UXO Techs cleaning and fueling trucks.

1200 - Secured MEC clearance activities.

Summary: Completed surface clearance grids - 8 full and 1 partial. TWO pounds of MEC scrap collected and No MEC encountered.

1200 - 1700 - Daily reports, working with QC and locating powder companies for future purchase of explosives.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning about 48. Rain all morning. Afternoon in the late 50's.	IMPORTANT TELEPHONE CALLS:



Shaw E & I, Inc.

DAILY LOG	DATE	01	04	07
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate opened building 0630: Tailgate (Topic: Lifting techniques) 0645: Watched the teams check their instruments at the test pit. All the units checked out. 0700: Teams onsite begin surface sweep operations. 0705: Admin 0900: Walked the line with the crew looked at the areas that have been surface cleared. 1000: Crew switched to sub-surface clearance operations 1130: Shut down the site at the request of the Team Leader due to adverse weather conditions. USACE UXO Safety Representative concurs MEC encountered: See SUXOS FADL -----Nothing Follows-----			
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
		N/A	
WEATHER CONDITIONS: cool 31degrees 55 degrees PM		IMPORTANT TELEPHONE CALLS:	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: A. C. Grant		DATE: 01/04/07	

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	4	2007
	No.			18
	Sheet	1 Of 1		

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered PPE and additional equipment for intrusive activities, depart for MRS 16		
Arrived MRS 16, team assignments made, starting surface sweep, Schonstedts set on Level 2		
Surface sweep completed, prep meeting held by SUXOS and QC, discussed intrusive activities, Schonstedts on "4", remove everything, lane width 5 Ft, new grid sheet discussed.		
Radio discussion with UXOSO on exclusion zone and public roads, decision is to not block roads but to observe the roads and stop digging whenever exclusion zone is entered.		
Intrusive in Grid C3A2D2		
1100 Contacted UXOSO, decision made to curtail activities today due to inclement weather		
1110 Connex and gates locked, returned to office, secured and cleaned equipment		
1130 Work completed for today		
Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)		
Grids surfaced swept: 9 MEC Scrap located: 2 lbs		
UXO Located: No items turned over to SHA		
Problems encountered: None		
VISITORS ON SITE: USACE OE Safety Clint Huckins		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: WORK CURTAILED DUE TO INCLEMENT WEATHER
WEATHER CONDITIONS: Temps: 31 - 55 Morning: COLD, rain, windy Afternoon Colder, winder, and rain heavy		IMPORTANT TELEPHONE CALLS: NONE
SHAW PERSONNEL ON SITE: See tailgate JIMMY DRAKE LEFT SITE AT 1000 HRS DUE TO ILLNESS		
SIGNATURE: _____		DATE: 4-Jan-07

Grid Summary Sheet

Team #: 4

Date: 01/04/07

K.21

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3R2A7	01/04/07			X		N	0	15 m, N
C3R2A2				X		N	0	20
C3R2A3				X		N	0	10 m, N
C3R2B3				Y		N	2	15
C3R2B4				X		N	0	Y
C3R2C4				X		N	0	15
C3R2B1				X		N	0	20
C3R2D5				X		N	0	5
C3B2E5					Y	N	0	5
C3A2D2	01/04/07							

Name Steve Trickett

Reviewed By
Team Leader
SUXOS
QC

Signature/Date

V3

Form QC-5

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	Y

IDENTIFY DEFINABLE FEATURE OF WORK LOCATION, AND LIST PERSONNEL PRESENT

SURFACE AND SUB SURFACE UXO CLEARANCE

MRS-16

SEE SUXOS PAGE FOR LIST OF PERSONNEL

ALL WORK TAW CONTRACT

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

USACE QA Representative _____ Date _____

Contractors QC Representative [Signature] Date 11/4/06

DAILY QUALITY CONTROL REPORT

DATE: January 05, 2007

DAY	S	M	T	W	T H	F	S
-----	---	---	---	---	--------	---	---

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	36	Lo	50	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	38%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

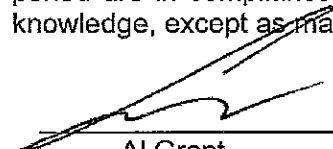
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/05/07 UXOQCS/UXOSO FADL dated 01/05/07, Team FADL's dated 01/05/07, Tailgate Safety Meeting dated 01/05/07, JSA dated 01/05/07 (2 pages), Follow-up for surface removal dated 01/05/07,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/05/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Kevin Silmann JOHN HOWER	[Signature]
Tim MATHEISCH	[Signature]
ASHLEY RICE	[Signature]
BOB LITTLE	[Signature]
John [unclear]	[Signature]
JEFF STEINWAND	[Signature]
TARA VOLPE	[Signature]
John SPARKS	[Signature]
Justin Jenkins	[Signature]
Hunter Davids	[Signature]
Meeting Conducted by: <u>Al Grant</u>	

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 1/5/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>Tim Mathisen</i>	<i>Al Grant</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input 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type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input checked="" type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

F1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	0
Harley Davidson	UXO Tech III	8
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

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Today's Activities:
Note: Jimmy Drake departed yesterday at 1000 because he was sick. Today he called in sick also.
0630 - Conducted morning meetings.
0700 - On site. Crew split into Two UXO sweep teams. Commenced subsurface MEC removal operations on 23 pre-selected grids located in the bowl area within MRS-16.
Approx. - 1215 - USACE Safety, USACE Project Manager on site for a routine visit.

Note: Slow going since we are conducting surface and subsurface clearances in the most heavily metal contaminated area within MRS-16.

1500 - Harley Davidson departed the area to conduct personal business.

Summary: X-rayed 4 MEC like items to determine if HE filled. All items were classified as inert practice rockets or rifle grenades. Completed 4 - grids and started, but not completed another 2 grids. Collected 91 pounds of MEC scrap. No MEC encountered.

1700 - Secured from field operations.
2030 - 2100 - Completed week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning about 36. Afternoon in the late 50's.	



46

DAILY LOG	DATE	01	05	07
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Lifting techniques)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1000: Crew switched to sub-surface clearance operations</p> <p>1500: Picked up Harley Davidson and took him back to the office.</p> <p>1600: Back in the fields closing down the site for the week.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 31degrees 55 degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/05/07



Shaw Environmental, Inc.

TEAM 1

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	5	2007
	No.			19
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16	Project Number: 846075
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FIELD ACTIVITY SUBJECT: Intrusive Activities

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA, decision made to use two dig teams

Schonstedts checked in test grid, UXO teams gathered PPE, depart for MRS 16

Arrived MRS 16, team assignments made, Started intrusive activities, Schonstedts set on Level 4

Intrusive in Grid C3A2D2

X-ray 1 ea rifle grenade, M9, item is practice

1640 Connex and gates locked, returned to office, secured and cleaned equipment

1700 Work completed for today

Equipment used: 4 rental pickup trucks , 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 x-ray machine

Grids completed: 0 MEC Scrap located: 15 lbs Holes dug: 399

UXO Located: No items turned over to SHA

Problems encountered: None

VISITORS ON SITE:

USACE OE Safety Clint Huckins

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Temps: 31 - 55

Morning: Cool

Afternoon warm, sunny day

IMPORTANT TELEPHONE CALLS:

NONE

SHAW PERSONNEL ON SITE: See Tailgate

SIGNATURE: 

DATE:

5-Jan-07



Shaw Environmental, Inc.

TEAM 2

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	5	2007
	No.			1
	Sheet	1 Of		1

PROJECT NAME: FORT ORD, CA MRS -16	Project Number: 846075
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FIELD ACTIVITY SUBJECT: Subsurface Removal
--

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA,
--

Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16
--

0715 Arrived MRS 16, team assignments made.

0730 Start subsurface operations. Schonstedts set on 4
--

1130 Break for lunch

1215 End Lunch return to work

1500 Start break

1515 End break

1635 End work on grids

1645 Connex and gates locked, returned to office, secured and cleaned equipment

1700 End of day

<i>Equipment used: 4 rental pickup trucks , 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)</i>
--

<i>Grids complete: C3A215, C3A214, C3A213, C3A212 Total MEC Scrap recovered 97 LBS</i>
--

<i>USACE Seed Item QA06 found in grid C3A213</i>
--

<i>UXO Located: No items turned over to SHA</i>

Problems encountered: None

VISITORS ON SITE: USACE OE Safety Clint Huckins	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
--	--

WEATHER CONDITIONS: Temps: 35 - 55 Morning: COLD, clear Afternoon Cool, clear, windy	IMPORTANT TELEPHONE CALLS: NONE
--	---

SHAW PERSONNEL ON SITE: <i>See tailgate</i> STEVEN DAVIDSON LEFT SITE AT 1500 HRS DUE TO APPOINTMENT
--

SIGNATURE: John Tortolano	DATE: 5-Jan-07
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FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	<i>y</i>

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

*SUBSURFACE UXO CLEARANCE
MRS -16
SEE SIXOS FAPL FOR PERSONNEL LIST*

*ALL WORK IS BEING DONE IAW CONTRACT
DOCUMENTS AND APPLICABLE WORK PLANS*

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

*SCANNING TEST MAGNETOMETERS ARE SET ON
SETTING #4
TESTED AT PIT IN AM*

USACE QA Representative _____ Date _____

Contractors QC Representative *[Signature]* Date *1/5/07*

DAILY QUALITY CONTROL REPORT

DATE: January 08, 2007

DAY	S	M	T	W	T	F	S
					H		

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	28	Lo	53	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	38%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

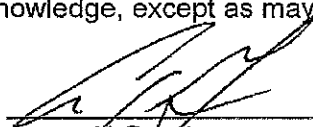
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/08/07 UXOQCS/UXOSO FADL dated 01/08/07, Team FADL's dated 01/08/07, Tailgate Safety Meeting dated 01/08/07, JSA dated 01/05/07 (2 pages), Follow-up for surface removal dated 01/08/07.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/08/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/08/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
John Hower	
Jim Mathisen	
John Costello	
JEFF STEINWARD	
James Drake	
BRUCE TUCKER (NE)	
TRISHA SMITH	
Harley Davidson	
John SPARKS	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 1/8/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office	Supervisor of Work: Tim Mathisen
	Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
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Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>Tom Orsh</i>	<i>Al Grant</i>
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input 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type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
---	---	---

SUPERVISOR/FOREMAN RECOMMENDATION:

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - On site. Two UXO sweep teams continued subsurface MEC removal operations.

0800 - Dan's crew on site to help us remove large tree branches and other materials that may interfered with geophysics activities.

1230 - 1400 - Attended Geophysics preparatory meeting.

Summary: Completed 5 grids and collected 64 pounds of MEC scrap. No MEC encountered.

1700 - Secured from field work.

1700 - 1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 28. Afternoon in the late 50's.	



DAILY LOG	DATE	01	08	07
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Insect protection)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1000: Crew switched to sub-surface clearance operations</p> <p>1600: Back in the fields closing down the site for the week.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 31degrees 53degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/08/07



FIELD ACTIVITY DAILY LOG

TEAM 2

F1				
Daily Log	Date:	1	8	2007
	No.			2
	Sheet	1 of		1


PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Subsurface Removal		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16		
0715 Arrived MRS 16, team assignments made.		
0730 Start subsurface operations. Schonstedts set on 4		
1130 Break for lunch		
1215 End Lunch return to work		
1500 Start break		
1515 End break		
1635 End work on grids		
1645 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 End of day		
<i>Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)</i>		
<i>Grids complete: C3A2I1, C3A2J3, C3A2J2, C3A1G0 Total MEC Scrap recovered 32 LBS</i>		
<i>USACE Seed Item QA13 found in grid C3A2J2</i>		
<i>UXO Located: No items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
WEATHER CONDITIONS: Temps: 33 - 65		IMPORTANT TELEPHONE CALLS:
Morning: COLD, clear		NONE
Afternoon warm, sunny		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: John Tortolano		DATE: 8-Jan-07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	8	2007
	No.			20
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Intrusive Activities		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, decision made to use two dig teams		
Schonstedts checked in test grid, UXO teams gathered PPE, depart for MRS 16		
Arrived MRS 16, team assignments made, Started intrusive activities, Schonstedts set on Level 4		
Intrusive in Grid C3A2D2		
X-ray 1 ea 2.36" Rocket , item is practice		
1430 Completed grid C3A2D2 moved to grid C3A2D3		
1640 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 x-ray machine		
Grids completed: 1 Grid C3A2D2 MEC Scrap located: 32 lbs Holes dug: 737 (Total for grid)		
Grid C3A2D3 MEC Scrap Located: 11 lbs Holes dug: 76		
UXO Located: No items turned over to SHA		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
Shaw personnel clearing B\brush/wood collecting crew		None
WEATHER CONDITIONS: Temps: 37 - 68		IMPORTANT TELEPHONE CALLS:
Morning: Cool		NONE
Afternoon warm, sunny day		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 8-Jan-07

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	Yes

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SUBSURFACE RANGE Clearance
MRS-16
SEE SUXOS FACD FOR PERSONNEL LIST

All work done IAW Contract Documents AND
APPLICABLE WORK PLANS

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCHWENSTROT'S Run on Setters #6

USACE QA Representative _____ Date _____

Contractors QC Representative  Date 01/08/07

DAILY QUALITY CONTROL REPORTDATE: January 09, 2007

DAY	S	M	I	W	T H	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	33	Lo	73	
Still	Moderate	High	NW@3mph	
Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

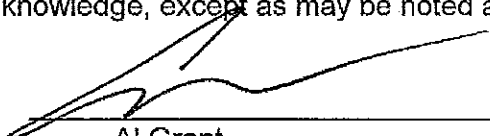
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/09/07 UXOQCS/UXOSO FADL dated 01/09/07, Team FADL's dated 01/09/07, Tailgate Safety Meeting dated 01/09/07, JSA dated 01/05/07 (2 pages), Follow-up for surface removal dated 01/09/07, Management Safety Audit dated 01/09/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/09/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/09/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED

SIGNATURE

Bruce Tinkwell

James Drake

Tim Mathisen

John Sparks

Joshua Jenkins

TARA VAPE

Harley Davidson

JEFF STEINWARD

John Tortolano

Meeting Conducted by: Al Grant

Supervisor:

Manager:

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 01/08/07

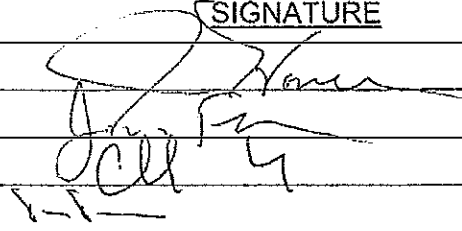
Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED

SIGNATURE

JOHN HONER
Jeremy Humer
CHARLES NUCUM
JACK MOORE





JOB SAFETY ANALYSIS

Date: 1/9/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: AI Grant Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		09.00
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Fire		N/A
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - On site. Two UXO sweep teams continued subsurface MEC removal operations.

0800 - Dan's crew still on site and continuing to help us remove large tree branches and other materials from the range surface.

Summary: Completed 1 full grid and started anything 3 grids. Collected 57 pounds of MEC scrap in the completed full grid. MEC items encountered: Two M49 Trip Flares and ONE 37mm MK1 LE projectile. Flares were removed to a safe holding area and the 37mm projectile was GPS's and left in place for future BIP operations.

1700 - Secured from field work.

1700 - 1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 36. Afternoon in the low 70's.	



Shaw E & I, Inc.

DAILY LOG	DATE	01	09	07
	NO.			
	SHEET 1 OF 1			

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
-------------------------------	--------------------

FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

0600: Prep for tailgate opened building

0630: Tailgate (Topic: Insect protection)

0645: Watched the teams check their instruments at the test pit. All the units checked out.

0700: Teams onsite begin surface sweep operations.

0705: Admin

0900: Walked the line with the crew looked at the areas that have been surface cleared.

1000: Crew switched to sub-surface clearance operations

1600: Back in the fields closing down the site for the week.

1640: Secured MRS-16 for the day.


1700: COB

-----Nothing Follows-----

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A

WEATHER CONDITIONS: cool 33degrees 73degrees PM	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: A. C. Grant  DATE: 01/09/07

Daily Log	Date:	1	9	2007
	No.			21
	Sheet	1 Of		1

Team 1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Intrusive Activities		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered PPE, depart for MRS 16		
Arrived MRS 16, team assignments made, Started intrusive activities, Schonstedts set on Level 4		
Intrusive in Grid C3A2D3		
1130 -1245 Lunch		
1640 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 x-ray machine		
Grids completed: 0 Grid C3A2D3 MEC Scrap located: 31 lbs Holes dug: 413 (Total for grid)		
UXO Located: No items turned over to SHA		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		None
Shaw personnel clearing Brush/wood collecting crew		
Ashley Rice for 2 hours		
WEATHER CONDITIONS: Temps: 37 - 76		IMPORTANT TELEPHONE CALLS:
Morning: Cool		NONE
Afternoon warm, sunny day		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: <i>[Signature]</i>		DATE: 9-Jan-07

Daily Log	Date:	1	9	2007
	No.			3
	Sheet	1 of		1

TEAM 2

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Subsurface Removal		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16		
0715 Arrived MRS 16, team assignments made.		
0730 Start subsurface operations. Schonstedts set on 4		
1130 Break for lunch		
1215 End Lunch return to work		
1500 Start break		
1515 End break		
1635 End work on grids		
1645 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 End of day		
<i>Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)</i>		
<i>Grids complete: C3A1G1 Total MEC Scrap recovered 57 LBS</i>		
<i>1 ea 2.36 rocket Xrayed and was practice</i>		
<i>UXO Located:)ne items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
WEATHER CONDITIONS: Temps: 33 - 73		IMPORTANT TELEPHONE CALLS:
Morning: COLD, clear		
Afternoon warm, sunny		NONE
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: John Tortolano		DATE: 9-Jan-07

L-6

PROJECT SAFETY ASSESSMENT REPORT

Name of Person Doing the Assessment:

Project Name: <u>FORT ORD MRS-16</u>	Project Manager/Director: <u>PETER KASACK</u>
Project #: <u>846075</u>	Supervisor/Superintendent: <u>TIM MATHESEN</u>
Project Location: <u>MRS-16</u>	Health & Safety Officer: <u>AL GARAND</u>
Assessment Date: <u>1/9/06</u> SM	Project H&S Manager: <u>VAL VADEZ</u>

GENERAL PROJECT DESCRIPTION: SUB-SURFACE UXO CLEARANCE

SITE ACTIVITIES AT TIME OF INSPECTION: MEC REMOVAL

GENERAL	YES	NO	COMMENTS
HASP available and reflects current activities?	<input checked="" type="checkbox"/>		
Personnel have signed HASP?	<input checked="" type="checkbox"/>		
Personnel are aware of site contaminants / hazard.	<input checked="" type="checkbox"/>		
Housckeping up to acceptable standards?	<input checked="" type="checkbox"/>		
Daily safety meetings held?	<input checked="" type="checkbox"/>		
Heavy equipment is inspected daily and documented.			N/A
JSA's are developed and reviewed for each task?	<input checked="" type="checkbox"/>		
At least one JSA was personally reviewed.			
PROGRAM ASPECTS	YES	NO	COMMENTS
Project has a safety council that meets on a regular basis?			UNK
If not, does Project Management participate in another safety council?			UNK
Does the site have a Program Safety Auditing System in Place?			UNK
Are regular project site safety inspections being done?	<input checked="" type="checkbox"/>		
Subcontractors were pre-evaluated for safety performance?			UNK
Is there a Site Safety Orientation Program?			UNK
Is there a safety incentive award program in place?			UNK
Vehicles used in accordance w/ HS800 Motor Vehicle Policy?	<input checked="" type="checkbox"/>		

L-6

SAFETY ASSESSMENT OBSERVATION RECORD FORM

INTERVIEWED SUPERVISOR: JACK TITTA/ANE
SAFETY ISSUE: None

CORRECTIVE ACTION: None
ASSIGNED TO: _____ FOLLOW-UP DATE: _____
CORRECTION VERIFIED BY: N/A DATE: 1-9-97

INTERVIEWED EMPLOYEE: TARA VALDE
SAFETY ISSUE: None

CORRECTIVE ACTION: _____
ASSIGNED TO: _____ FOLLOW-UP DATE: _____
CORRECTION VERIFIED BY: N/A DATE: 1-9-97

L-6

Leadership Through Effective Safety Assessments

PROJECT: MRS-16

DATE: 1-9-07

DESCRIBE POSITIVE SAFETY OBSERVATIONS

Empty box for describing positive safety observations.

K. 3.1

Form QC-5

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	YES

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SUBSURFACE RANGE CLEARANCE

MRS-16

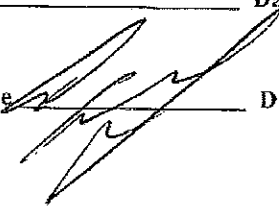
SEE SUXOS FADL

ALL WORK IS BEING DONE TAW CONTRACT DOCUMENT
AND APPLICABLE WORK PLANS

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCHWABTETS WERE TESTED IN THE TEST PIT
AND WERE RUN ON SETTLING "4" DURING OPERATIONS

USACE QA Representative _____ Date _____

Contractors QC Representative  _____ Date 1/9/07

DAILY QUALITY CONTROL REPORT

DATE: January 10, 2007

DAY	S	M	T	W	T	F	S
				H			

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	33	Lo	53	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
 Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

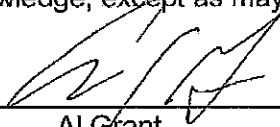
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/10/07 UXOQCS/UXOSO FADL dated 01/10/07, Team FADL's dated 01/10/07, Tailgate Safety Meeting dated 01/10/07, JSA dated 01/10/07 (2 pages), Follow-up for surface removal dated 01/10/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/10/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/10/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

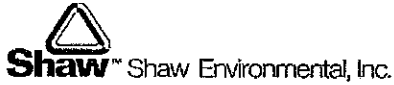
ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	<i>[Signature]</i>
JEFF STEINWAND	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
BREAST TINKNELL	<i>[Signature]</i>
Harley Davidson	<i>[Signature]</i>
Joshua Seekin	<i>[Signature]</i>
TRISHA SMITH	<i>[Signature]</i>
John Fontaleno	<i>[Signature]</i>
CLUCK NYCVM	<i>[Signature]</i>

Meeting Conducted by: Al Grant

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Date: 1/10/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>Tim Mathisen</i>	<i>[Signature]</i>	
<i>Al Grant</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manifest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DATE	1/10/2007
NO.	18
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	3
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	6
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

Note: Jimmy Drake showed up for work late today because he stated he did not get a wake up call. John Honer was also late due to being sick during the morning hours.

0630 - Conducted morning meetings.

0700 - On site. Two UXO sweep teams continued subsurface MEC removal operations. Moved all to ONE team following assignment of UXO techs to support BLM and Dan's range debris removal crew.

0800 - Dan's crew still on site and continuing to help us remove large tree branches and other materials from the range surface.

1030 to 1230 - Provided one UXO Tech to escort BLM personnel working in the MRA.

1130 to 1230 - I attended the monthly safety council meeting.

Summary: Completed 3 grids and collected 62 pounds of MEC scrap. No MEC encountered.

1700 - Secured all field activities.

1730 - 1830 - Performed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 31. Afternoon in the mid 50's.	



DAILY LOG	DATE	01	10	07
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: cold weather)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1000: Crew switched to sub-surface clearance operations</p> <p>1600: Back in the fields closing down the site for the week.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center; border-top: 1px dashed black;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 33degrees 55degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/10/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	10	2007
	No.			4
	Sheet	1	of	1

TEAM 2

PROJECT NAME: FORT ORD, CA MRS -16	Project Number: 846075
------------------------------------	------------------------

FIELD ACTIVITY SUBJECT: Subsurface Removal

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA,

Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16

0715 Arrived MRS 16, team assignments made.

0730 Start subsurface operations. Schonstedts set on 4

1130 Break for lunch

1215 End Lunch return to work

1500 Start break

1515 End break

1635 End work on grids

1645 Connex and gates locked, returned to office, secured and cleaned equipment

1700 End of day

Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)

Grids complete: C3A1F0, C3A1E0 Total MEC Scrap recovered 18 LBS

UXO Located: no items turned over to SHA

Problems encountered: None

VISITORS ON SITE: USACE OE Safety Clint Huckins	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Temps: 33 - 55 Morning: COLD, clear Afternoon cool, sunny	IMPORTANT TELEPHONE CALLS: <p style="text-align:center">NONE</p>
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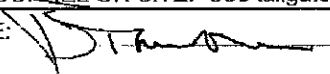
SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: John Tortolano	DATE: 10-Jan-07
---------------------------	-----------------

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	10	2007
	No.			22
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Intrusive Activities		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, Started intrusive activities, Schonstedts set on Level 4		
Intrusive in Grid C3A2D3		
1030 Completed Grid C3A2D3. TM 1 and 2 combined due to other work assignments		
1130 -1245 Lunch		
1640 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 Work completed for today		
<i>Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 x-ray machine, 1 backhoe tractor</i>		
<i>Grids completed: 1 Grid completed C3A2D3 MEC Scrap located: 46 lbs Holes dug: 584 (Total for grid)</i>		
<i>UXO Located: No items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
USACE OE Safety Clint Huckins		SPECIAL ORDERS AND IMPORTANT DECISIONS:
Shaw personnel clearing Brush/wood collecting crew		None
Ashley Rice for 2 hours		
WEATHER CONDITIONS: Temps: 37 - 55		IMPORTANT TELEPHONE CALLS:
Morning: Cool		NONE
Afternoon partly cloudy, cold day		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 10-Jan-07

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	<i>Yes</i>

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SUB-SURFACE UXO CLEARANCE

MRS-16

SEE SUXOS FACI FOR PERSONNEL LIST

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCHWENSTEDT'S ARE TESTED INDIVIDUALLY IN THE TEST PIT

SCHWENSTEDT'S ARE BEING RUN ON SETTING #4

USACE QA Representative _____ Date _____

Contractors QC Representative *[Signature]* Date *1/10/07*

DAILY QUALITY CONTROL REPORT

DATE: January 12, 2007

DAY	S	M	T	W	T H	F	S

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	HI	37	Lo	55	
WIND	Silll	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

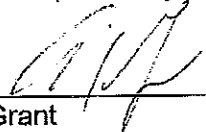
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/12/07 UXOQCS/UXOSO FADL dated 01/12/07, Team FADL's dated 01/12/07, Tailgate Safety Meeting dated 01/12/07, JSA dated 01/10/07 (2 pages), Follow-up for surface removal dated 01/12/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/12/07
Date



JOB SAFETY ANALYSIS

Date: 1/12/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures: James Chalk [Signature] [Signature] [Signature] [Signature]	[Signature] [Signature] [Signature] [Signature]	

JOB SAFETY ANALYSIS

Date: 1/12/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 01/12/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: MRS-16 Former Fort Ord, Ca.
 Type of Work: UXO Sub-Surface Sweep,
 Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask
 Chemical Hazards: Poison OAK, Paint, Dust, UXO
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch
 Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Harley Davidson	
TARA VOLPE	
JAMES DRAKE	
JOHN SPARKS	
Joshua Jenkins	
Jeremy Plummer	
JOHN HOWEL	
TRISH SMITH	
CHUCK MILLUM	

Meeting Conducted by: Al Grant

Supervisor:

Manager:

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	2
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - On site. UXO sweep team continued subsurface MEC removal operations. Two UXO Techs digging up and inspecting a pile of M1 Land Mines previously located during the surface sweep.
0830 - Note: John Honer took off this morning in order to see a doctor about a problem with his jaw and left cheek.
1500 - Fire Department on MRS-16 to conduct a fire assessment evaluation in preparation for our UXO disposal operation.

Summary: Sixteen suspect M1 Land Mine fuzes were discovered while digging up a pile of M1 land Mines located earlier during the surface sweep operation. Also, 84 pounds of Mine scrap was removed from this pile. No grids were completed today due to encountering a large amount of subsurface MEC scrap. Three 2.36 inch rockets were x-rayed and determined to be inert.

1700 - Secured.
1800 - 1830 - Completed week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Same as yesterday. Morning temp. 31. Afternoon in the mid 50's.	

SIGNATURE: Tim Mathisen



DAILY LOG	DATE	01	12	07
	NO.			
	SHEET	1	OF	1

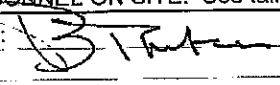
UXO Safety/QC FIELD ACTIVITY DAILY LOG

PROJECT NAME MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate opened building 0630: Tailgate (Topic: cold weather work) 0645: Watched the teams check their instruments at the test pit. All the units checked out. 0700: Teams onsite begin surface sweep operations. 0705: Admin 0900: Walked the line with the crew looked at the areas that have been surface cleared. 1000: Crew switched to sub-surface clearance operations 1600: Back in the fields closing down the site for the week. 1640: Secured MRS-16 for the day. 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 37degrees 55degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/12/07

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	12	2007
	No.			24
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Intrusive Activities		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, Started intrusive activities, Schonstedts set on Level 4		
Providing support, with Jeff Stienward; for subsurface removal of UXO items located during surface sweep		
1130 -1245 Lunch		
All UXO items removed from ground that were located on a map provided by Trish Smith. Placed in trench for demo shot on Wed.		
1640 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 x-ray machine		
Grids completed: 0 MEC Scrap located: 86bs Holes dug: (Total for grid)		
UXO Located: No items turned over to SHA		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
EM 61 TM		None
WEATHER CONDITIONS: Temps: 37 - 55		IMPORTANT TELEPHONE CALLS:
Morning: Cold		NONE
Afternoon partly cloudy, cold day		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 12-Jan-07

FIELD ACTIVITY DAILY LOG

TEAM 2

F1

Daily Log	Date:	1	12	2007
	No.			5
	Sheet	1 Of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Subsurface Removal		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16		
0715 Arrived MRS 16, team assignments made.		
0730 Start subsurface operations. Schonstedts set on 4		
1130 Break for lunch		
1215 End Lunch return to work		
1500 Start break		
1515 End break		
1635 End work on grids		
1645 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 End of day		
<i>Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)</i>		
<i>Grids complete: None Total MEC Scrap recovered 0 LBS</i>		
<i>3 ea 2.36 rocket Xrayed and were practice</i>		
<i>UXO Located: No items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
USACE OE Safety Clint Huckins		SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS: Temps: 27 - 45		IMPORTANT TELEPHONE CALLS:
Morning: COLD, clear		NONE
Afternoon Cool, sunny		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: John Tortolano		DATE: 12-Jan-07

DAILY QUALITY CONTROL REPORT

DATE: January 16 2007

DAY	S	M	T	W	T H	F	S
-----	---	---	----------	---	--------	---	---

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	24	Lo	50	
WIND	Still	<u>Moderate</u>	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep and sub-surface sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/16/07 UXOQCS/UXOSO FADL dated 01/16/07, Team FADL's dated 01/16/07, Tailgate Safety Meeting dated 01/16/07, JSA dated 01/10/07 (2 pages), Follow-up for surface removal dated 01/16/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



AI Grant
SHAW-UXOQC Specialist

01/16/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/16/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep, Metal Cutting, Equipment Operation

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
<i>John S. [unclear]</i>	<i>[Signature]</i>
John SPARKS	<i>[Signature]</i>
JOHN HONER	<i>[Signature]</i>
Harley Davidson	<i>[Signature]</i>
JEFF STEINWARD	<i>[Signature]</i>
John Testano	<i>[Signature]</i>
Jeremy Fium	<i>[Signature]</i>
CLIVE NYLUM	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>

Meeting Conducted by: Al Grant *[Signature]*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Date: 1/16/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations Metal Cutting Equipment operation		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:	[Handwritten signatures and names: James, 198V, James, SSS, etc.]	[Handwritten signature: Tim Mathisen]

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.
 0700 - On site. UXO sweep team continued subsurface MEC removal operations. Three UXO Techs separating expended small arms ammo mixed in with MEC scrap.

Summary: Three grids were closed out today. Two of these grids will require further action since there are several small heavy contaminated areas within each grid that will need sifting operations to remove small pieces of metal scrap to fully complete the removal action. Collected and removed 739 pounds of MEC scrap. Three M22 ATWESS simulators were located and removed to a safe holding area.

1600 - Held a pre-operation schedule brief in preparation for tomorrow's MEC disposal operation.
 1700 - Secured from all field operations.
 1800 - 1830 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 24. Afternoon in the mid 50's.	



DAILY LOG	DATE	01	16	07
	NO.			
	SHEET	1	OF	1

UXO

Safety/QC FIELD ACTIVITY

DAILY LOG

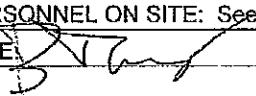
PROJECT NAME: MRS-16 Fort Ord		PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report		
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Spider Bites)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1000: Crew switched to sub-surface clearance operations</p> <p>1600: Back in the fields closing down the site for the week.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p>-----Nothing Follows-----</p>		
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
	N/A	
WEATHER CONDITIONS: cool 24degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:	
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: A. C. Grant		DATE: 01/16/07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	16	2007
	No.			25
	Sheet	1 Of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Intrusive Activities		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, Schonstedts set on Level 4		
Providing support, with Jeff Stienward and John Honer, scrap sorting/certification		
1130 -1245 Lunch		
1540 Connex and gates locked, returned to office, secured and cleaned equipment		
1600 Demo meeting; Shaw office		
1700 Work completed for today		
<i>Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 x-ray machine</i>		
<i>Grids completed: 0 MEC Scrap located: 0 Holes dug: (Total for grid)</i>		
<i>UXO Located: No items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		None
WEATHER CONDITIONS: Temps: 37 - 55		IMPORTANT TELEPHONE CALLS:
Morning: Cold		NONE
Afternoon partly cloudy, cold day		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 16-Jan-07



FIELD ACTIVITY DAILY LOG

TEAM 2

Daily Log	Date:	1	16	2007
	No.			6
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT: Subsurface Removal		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA,		
Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16		
0715 Arrived MRS 16, team assignments made.		
0730 Start subsurface operations. Schonstedts set on 4		
1130 Break for lunch		
1215 End Lunch return to work		
1500 Start break		
1515 End break		
1635 End work on grids		
1645 Connex and gates locked, returned to office, secured and cleaned equipment		
1700 End of day		
<i>Equipment used: 4 rental pickup trucks, 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe(onsite, not used)</i>		
<i>Grids complete: C3A2F1, C3A2F2, C3A2F3 Total MEC Scrap recovered 737 LBS</i>		
<i>UXO Located: 7ea items turned over to SHA</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
WEATHER CONDITIONS: Temps: 23 - 55		IMPORTANT TELEPHONE CALLS:
Morning: COLD, clear		NONE
Afternoon cool, sunny		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: John Tortolano		DATE: 16-Jan-07

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

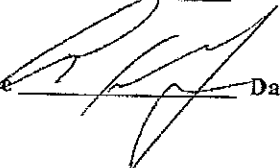
SUBSURFACE UXO CLEARANCE
MRS-14
SEE SUXOS FADL FOR PERSONNEL LIST

ALL WORK HAS BEEN DONE TAW CONTRACT DOCUMENTS
AND APPLICABLE UXO WORK PLANS

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

SCHONSTEDT'S WERE CHECKED AT THE TEST PIT

USACE QA Representative _____ Date _____

Contractors QC Representative  Date 1/10/06

DAILY QUALITY CONTROL REPORT

DATE: January 17, 2007

DAY	S	M	T	W	T	F	S
				H			

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	28	Lo	50	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

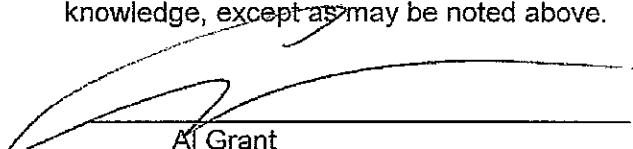
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/17/07 UXOQCS/UXOSO FADL dated 01/17/07, Tailgate Safety Meeting dated 01/17/07, JSA dated 01/17/07 (2 pages), Explosives usage form dated 1/17/07, explosives demolition operations dated 1/17/07, Demo tracking form dated 01/17/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/17/07

Date



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/17/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep, and Demolition of UXO with donor explosives.

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline, explosives

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO, explosives

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire, Accidental detonation,

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Road guards need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
JOHN HOWER	<i>[Signature]</i>
Jim MATHESEN	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
JAMES BRAKE	<i>[Signature]</i>
Harley Duvichan	<i>[Signature]</i>
TARA VAPE	<i>[Signature]</i>
Joshua Jackson	<i>[Signature]</i>
ESLIE SMITH	<i>[Signature]</i>
Kirk Kusser	<i>[Signature]</i>

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 01/17/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED

SIGNATURE

Jerry Flan

Mike Lightner

Sally Lamb

John Tortolupo

Eric Littlefield

Lewis Hanks

CHARLES MYCUM

JEFF STEINWARD

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JOB SAFETY ANALYSIS

Date: 1/17/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Metal Cutting		
Equipment operation		
Potential Hazards		
Lifting		Supervisor's Comments
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name, Signatures:		

JOB SAFETY ANALYSIS

Date: 1/17/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest near heavy equipment</p> <p><input checked="" type="checkbox"/></p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input checked="" type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input checked="" type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DATE	1/17/2007
NO.	22
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Prepared equipment and materials to conduct MEC disposal operations.

0800 - 0900 - Received explosives from USACE OE Safety and transported to MRS-16.

0900 - Commenced MEC disposal operations.

1145 - MEC disposal operations complete.

Note: Explosive materials used - See attached Explosive Usage Form.

Note: MEC disposed of: See attached MRS-16 DEMO Tracking Log dated 1-17-07.

1230 - Three UXO Techs assisting Geo's with the placement of seed items in support of the Geo QC plan. One UXO Sweep Team continuing with subsurface removal action in the bowl area.

Summary: Completed one grids and collected 48 pounds of MEC scrap. No MEC encountered.

1700 - Secured.

1730 to 1800 - Completed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 28. Afternoon in the mid 50's.	



DAILY LOG	DATE	01	17	07
	NO.			
	SHEET	1	OF	1

UXO QC/SAFETY FIELD DAILY LOG

PROJECT NAME: MRS-16 Fort Ord		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Demo Ops)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Demolition Operations</p> <p>1130: Demo Operations completed.</p> <p>1600: Back in the field closing down the site for the week.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>			
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
		N/A	
WEATHER CONDITIONS: cool 28degrees 50degrees PM		IMPORTANT TELEPHONE CALLS:	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: A. C. Grant		DATE: 01/17/07	

K.22

Form M-11

EXPLOSIVES USAGE RECORD

Team Number: 2 Date: 1-17-07

Team Leader: _____ Project: MRS-16

EXPLOSIVES ISSUED			
Signature of Team Leader: _____			
Item	Quantity	Lot Number	Checker's Initials
Pacifiers 10gram	35	H302	JM
Data sheet	20 FT	0-4-1-15	JM
EZ Dets Novel	7	BBCGAL	JM
Lead line	2500 FT	23 FE04W1	JM
Det Cord 50grain	50 FT	101-D1	JM

EXPLOSIVES EXPENDED			
Signature of Team Leader: _____			
Item	Quantity	Lot Number	Checker's Initials
Pacifier 10gram	35	H302	JM
Data sheet	20 FT	0-4-1-15	JM
EZ Dets Novel	7	BBCGAL	JM
Lead line	2500 FT	23 FE04W1	JM
Det Cord 50grain	30	101-D1	JM

EXPLOSIVES RETURNED			
Signature of SUXOS: _____			
Item	Quantity	Lot Number	Checker's Initials
<i>[Signature]</i>			

[Signature]
UXO Supervisor

1-17-07
Date

K.22

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 3

SIZE AND WEIGHT: < 15 lbs NEW

TIME OF SHOT: 0800-1600

LOCATION: MRS-16

DATE: 1-17-07

HOW MANY SHOTS: _____

SIZE AND WEIGHT: _____

TIME OF SHOT: _____

LOCATION: _____

DATE: _____

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:

LOCATION FOR FIRE TRUCK: MAIN gate to MRS-16

CALLED:

TIME

FIRE DEPARTMENT:	242-7701	0652
FEDERAL POLICE:	242-7851	0653
CSU POLICE: (Non-Emergency)	655-0268	0654
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188	0654
BRAC	242-7909	0655
SAFETY OFFICE	242-6509	0658
BLM	394-8314 FORT ORD	0659
	FAX / 394-8346	
U.S. ARMY CORPS OF ENGINEERS	884-9925 / FAX 884-9030	0700
PUBLIC AFFAIRS OFFICE	242-6430 / FAX 242-5464	0702
PARK RANGER HEADQUARTERS	758-3604	0703
LAGUNA SECA RACEWAY	648-5117	0704
MONTEREY COMMUNICATIONS (non-emergency)	373-1259 <i>D. scanmaster wrong number</i>	
CSU PRESS RELATIONS	582-3653	0707
UNIFIED AIR POLLUTION CONTROL OF MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210	0708
EMERGENCY OPERATIONS CENTER ATTN: RICH SAVKO	242-5784 / FAX 242-7028	0710
SHAW ENVIRONMENTAL, INC.	883-0103 / FAX 883-0152	

No answer

K 21

UXO ID	DESCRIPTION	LOCATION	DEMO DESCRP	DEMO DATE	FINAL COND	FINAL DISP
UXO-1-012	Flare, surface, trip, M49 series	Safe Holding Area	Awaiting CONSHOT	1-17-07	Live	
UXO-1-048	Flare, surface, trip, M49 series	Safe Holding Area	Awaiting CONSHOT			
UXO-1-056	Flare, surface, trip, M49 series	Safe Holding Area	Awaiting CONSHOT			
UXO-1-074	Flare, surface, trip, M49 series	Safe Holding Area	Awaiting CONSHOT			
UXO-1-091	Flare, surface, trip, M49 series	Safe Holding Area	Awaiting CONSHOT			
UXO-1-016	Fuze, grenade, hand	Safe Holding Area	Awaiting CONSHOT			
UXO-1-082	Fuze, mine, antitank, practice, M1A1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-083	Fuze, mine, antitank, practice, M1A1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-084	Fuze, mine, antitank, practice, M1A1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-019	Grenade, hand, practice, MK II	Safe Holding Area	Awaiting CONSHOT			
UXO-1-030	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-031	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-044	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-055	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-078	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-079	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-080	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-081	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-068	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-058	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-057	Mine, antitank, practice, M1	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-021	Mine, antitank, practice, M1 Pile (16)	Moved to trench 4 demo	Awaiting CONSHOT			
UXO-1-017	Projectile, 37mm, low explosive, MK I	Safe Holding Area	Awaiting Perf			
UXO-1-090	Projectile, 37mm, low explosive, MK I	Left in Place	Awaiting BIP			
UXO-0-001	Projectile, 60mm, mortar HE, M49	Safe Holding Area	Awaiting Perf			
UXO-1-051	Rocket, 2.36inch, high explosive antitank, M6	Left in Place	Awaiting BIP			
UXO-1-018	Signal, illumination, ground, M125	Safe Holding Area	Awaiting CONSHOT			
UXO-1-022	Signal, illumination, ground, M125	Left in Place	Awaiting CONSHOT			
UXO-1-065	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-093	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-094	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-095	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-096	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-097	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-103	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-104	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			
UXO-1-105	Simulator, launching, antitank guided missile and rocket, M22	Safe Holding Area	Awaiting CONSHOT			

DAILY QUALITY CONTROL REPORT

DATE: January 18, 2007

DAY	S	M	T	W	T H	F	S
-----	---	---	---	---	----------------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	26	Lo	50	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

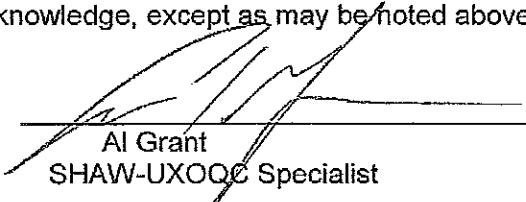
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/18/07 UXOQCS/UXOSO FADL dated 01/18/07, Tailgate Safety Meeting dated 01/18/07, JSA dated 01/18/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/18/07
Date



JOB SAFETY ANALYSIS

Date: 1/18/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: AI Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Insects		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>[Handwritten Signatures]</i>	<i>[Handwritten Signature]</i>

JOB SAFETY ANALYSIS

Date: 1/18/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
JOAN HOWER	
Jim MATHISEN	
John SPARKS	
Joshua Senkins	
TARA VOLPE	
Harley Davidson	
Termy Fleming	
Mike Lightner	
Sally Lamb	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____

DATE	1/18/2007
NO.	23
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - Continued with subsurface clearance and supporting the Geo Group with the placement of seed items.
1300 - Turned in paperwork to the BRAC for approval to conduct a MEC disposal operation on Jan 25. Also notified the fire department to obtain at site risk assessment.
1500 - All of our Geo seed items have been placed.

Summary: Completed two grids, collected 51 pounds of MEC scrap, and left in place one 2.36 inch rocket for further investigation when approval is received for using the x-ray unit.

1700 - Field operations secured.
1730 to 1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 26. Afternoon in the mid 50's.	



DAILY LOG	DATE	01	18	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: endangered species)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1000: Crew switched to sub-surface clearance operations</p> <p>1600: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center; border-top: 1px dashed black;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 26degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/18/07

DAILY QUALITY CONTROL REPORT

DATE: January 19, 2007

DAY	S	M	T	W	T H	F	S
-----	---	---	---	---	--------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	31	Lo	50	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

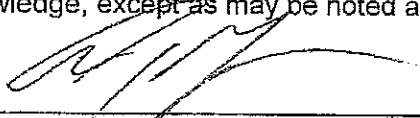
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/19/07 UXOQCS/UXOSO FADL dated 01/19/07, Tailgate Safety Meeting dated 01/19/07, JSA dated 01/19/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



A. Grant
SHAW-UXOQC Specialist

01/19/07
Date

DATE	1/19/2007
NO.	24
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	0
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

Note: John Honer demobilized today. John Tortolano took the day off.

0630 - Conducted morning meetings.

0700 - Continued with subsurface clearance.

Summary: Completed one grid, collected 113 pounds of MEC scrap.

1700 - Done for the day.

1730 to 1800 - Completed weekend ending reports and daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 31. Afternoon in the high 50's.	



DAILY LOG	DATE	01	19	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: safe UXO handling procedures)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1000: Crew switched to sub-surface clearance operations</p> <p>1600: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 26degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/19/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/19/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Clearance

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Tim MATHISEN BASKETTINCK II	<i>Tim Mathisen</i>
TARA VOLPE	<i>Tara Volpe</i>
JULIE SPARNS Sue Sparns	<i>Julie Sparns</i>
JAMES DRAKE	<i>James Drake</i>
JEFF STEINWALD	<i>Jeff Steinfeld</i>
Hank Davidson of HOLMES	<i>Hank Davidson</i>
	<i>Day Wal</i>

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 1/19/2007

Job#: 846075

Permit#:

Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: AJ Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		Supervisor's Initials
Fire		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>[Signature]</i>	Larry Craker	
<i>[Signature]</i>	John [unclear]	
<i>[Signature]</i>	Tom [unclear]	
<i>[Signature]</i>	Ray [unclear]	
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 1/19/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: January 22, 2007

DAY	S	<u>M</u>	T	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	<u>28</u>	Lo	<u>50</u>	
WIND	Still	<u>Moderate</u>	High	<u>NW@3mph</u>	
HUMIDITY	Dry	<u>Mod erate</u>	High	<u>30%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/22/07 UXOQCS/UXOSO FADL dated 01/22/07, Tailgate Safety Meeting dated 01/22/07, JSA dated 01/22/07 (2 pages),

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant

SHAW-UXOQC Specialist

01/22/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Continued with subsurface clearance.

Note: Shirley, out Biologist, had a small vehicle accident while entering MRS-16. Al Grant and Val Valdez are handling.

0900 - 1430 - Provided one UXO escort to BLM.

1045 - Fire Department on site to conduct a risk assessment in preparation for Thursday's MEC disposal operations.

Summary: No grids were completed today due to encountering a high amount of metal contamination. MEC scrap will be weighed upon completion of an entire grid. Left in place one suspect live M9 Rifle Grenade and one suspect live 2.36 inch rocket. Both items will be investigated further.

1700 - Done for the day.

1730 - 1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 28. Afternoon in the high 50's.	



DAILY LOG	DATE	01	22	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Traffic Accidents)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0810: Shirley Tudor had a small fender bender at MRS-16</p> <p>0900: Spent the rest of the morning working on the accident report</p> <p>1400: Went to the field and visited the team.</p> <p>1600: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 26degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/22/07



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 1/22/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: A. Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>Tim Mathisen</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>James Drake</i>	<i>[Signature]</i>	
<i>Shirley L...</i>		

JOB SAFETY ANALYSIS

Date: 1/22/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>Reflective vest near heavy equipment _____</p> <p><input checked="" type="checkbox"/> _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p><input checked="" type="checkbox"/> Fire extinguisher</p> <p>Fire Blanket _____</p> <p><input checked="" type="checkbox"/> Fire Watch</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/22/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Sasha Jenkins</u>	
<u>John Isidoro</u>	
<u>Harley Davidson</u>	
<u>JAMES DRAKE</u>	
<u>Tim Mathis</u>	
<u>TARA VOOR</u>	
<u>Mike Lightner</u>	
<u>JEFF STEINWAND</u>	
<u>Shirley Tudor</u>	

Meeting Conducted by: Al Grant

Supervisor:

Manager:

DAILY QUALITY CONTROL REPORT

DATE: January 23, 2007

DAY	S	M	<u>T</u>	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	32	Lo	65	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday. Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

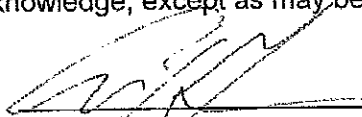
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/23/07 UXOQCS/UXOSO FADL dated 01/23/07, Tailgate Safety Meeting dated 01/23/07, JSA dated 01/23/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/23/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	8
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	5
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Continued with subsurface clearance.

0930 - 1130 - Jimmy Drake departed the area to attend a doctor appointment.

1030 - 1530 - Provided one UXO escort to BLM.

1130 - Tara Volpe took the rest of the day off to attend a doctor appointment.

Summary: Completed one grid, collected 365 pounds of MD. No new MEC encountered.

1700 - Secured the field crew.

1730 to 1800 - Performed daily admin duties.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning temp. 24. Afternoon in the high 50's.	IMPORTANT TELEPHONE CALLS:



DAILY LOG	DATE	01	23	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Incident Reporting)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>1400: Accident review board</p> <p>1500: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 26degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/23/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

LI

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/23/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
James Drake	
John Tortolone	
Harley Davidson	
Sally Lamb	
John Sparks	
Joshua Selins	
Mike Lightner	
TARA VOURE	

Meeting Conducted by: Al Grant

Supervisor:

Manager:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 1/23/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: January 24, 2007

DAY	S	M	T	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	28	Lo	60	
WIND	Still	<u>Moderate</u>	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)
N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).
All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).
NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:
NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).
SEE UXOQC/UXOSO FADL (attached)

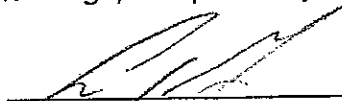
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/24/07 UXOQCS/UXOSO FADL dated 01/24/07, Tailgate Safety Meeting dated 01/24/07, JSA dated 01/24/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/24/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Continued with subsurface clearance.

0900 - 1500 - Provided UXO escort to BLM.

1700 - Secured field operations.

Summary: Complete one grids and collected 33 pounds of MEC scrap. No MEC encountered.

1730 - 1800 - Completed daily's.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning temp. 28. Afternoon in the mid 60's.	IMPORTANT TELEPHONE CALLS:



DAILY LOG	DATE	01	24	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Incident Reporting)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>1000: Tara Volpe is complaining of some wrist pain due to working with the magnetometers and the hand diggers. We will give her a wrist brace and watch what happens.</p> <p>1400: Checked with Ms. Volpe, she is still in pain, but is doing alright</p> <p>1500: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 26degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/24/07



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/24/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	<i>Tim Mathisen</i>
JAMES DRAKE	<i>James Drake</i>
John Sparks	<i>John Sparks</i>
JOHN SPARKS	<i>John Sparks</i>
Joshua Selous	<i>Joshua Selous</i>
TARA VOLPE	<i>Tara Volpe</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
Harley Davidson Project DIRECTOR	<i>Harley Davidson</i>

Meeting Conducted by: Al Grant

Tim Mathisen
Supervisor:

Kevin Seamans

Manager:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 12/21/2006

Job#: 846075

Permit#:

Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Driving		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Driving		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Drive safely		
Eye contact with equipment operator		
Crew Name Signatures:	[Handwritten Signatures]	
[Handwritten Signature]	[Handwritten Signature]	
[Handwritten Signature]	[Handwritten Signature]	
[Handwritten Signature]	[Handwritten Signature]	
[Handwritten Signature]	[Handwritten Signature]	
[Handwritten Signature]	[Handwritten Signature]	

JOB SAFETY ANALYSIS

Date: 1/24/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: January 25, 2007

DAY	S	M	T	W	<u>T</u> <u>H</u>	F	S
-----	---	---	---	---	------------------------------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	<u>28</u>	Lo	<u>60</u>	
WIND	Still	<u>Moderate</u>	High	<u>NW@3mph</u>	
HUMIDITY	Dry	<u>Mod</u> <u>erate</u>	High	<u>30%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

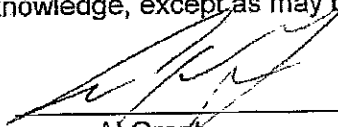
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/25/07 UXOQCS/UXOSO FADL dated 01/25/07, Tailgate Safety Meeting dated 01/25/07, JSA dated 01/25/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/25/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh Jenkins	UXO Tech I	10

Today's Activities:

Note: Tara Volpe called in sick this morning.
0630 - Conducted morning meetings.
0700 - Prepared MEC items for disposal.
0800 - Received from USACE Safety Rep all explosive materials to be used in today's MEC disposal operation.
0900 - 1000 - Performed MEC disposal. All went well.
1000 - 1500 - Provided one UXO escort to BLM.

Summary: No grids completed today. Still working the last grid in the subsurface clearance area. Poundage of MEC scrap will be reported upon completing the entire grid. No MEC encountered.

1700 - Secured
1730 1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 35. Afternoon in the ow 50's.	



DAILY LOG	DATE	01	25	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Incident Reporting)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface Demo Operations.</p> <p>1100: Demo Operations completed for the day.</p> <p>1130: Admin</p> <p>1500: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 35degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/25/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/25/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Demolitions, UXO sub-Surface Sweep.

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline, explosives

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, UXO demolition

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Work as a team, stay alert, and maintain positive control of explosives and detonators.

ATTENDEES

NAME PRINTED

SIGNATURE

James Drake	
Rene D. TRACKER	
John Tortolano	
Harley Davidson	
John Sparks	
JEFF STEINWAND	
Sasha Jenkins	
Mike Lightner	
Kristi Busse	
Meeting Conducted by: <u>Al Grant</u>	

Supervisor:

Manager



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 1/25/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen						
	Safe Haven: Shaw main office	JSA Prepared by: Al Grant Are other crews in area? yes						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>New:</td> <td style="text-align: center;">X</td> <td></td> </tr> <tr> <td>Revised:</td> <td></td> <td></td> </tr> </table>	New:	X		Revised:		
	New:		X					
Revised:								
Assembly Point: Main gate MRS-16								
Job Task (What are You Doing)		Audit the Job Audit Time:						
OE Sweep Operations								
UXO Demolition								
Driving								
Potential Hazards								
Lifting		Supervisor's Comments						
Slip, Trip, and Falls								
Cuts and abrasions								
Poison oak								
UXO								
Dust								
pre mature detonation								
Fire								
Recommended Action or Procedure		Supervisor's Initials						
Observe walking areas								
Proper lifting technique, weight limit of 60 lbs								
Wear work gloves								
Mod "D" PPE								
Stay with UXO Personnel, Do not pick up any objects								
Use of Dust Mask								
Water intake, stay hydrated								
Stay alert work as a team								
Eye contact with equipment operator								
Crew Name Signatures:								

JOB SAFETY ANALYSIS

Date: 1/25/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Form M-11

EXPLOSIVES USAGE RECORD

Team Number: _____ Date: 25 Jan 07

Team Leader: JAMES DRAKE Project: 846075-MRS-16

EXPLOSIVES ISSUED			
Signature of Team Leader: <u>James Drake</u>			
Item	Quantity	Lot Number	Checker's Initials
DEMO CHARGE DATA Sheet M-186	6'	D-4-1-15	JED
EZ Dets BLASTING CAPS	8	BBC6AL	JED
Perforators 10 gm	3	302	JED
Nonel / Lead line	1 Roll / 2500'	23 FE04W1	JED
EXPLOSIVES EXPENDED			
Signature of Team Leader: <u>James Drake</u>			
Item	Quantity	Lot Number	Checker's Initials
Demo Charge DATA Sheet M-186	6'	D-4-1-15	JED
EZ Dets BLASTING CAPS	8	BBC6AL	JED
Perforators 10 gm	3	302	JED
Nonel / Lead Line	1 Roll / 2500'	23 FE04W1	JED
EXPLOSIVES RETURNED			
Signature of SUXOS: <u>Tom Mathews</u>			
Item	Quantity	Lot Number	Checker's Initials
None			

Tom Mathews
UXO Supervisor

1-25-07
Date

Form M-2

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 3

SIZE AND WEIGHT: 415 NEW

TIME OF SHOT: 0900 - 1600

LOCATION: MRS-16

DATE: 1-25-07

HOW MANY SHOTS: 2

SIZE AND WEIGHT: 5 LBS

TIME OF SHOT: _____

LOCATION: MRS-16

DATE: 1-25-07

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:

LOCATION FOR FIRE TRUCK: MAIN GATE MRS-16

CALLED:

TIME

FIRE DEPARTMENT:	242-7701	0713
FEDERAL POLICE:	242-7851	0714
CSU POLICE: (Non-Emergency)	655-0268	0714
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188	0715
BRAC	242-7909	0717
SAFETY OFFICE	242-6509	0717
BLM	394-8314 FORT ORD FAX / 394-8346	0718
U.S. ARMY CORPS OF ENGINEERS	884-9925 / FAX 884-9030	0719
PUBLIC AFFAIRS OFFICE	242-6430 / FAX 242-5464	0721
PARK RANGER HEADQUARTERS	758-3604	0722
LAGUNA SECA RACEWAY	648-5117 <i>Disconnected</i>	0723
MONTEREY COMMUNICATIONS (non-emergency)	373-1259 <i>Wrong Number</i>	0724
CSU PRESS RELATIONS	582-3653	0725
UNIFIED AIR POLLUTION CONTROL OF MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210	0725
EMERGENCY OPERATIONS CENTER ATTN: RICH SAVKO	242-5784 / FAX 242-7028	0727
SHAW ENVIRONMENTAL, INC.	883-0103 / FAX 883-0152	✓

DAILY QUALITY CONTROL REPORT

DATE: January 26, 2007

DAY	S	M	T	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	31	Lo	50	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday. Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

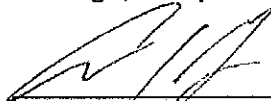
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/26/07 UXOQCS/UXOSO FADL dated 01/26/07, Tailgate Safety Meeting dated 01/26/07, JSA dated 01/26/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



A/Grant
SHAW-UXOQC Specialist

01/26/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - Continued with subsurface MEC removal operations.
1500 - Completed the last grid. Collected 165 pounds of MEC scrap.
1500 to 1700 - Spent the rest of the day certifying MEC scrap free of explosive hazards.
1730 -1800 - Completed week ending reports.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning temp. 31. Afternoon in the low 50's.	IMPORTANT TELEPHONE CALLS:



DAILY LOG	DATE	01	26	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance.</p> <p>1130: Admin</p> <p>1500: Back in the field closing down the site for the day.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 31egrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/2607

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other _____

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
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- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/26/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
TARA VOORPE	
Sasha Jenkins	
JOHN SPARKS	
John Tortolano	
JEFF STEINWARD	
James Drake	
Harley Davidson	
Bruce Trickett	
Tim Mathison	

Meeting Conducted by: Al Grant

Supervisor:

Manager:

DAILY QUALITY CONTROL REPORT

DATE: January 29, 2007

DAY	S	M	T	W	T	F	S
					H		

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER
 TEMP: H/L
 WIND
 HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
HI	43	Lo	50	
SKII	Moderate	High	NW@3mph	
Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/29/07 UXOQCS/UXOSO FADL dated 01/29/07, Tailgate Safety Meeting dated 01/29/07, JSA dated 01/29/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.

Al Grant
SHAW-UXOQC Specialist

01/29/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	SUXOS	10.5
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	9
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Conducted morning meetings.
 0700 Continued certifying MEC scrap free of explosive hazards
 Continued with subsurface MEC removal operations with backhoe and "War-wagon"
 Jimmy Drake left site for an hour to attend to a personal matter
 1300 Attended Site 36A prep meeting
 1700 Work mcompleted for day, site secured.
 1730 -1800 - Completed week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 43. Afternoon in the low 50's.	NONE



DAILY LOG	DATE	01	29	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance.</p> <p>1130: Admin</p> <p>1500: Tara Volpe's wrist condition has not gotten better and she is seeking professional medical attention. We will be initiating the process of getting her the appropriate attention.</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 43degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/29/07



JOB SAFETY ANALYSIS

Date: 1/29/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: AI Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Sifting		
Equipment operation		
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
James Drake		
Blair		
Al		
Tom		
Tom		

JOB SAFETY ANALYSIS

Date: 1/29/2007
 Job#: 846075
 Permit#:
 Issued By: A.grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrall
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 1/19/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep, Equipment Operation

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED

SIGNATURE

James Drake	<i>James Drake</i>
John Tortolano	<i>[Signature]</i>
BRUCE TINKNELL	<i>[Signature]</i>
JEFF STEINWAND	<i>[Signature]</i>
Joshua Selous	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
Harley Davidson	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>

Meeting Conducted by: Al Grant

Supervisor:

Manager:

DAILY QUALITY CONTROL REPORT

DATE: January 30, 2007

DAY	S	M	T	W	T H	F	S
-----	---	---	----------	---	--------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	HI	43	Lo	50	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and Demolition Operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)
- N/A**
-
-
-

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).
- All metal detectors that are used by the Team are tested at the test pit everyday.**
- Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.**
-
-
-

6. Material Received: (Note inspection results and storage provided).
- NONE**
-
-
-

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:
- NONE**
-
-
-

9. Job Safety: (List items checked, results, instructions and corrective actions taken).
- SEE UXOQC/UXOSO FADL (attached)**
-

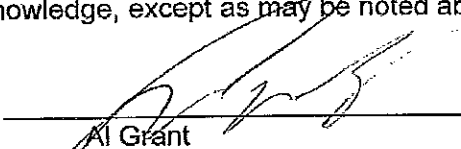
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/30/07 UXOQCS/UXOSO FADL dated 01/30/07, Tailgate Safety Meeting dated 01/30/07, JSA dated 01/30/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/30/07

Date

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	30	2007
	No.	Range 36A-1		
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA RANGE 36A Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA, Schonstedts checked in test grid, UXO team gathered PPE and equipment, depart for MRS 16 Arrived MRS 16, picked up "War-Wagon" screener and a port-a-potty

0800 Arrived at Range 36A, discussed work plan and site safety. Decided to start on Trench 15

0900 Started site characterizations of Trench 15. Process is slow moving. Due to soil composition and organic debris the spoils have to be hand raked down the screener. Soil is damp and sandy, filled with roots and other organic material. The process is to take a small load with the excavator bucket and the dump it on the screen. One UXO tech then rakes the spoils thru the screen. Every 20 ft the trench bottom is checked with a Schonstedt set on "4". If nothing is found in the trench, the equipment is repositioned and another scoop is taken.

1130 - 1215 Lunch

1430 Trench 15 completed and backfilled. No MEC, or MD located in trench. Less than 2 lbs of other scrap (barbed wire). Photos taken. Moving equipment to Trench 14

1445 Started Trench 14

1630 Returned to office, equipment

1700 Work completed for today

Equipment used: 2 rental pickup trucks , 2schonstedts, 1hand held radio, 1 Excavator, and 1 off-road fork lift (used to move the "war-wagon" screen), "War-wagon" screen

Problems encountered: None

VISITORS ON SITE: USACE OE Safety Clint Huckins	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Temps: 38 - 59 Morning: COLD Afternoon Cloudy, cool, No breeze	IMPORTANT TELEPHONE CALLS: <p style="text-align: center;">NONE</p>
--	---

SHAW PERSONNEL ON SITE: Tincknell, Stienwand, Bennett, and Bussey

SIGNATURE: Bruce D. Tincknell DATE: 30-Jan-07



DAILY LOG	DATE	01	30	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance.</p> <p>0800: Took Tara Volpe to the doctor, to get her wrist checked out.</p> <p>1030: The Dr. called me and informed me that Tara was a case of tendonitis and has been prescribed anti-inflammatory medications and light work duty for 2 weeks. He also wants to see her in two weeks.</p> <p>1130: Admin</p> <p>1215: Tara has been assigned to the sampling crew with orders not to lift over 10 lbs as per the doctor's order</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 43degrees 50degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/30/07

FIELD ACTIVITY DAILY LOG

TEAM 2

Daily Log	Date:	1	30	2007
	No.			6
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16 Project Number: 846075

FIELD ACTIVITY SUBJECT: Subsurface Removal

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA,
 Schonstedts checked in test grid, UXO teams gathered PPE and required equipment, depart for MRS 16
 0715 Arrived MRS 16, team assignments made.
 0730 Start subsurface operations. Schonstedts set on 4
 1130 Break for lunch
 1215 End Lunch return to work
 1500 Start break
 1515 End break
 1635 End work on grids
 1645 Connex and gates locked, returned to office, secured and cleaned equipment
 1700 End of day

Equipment used: 4 rental pickup trucks, 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe

Grids complete: C3A2D4 Total MEC Scrap recovered 258 LBS

UXO Located: No items turned over to SHA

Problems encountered: None

VISITORS ON SITE: USACE OE Safety Clint Huckins	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Temps: 39 - 55 Morning: COLD, clear Afternoon cool, sunny	IMPORTANT TELEPHONE CALLS: <p style="text-align: center;">NONE</p>
---	---

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: John Tortolano DATE: 30-Jan-07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 1/30/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16, and Range 36A Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep, Trenching

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, Equipment Operation

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED

SIGNATURE

John Tortolano	[Signature]
James Drake	[Signature]
Joshua Jenkins	[Signature]
John SPARKS	[Signature]
TARA VOLPE	[Signature]
Harley Davidson	[Signature]
Mike Lightner	[Signature]
CHUCK NYCOM	[Signature]

Meeting Conducted by: Al Grant

Supervisor:

Manager:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 1/30/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 and Range 36A Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Tim Mathisen JSA Prepared by: AI Grant Are other crews in area? yes
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations Trenching Equipment operation		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Driving Heavy equipment operations Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Drive Carefully Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures: James Drake [Signature] [Signature] [Signature]	[Signature] [Signature] [Signature]	

JOB SAFETY ANALYSIS

Date: 1/30/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator Training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Handwritten notes and signatures:
 2-1-07
 [Signature]

DAILY QUALITY CONTROL REPORT

DATE: January 31, 2007

DAY	S	M	T	W	T H	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	40	Lo	60	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
Backhoe	1	Y	10
Fork Lift	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and sifting operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 01/31/07 UXOQCS/UXOSO FADL dated 01/31/07, Tailgate Safety Meeting dated 01/31/07, JSA dated 01/31/07 (2 pages),

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

01/31/07
Date



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	1	31	2007
	No.	Range 36A-2		
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA RANGE 36A	Project Number: 846075
--------------------------------------	------------------------

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA, Schonstedts checked in test grid, UXO team gathered PPE and equipment, depart for MRS 16 Arrived MRS 16, picked up "War-Wagon" screener and a port-a-potty

0700 Arrived at Range 36A, discussed work plan and site safety.

Resumed site characterizations of Trench 14. Process is slow moving. Due to soil composition and organic debris the spoils have to be hand raked down the screener. Soil is damp and sandy, filled with roots and other organic material. The process is to take a small load with the excavator bucket and the dump it on the screen. One UXO tech then rakes the spoils thru the screen. Every 20 ft the trench bottom is checked with a Schonstedt set on "4". If nothing is found in the trench, the equipment is repositioned and another scoop is taken.

Trench 14 dug but not backfilled, will be backfilled upon completion of Trench 11. Same issue with the soil, raking needed on screen. **NO MEC OR MD LOCATED WITHIN TRENCH 14.** Val Valdez on site, GPS'ing Trench 14 as built. Trench was moved due to an oak tree area marked of by Shaw biologist. Moved to Trench 13

1130 - 1215 Lunch

1430 Trench 13 completed and not backfilled. **No MEC, or MD located in Trench 13.** Less than 2 lbs of other scrap (barbed wire). Photos taken. Moving equipment to Trench 11

1440 Started Trench 11. Soil is damp sandy clay causing small clumps up on screen. Stel needs to be raked. Spoils are checked with Schonstedt due to clumping.

1630 Returned to office, equipment secured

1700 Work completed for today

Equipment used: 2 rental pickup trucks, 2schonstedts, 1hand held radio, 1 Excavator, and 1 off-road fork lift (used to move the "war-wagon" screen), "War-wagon" screen

Problems encountered: None

VISITORS ON SITE: USACE OE Safety Clint Huckins	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
--	--

WEATHER CONDITIONS: Temps: 47 - 64 Morning: Cloudy, overcast	IMPORTANT TELEPHONE CALLS: NONE
---	------------------------------------

Afternoon Partly sunny

SHAW PERSONNEL ON SITE: Tincknell, Stienwand, Bennett, and Bussey

SIGNATURE:	DATE: 31-Jan-07
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DAILY LOG	DATE	01	31	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance, and sifting operation at Range 36A</p> <p>1030: Checked on the Teams</p> <p>1215: Delivered some water to the teams and checked on their.</p> <p>1300: Got a call from the SUXOS. Sent Tara Volpe in for a urinalysis</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 40degrees 60degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 01/31/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/31/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16, and Range 36A Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep, Equipment Operation, Trenching

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment operation

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED

SIGNATURE

NAME PRINTED	SIGNATURE
John Tortolano	
James Drake	
Hurley Davidson	
JOHN SPARKS	
TRIA VOUGE	
JEFF STEINWARD	
Mike Lighter	
CLIVE MCCLUM	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 1/31/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 and Range 36 A Former Fort Ord		
Required PPE: Level D MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Tim Mathisen JSA Prepared by: AI Grant Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Trenching		
Equipment operation		
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input checked="" type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input checked="" type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: February 01, 2007

DAY	S	M	T	W	<u>T</u>	F	S
					<u>H</u>		

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>40</u>	Lo	<u>60</u>	
Still	<u>Moderate</u>	High	<u>NW@3mph</u>	
Dry	<u>Mod</u> <u>erate</u>	High	<u>30%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

 sub-surface UXO sweep, and sifting operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/01/07 UXOQCS/UXOSO FADL dated 02/01/07, Tailgate Safety Meeting dated 02/01/07, JSA dated 02/01/07 (2 pages),

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



A. Grant
SHAW-UXOQC Specialist

02/01/07

Date



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

TEAM 2

F1

Daily Log	Date:	2	1	2007
	No.			6
	Sheet	1 of 1		

PROJECT NAME: FORT ORD, CA MRS -16	Project Number: 846075
------------------------------------	------------------------

FIELD ACTIVITY SUBJECT: Subsurface Removal

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

Working highly contaminated target area

Team attended radiation protection training

Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument. 2 ea Connex containers. 1 John Deere Backhoe

Grids complete: None Total MEC Scrap recovered this will be reported at completion

UXO Located: No items turned over to SHA

Problems encountered: None

VISITORS ON SITE:

USACE OE Safety Clint Huckins

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Temps: 39 - 55

Morning: COLD, clear

Afternoon cool, sunny

IMPORTANT TELEPHONE CALLS:

NONE

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: John Tortolano

DATE:

1-Feb-07



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	2	1	2007
	No.	Range 36A-3		
	Sheet	1 of 1		

PROJECT NAME: FORT ORD, CA RANGE 36A Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Arrive Shaw office, completed Tailgate and JSA, Schonstedts checked in test grid, UXO team gathered PPE and equipment, depart for Range 36A

0700 Arrived at Range 36A, discussed work plan and site safety.

Resumed site characterizations of Trench 11. Process is slow moving. Due to soil composition and organic debris the spoils have to be hand raked down the screener. Soil is damp and sandy, filled with roots and other organic material. The process is to take a small load with the excavator bucket and the dump it on the screen. One UXO tech then rakes the spoils thru the screen. Every 20 ft the trench bottom is checked with a Schonstedt set on "4". If nothing is found in the trench, the equipment is repositioned and another scoop is taken.

0900 Trench 11 completed. **No MEC OR MD located in trench 11**

0915 Departed Range 36A for Shaw Field Office. Mandatory X-ray training

1130 - 1215 Lunch

1230 Started backfilling of trenches 11,13, and 14

1430 Started Trench 12. Soil is damp sandy clay causing small clumps up on screen. Still needs to be raked. Spoils are checked with Schonstedt due to clumping.

1630 Returned to office, equipment secured

1700 Work completed for today

Equipment used: 2 rental pickup trucks , 2schonstedts, 1hand held radio, 1 Excavator, and 1 off-road fork lift (used to move the "war-wagon" screen), "War-wagon" screen

Problems encountered: None

VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Temps: 42 - 59 Morning: Cloudy, overcast Afternoon Partly sunny	IMPORTANT TELEPHONE CALLS: NONE
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SHAW PERSONNEL ON SITE: Tincknell, Stienwand, Bennett, and Bussey

SIGNATURE: Bruce. D. Tincknell DATE: 1-Feb-07



DAILY LOG	DATE	02	01	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance, and sifting operation at Range 36A</p> <p>0930: Teams in for Radiation Training</p> <p>1130: ARA for Tara Volpe</p> <p>1300: Checked on the Teams and conducted an initial inspection on the MRS-16 Sampling</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 40degrees 60degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 02/01/07



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/01/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 and Range 36A Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep, Equipment Operation, Sifting

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Jim Mathisen	<i>Jim Mathisen</i>
James Drake	<i>James Drake</i>
Bruce Truelove	<i>Bruce Truelove</i>
Cluck Mylum	<i>Cluck Mylum</i>
Mike Lightner	<i>Mike Lightner</i>
JEFF STEINWARD	<i>Jeff Steinward</i>
John Sparks	<i>John Sparks</i>
TARA VOLPE	<i>Tara Volpe</i>
Hurley Davidson	<i>Hurley Davidson</i>

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 2/1/2007
 Job#: 846075
 Permit#: _____
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 and Range 36A Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: A. Grant Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Driving		
Equipment operation		
Potential Hazards		
Lifting		Supervisor's Comments
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Driving		
Heavy equipment operations		
Fire		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Drive Safely		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 2/1/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: February 02, 2007

DAY	S	M	T	W	T	F	S
					H		

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	39	Lo	55	
WIND	SPD	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and sifting operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

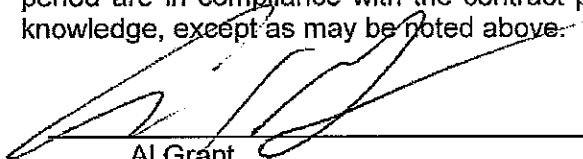
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/02/07 UXOQCS/UXOSO FADL dated 02/02/07, Tailgate Safety Meeting dated 02/02/07, JSA dated 02/02/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above:



Al Grant
SHAW-UXOQC Specialist

02/02/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC Investigation) at Range 36A.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	SUXOS	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh Jenkins	UXO tech I	10

Today's Activities:

Note: Tara Volpe off today because there is no work available that she can perform.

0630 - Conducted morning meetings.

0700 - One UXO team continuing with excavation of several heavy contaminated areas identified during subsurface sweeps.

Note: No activity at Range 36A due to not having equipment operators available to run the heavy equipment.

1700 - Done for the day.

Note: No excavation areas were totally completed today. No MEC identified. Poundage of MEC scrap will be reported upon completed of each heavy contaminated area, by grid.

1730 to 1800 - Performed week ending reports and daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 31. Afternoon in the low 50's.	NONE



DAILY LOG	DATE	02	02	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Team onsite begin Sub-Surface clearance. Identified a trench that needs to be permitted.</p> <p>0930: Took some delineators out to the team to secure the trench at night.</p> <p>1300: Checked on the Teams and conducted an initial inspection on the MRS-16 Sampling</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 39 degrees 60degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 02/02/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 2/2/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep, Equipment Operation

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, acetylene cutting, Fire

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
Harley Davidson	
John Jenkins	
John SPARKS	
John Tantalava	
Iron MATILSON	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 2/2/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		Supervisor's Comments
Driving		
Equipment operation		
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Drive safely		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Drive safely		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 2/2/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: AI Grant Are other crews in area? yes
	Wind Direction: Evacuation Route: Follow route maps	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/>
		Revised: <input type="checkbox"/>

Don't Forget to Fill in Page 2

DAILY QUALITY CONTROL REPORT

DATE: February 05, 2007

DAY	S	M	T	W	T H	F	S
-----	---	----------	---	---	--------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	48	Lo	64	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and sifting operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/05/07 UXOQCS/UXOSO FADL dated 02/05/07, Tailgate Safety Meeting dated 02/05/07, JSA dated 02/05/07 (2 pages), trench permit for MRS-16

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

02/05/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	SUXOS	10
Jack Tortolano	Team Leader	0
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - One UXO team continuing with excavation of several heavy contaminated areas identified during subsurface sweeps at MRS-16. Another UXO team is performing trenching operations at Range 36A.

Summary: No MEC discovered at work locations. Range 36A has only produced several small arms rounds and the dig site at MRS-16 has continued to provide 2.36 rockets parts.

1700 - Secured field operations.
1730 1800 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 43. Afternoon in the mid 60's.	NONE



DAILY LOG	DATE	02	05	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate opened building 0630: Tailgate 0645: Watched the teams check their instruments at the test pit. All the units checked out. 0700: Teams onsite begin Sub-Surface clearance and in the case of Range 36A trenching 0930: Took some delineators out to the team to secure the trench at night. 1300: Checked on the Teams and conducted an initial inspection on the MRS-16 Sampling 1640: Secured MRS-16 for the day. 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 48 degrees 64 degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 02/05/07

FIELD ACTIVITY DAILY LOG

F1			
Daily Log	Date:	2	5 2007
	No.	Range 36A-4	
	Sheet	1	Of 1

PROJECT NAME: FORT ORD, CA RANGE 36A		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, Schonstedts checked in test grid, UXO team gathered PPE and equipment, depart for Range 36A		
0700 Arrived at Range 36A, discussed work plan and site safety.		
Resumed site characterizations of Trench 12. Process is still slow moving. Due to soil composition and organic debris the spoils have to be hand raked down the screener. Soil is damp and sandy, filled with roots and other organic material. The process is to take a small load with the excavator bucket and the dump it on the screen. One UXO tech then rakes the spoils thru the screen. Every 20 ft the trench bottom is checked with a Schonstedt set on "4". If nothing is found in the trench, the equipment is repositioned and another scoop is taken.		
0900 Trench 12 completed. No MEC OR MD located in trench 12		
0930 Trench Ten Started		
1130 - 1215 Lunch		
1230 Backfilling of trench 10 No MEC or MD located in trench 10		
1400 Started Trench 9. Soil is damp sandy clay causing small clumps up on screen. Still needs to be raked. Spoils are checked with Schonstedt due to clumping.		
1630 Returned to office, equipment secured		
1700 Work completed for today		
<i>Equipment used: 2 rental pickup trucks , 2schonstedts, 2 hand held radio, 1 Excavator, and 1 off-road fork lift (used to move the "war-wagon" screen), "War-wagon" screen</i>		
Problems encountered: None		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
NONE		
WEATHER CONDITIONS: Temps: 48 -64		IMPORTANT TELEPHONE CALLS:
Morning: Cloudy, overcast		
Afternoon Partly sunny		
SHAW PERSONNEL ON SITE: Tincknell, Stienwand, Bennett, and Bussey		
SIGNATURE:		DATE: 5-Feb-07
Bruce. D. Tincknell		



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 and Range 36A Former Fort Ord, Ca.

Type of Work: UXO Sub- Surface Sweep and Trenching

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Tom Mathisen	
JAMES DRAKE	
Harvey Davidson	
TARA VOLPE	
Joshua Jenkins	
JEFF STEINWAND	
Bruce Tinknell	
John Sprack	
Mike Lightner	

Meeting Conducted by: Al Grant

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 2/5/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 and Range 36A Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		1000
Driving		
Equipment operation		
Potential Hazards		Supervisor's Comments
Lifting		AC
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		AC
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>Tim Mathisen</i>	<i>Al Grant</i>	
<i>James Drake</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 2/5/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Procedure No.
 Revision No.
 Date of Revision
 Last Review Date
 Page

HS307
 0
 04/25/02
 04/25/02
 11 of 16

ATTACHMENT 2
 EXCAVATION INSPECTION

THIS INSPECTION IS TO BE COMPLETED BY THE COMPETENT PERSON EACH DAY THAT EMPLOYEES WILL BE ENTERING AN EXCAVATION.

Project Name: FORT ORD MRS-16 Project No.: 846075
 Date: 2/5/07 Time: 1000 Competent Person: A. GRANT
 Soil Classification (see Soil Classification Worksheet): C
 Excavation Depth: 4.5' TO 5' Excavation Width: 10' AND GROWING
 Type of Protective System Used: BENCHING

		☑		
		YES	NO	N/A
1 GENERAL:				
Surface encumbrances removed or supported		✓		
Employees protected from loose rock or soil that could pose a hazard by falling or rolling into the		✓		
Hard hats, steel-toed boots, and safety glasses worn by all employees.		✓		
Spoils, materials, and equipment set back at least 2 feet from the edge of the excavation.		✓		
Walkways over excavations 6 feet or more above lower levels are equipped with standard guardrails.				✓
Warning vest or other highly visible clothing provided and worn by all employees exposed to public		✓		
Employees required to stand away from vehicles being loaded or unloaded.				✓
Warning system established and utilized when mobile equipment is operating near excavation edge.				✓
Employees prohibited from going under suspended loads.		✓		
2 UTILITIES:				
Utility companies contacted and/or utility locations delineated.		✓		
Underground installations protected, supported, or removed while excavation is open.				✓
3. MEANS OF ACCESS AND EGRESS:				
Lateral travel to means of egress no greater than 25 feet in trench excavations 4 feet or more in depth.		✓		
Ladders used in excavations secured and extended 3 feet above the edge of the trench.				✓
Structural ramps used by employees designed by a competent person.		✓		
Structural ramps used for equipment designed by a registered professional engineer.				✓
4. WET CONDITIONS:				
Precautions taken to protect from the accumulation of water.				✓



Procedure No.
 Revision No.
 Date of Revision
 Last Review Date
 Page

HS307
 0
 04/25/02
 04/25/02
 12 of 16

Water removal equipment monitored by a competent person.				✓
Surface water or runoff diverted or controlled to prevent accumulation in the excavation.				✓
Inspections made after every rainstorm or other hazard-increasing occurrence.				✓
5. HAZARDOUS ATMOSPHERE:				
Atmosphere within the excavation tested where there is a reasonable possibility of an oxygen deficient, combustible, or otherwise hazardous atmosphere.				✓
Adequate precautions taken to protect employee from exposure to a hazardous atmosphere.				✓
Testing conducted to ensure that the atmosphere remains safe.				✓
Emergency equipment, such as breathing apparatus, safety harness and line, and basket stretcher readily available where hazardous atmosphere does exist.				✓
6. SUPPORT SYSTEMS:				
Materials and/or equipment for support systems selected based on soil analysis, trench depth, and expected loads.				✓
Materials and equipment used for protective systems inspected and in good condition.				✓
Damaged materials and equipment used for protective systems inspected by a Registered Professional Engineer after repairs and before being placed back into service.				✓
Protective systems installed without exposing employees to the hazards of cave-ins, collapses, or from being struck by materials or equipment.				✓
Members of support systems securely fastened to prevent failure.				✓
Support systems provided to insure stability of adjacent structures, buildings, roadways, sidewalks, walls, etc.				✓
Excavations below the level of the base or footings approved by a registered professional engineer.				✓
Removal of support systems progresses from the bottom, and members are released slowly as to note any indication of possible failure.				✓
Excavation of material to a level of greater than 2 feet below the bottom of the support system and only if the system is designed to support the loads calculated for the full depth.				✓
Shield system placed to prevent lateral movement.				✓
Employees are prohibited from remaining in shield system during vertical movement.				✓
7. REMARKS:				



Procedure No.
Revision No.
Date of Revision
Last Review Date
Page

HS307
0
04/25/02
04/25/02
13 of 16

ATTACHMENT 3
SOILS CLASSIFICATION WORKSHEET

The following worksheet outlines the visual and manual tests that the competent person must perform at least once, and each time soil conditions change. At least one visual and one manual test must be performed; however, performing several tests is recommended so that the condition of the excavation is thoroughly examined.

Project Name: FORT ORD MRS-16 Project Number: 840675
Date: 2/5/07 Time: 1000
Where was the sample taken from? SIDE WALL

I. VISUAL TESTS: One or more visual tests are required for each classification and each time conditions change.			
1. Estimate range of particle sizes:	<u>B</u>	a. primarily fine-grained = cohesive material b. primarily coarse-grained = granular material	
2. Observe excavated soil:	<u>B</u>	a. clumps = cohesive material b. breaks up easily = granular material	
3. Observe sides and adjacent surface area of opened excavation:		a. crack like openings = fissured material b. soil spalls off vertical sides = possible fissured material	
4. Previous excavation activities:	<u>AB</u>	a. previously disturbed soil	b. not previously disturbed soil
5. Observe opened side of excavation:	<u>A</u>	a. layered systems c. estimate degree of slope of layers:	b. layers sloped towards excavation
6. Water condition:	<u>N/A</u>	a. evidence of surface water c. depth of water table:	b. water seeping from sides
7. Vibration present:	<u>A</u>	a. area adjacent to excavation	b. area within excavation

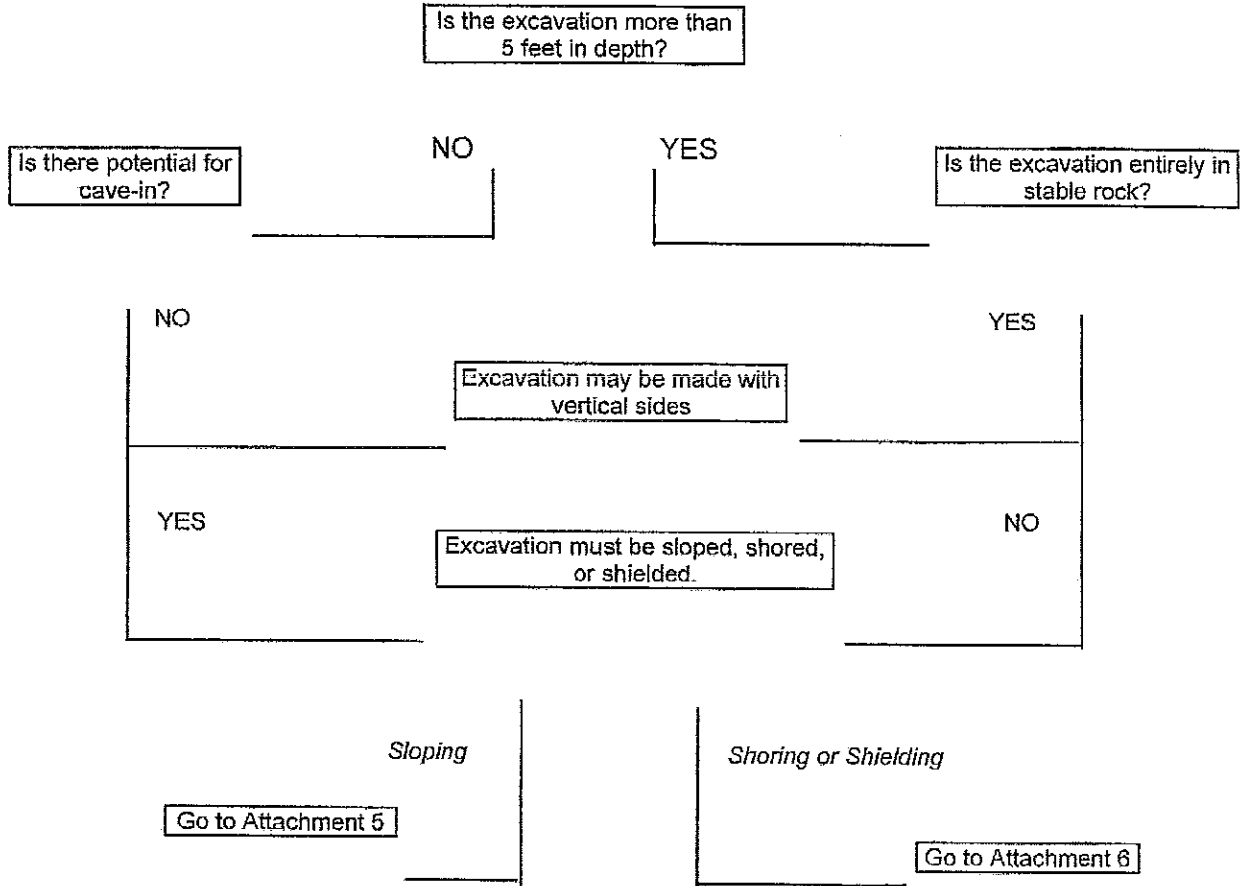
II. MANUAL TESTS- One or more manual tests are required for classification and each time soil conditions change.	
1. Plastically- soil is cohesive if following is true:	a. mold soil samples into a small ball b. roll ball into thread \approx diameter c. pick up 2" length of \approx thread by one end without breaking
2. Dry Soil Strength:	a. crumbles on its own or with moderate pressure = granular b. falls into clumps which break into smaller clumps that are only broken with difficulty = clay with gravel, sand, or silt. c. breaks into clumps which do not break into smaller clumps and can only be broken with difficulty with no visual indication of fissures = unfissured.
3. Thumb penetration test: (These tests are to be run on a large clump of material as soon as it is excavated.)	a. can be easily indented by the thumb but penetrated by thumb only with great effort Type A b. easily penetrated several inches by thumb and molded by light finger pressure = Type C
4. Unconfined Compressive Strength: (Saturated Soil Needed)	a. Pocket Penetrometer reading (take 10 readings and average) 0 - 0.5 = Type C, 0.5 - 1.5 = Type B, 1.5 - 2.0 = Type A b. Shear Vane reading X2: 0 - 0.5 = Type C, 0.5 - 1.5 = Type B, 1.5 - 2.0 = Type A
5. Drying Test: (A dry soil sample 1" thick X 6' diameter is needed)	a. develops cracks = fissured material b. dries without cracks and breaks by hand with considerable force significant cohesive content = unfissured cohesive material. c. sample breaks easily by hand = fissured cohesive or granular material d. easily pulverize dry clumps by hand or by stepping on them = granular e. don't pulverize easily = fissured cohesive.

SOIL CLASSIFICATION: Type A Type B Type C Stable Rock Other
COMPETENT PERSON: Print Name Signature Date 2/05/07

ATTACHMENT 4



SELECTION OF PROTECTIVE SYSTEMS FOR EXCAVATIONS 20 FEET OR LESS IN DEPTH



For excavations greater than 20 feet in depth, design by a registered professional engineer in compliance with 1926.652 (b) and (c) is required.

DAILY QUALITY CONTROL REPORTDATE: February 06, 2007

DAY	S	M	T	W	T H	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	48	Lo	64	
Still	Moderate	High	NW@3mph	
Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and sifting operations

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

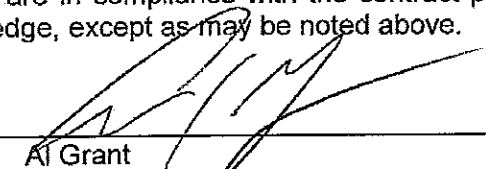
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/06/07 UXOQCS/UXOSO FADL dated 02/06/07, Tailgate Safety Meeting dated 02/06/07, JSA dated 02/06/07 (2 pages), trench permit for MRS-16

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

02/06/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	7
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	SUXOS	10
Jack Tortolano	Team Leader	0
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - Same operation as yesterday. One UXO team continuing with excavation of several heavy contaminated areas at MRS-16. Another UXO team is performing trenching operations at Range 36A.
0800 - 1200 - Provided BLM with an UXO escort, Tara Volpe.
1230 1700 - Provided One UXO tech to support the Geo crew, Tara Volpe.

Summary: Still working grid C3ALF3 in MRS-16. Removed 1630 pounds of MD. No MEC located at Range 36A or MRS-16.

1700 Secured for the day.
1800 - 1830 - Performed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 35. Afternoon in the mid 50's.	NONE



DAILY LOG	DATE	02	06	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance and in the case of Range 36A trenching</p> <p>0930: Took some delineators out to the team to secure the trench at night.</p> <p>1300: Checked on the Teams</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS: cool 48 degrees 64 degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 02/06/07

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	2	6	2007
	No.	Range 36A-5		
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA RANGE 36A		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, Schonstedts checked in test grid, UXO team gathered PPE and equipment, depart for Range 36A		
0700 Arrived at Range 36A, discussed work plan and site safety.		
Resumed site characterizations of Trench 9. Process is still slow moving. Due to soil composition and organic debris the spoils have to be hand raked down the screener. Soil is damp and sandy, filled with roots and other organic material. The process is to take a small load with the excavator bucket and the dump it on the screen. One UXO tech then rakes the spoils thru the screen. Every 20 ft the trench bottom is checked with a Schonstedt set on "4". If nothing is found in the trench, the equipment is repositioned and another scoop is taken.		
0900 Trench 9 completed. No MEC OR MD located in trench 9		
0930 Trench 8 Started		
1130 - 1215 Lunch		
1425 Trench 8 dug. Soil is damp sandy clay causing small clumps up on screen. Still needs to be raked. Spoils are checked with Schonstedt due to clumping. Not backfilled, will complete tomorrow. 2 lbs MD located		
1630 Returned to office, equipment secured		
1700 Work completed for today		
Equipment used: 2 rental pickup trucks , 2schonstedts, 2 hand held radio, 1 Excavator, and 1 off-road fork lift (used to move the "war-wagon" screen), "War-wagon" screen		
Problems encountered: None		
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
NONE	NONE	
WEATHER CONDITIONS: Temps: 48 -64	IMPORTANT TELEPHONE CALLS:	
Morning: Cloudy, overcast, cool	NONE	
Afternoon Partly sunny		
SHAW PERSONNEL ON SITE: Tincknell, Stienwand, Bennett, and Bussey		
SIGNATURE:	DATE: 6-Feb-07	
Bruce. D. Tincknell		



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 02/06/07 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: MRS-16 and Range 36A Former Fort Ord, Ca.
 Type of Work: UXO Sub-Surface Sweep AND TRENCHING
 Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask
 Chemical Hazards: Poison OAK, Paint, Dust, UXO
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe
 Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
JAMES DRAKE	<i>[Signature]</i>
Jeremy Flann	<i>[Signature]</i>
Sasha Sealings	<i>[Signature]</i>
John SPITRAB	<i>[Signature]</i>
Harley Davidson	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
CHUCK MCLUM	<i>[Signature]</i>
JEFF STEINWARTS	<i>[Signature]</i>

Meeting Conducted by: Al Grant *[Signature]*

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 2/6/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 and Range 36A Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Driving		
Equipment operation		
Potential Hazards		
Lifting		Supervisor's Comments
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 2/6/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Procedure No.
Revision No.
Date of Revision
Last Review Date
Page

HS307
0
04/25/02
04/25/02
11 of 16

ATTACHMENT 2
EXCAVATION INSPECTION

THIS INSPECTION IS TO BE COMPLETED BY THE COMPETENT PERSON EACH DAY THAT EMPLOYEES WILL BE ENTERING AN EXCAVATION.

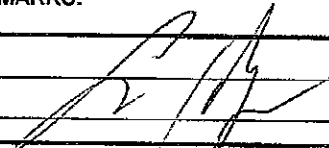
Project Name: FORT ORD MRS-16 Project No.: 846075
 Date: 2/6/07 Time: 1000 Competent Person: A. GRAY
 Soil Classification (see Soil Classification Worksheet): C
 Excavation Depth: 8' AND GROWING Excavation Width: 30' AND GROWING
 Type of Protective System Used: SLOPING AND BENCHING

		☑		
		YES	NO	N/A
1 GENERAL:				
Surface encumbrances removed or supported		✓		
Employees protected from loose rock or soil that could pose a hazard by falling or rolling into the		✓		
Hard hats, steel toe boots , and safety glasses worn by all employees. <u>UXO EMPLOYEES EXEMPT FROM SAFETY GLASSES</u>		✓		
Spoils, materials, and equipment set back at least 2 feet from the edge of the excavation.		✓		
Walkways over excavations 6 feet or more above lower levels are equipped with standard guardrails.		✓		
Warning vest or other highly visible clothing provided and worn by all employees exposed to public		✓		
Employees required to stand away from vehicles being loaded or unloaded.		✓		
Warning system established and utilized when mobile equipment is operating near excavation edge.		✓		
Employees prohibited from going under suspended loads.		✓		
2 UTILITIES:				
Utility companies contacted and/or utility locations delineated.		✓		
Underground installations protected, supported, or removed while excavation is open.		✓		
3. MEANS OF ACCESS AND EGRESS:				
Lateral travel to means of egress no greater than 25 feet in trench excavations 4 feet or more in depth.		✓		
Ladders used in excavations secured and extended 3 feet above the edge of the trench.				✓
Structural ramps used by employees designed by a competent person.		✓		
Structural ramps used for equipment designed by a registered professional engineer.				✓
4. WET CONDITIONS:				
Precautions taken to protect from the accumulation of water.				✓



Procedure No.
 Revision No.
 Date of Revision
 Last Review Date
 Page

HS307
 0
 04/25/02
 04/25/02
 12 of 16

Water removal equipment monitored by a competent person.			✓
Surface water or runoff diverted or controlled to prevent accumulation in the excavation.			✓
Inspections made after every rainstorm or other hazard-increasing occurrence.			✓
5. HAZARDOUS ATMOSPHERE:			
Atmosphere within the excavation tested where there is a reasonable possibility of an oxygen deficient, combustible, or otherwise hazardous atmosphere.			✓
Adequate precautions taken to protect employee from exposure to a hazardous atmosphere.			✓
Testing conducted to ensure that the atmosphere remains safe.			✓
Emergency equipment, such as breathing apparatus, safety harness and line, and basket stretcher readily available where hazardous atmosphere does exist.			✓
6. SUPPORT SYSTEMS:			
Materials and/or equipment for support systems selected based on soil analysis, trench depth, and expected loads.			✓
Materials and equipment used for protective systems inspected and in good condition.			✓
Damaged materials and equipment used for protective systems inspected by a Registered Professional Engineer after repairs and before being placed back into service.			✓
Protective systems installed without exposing employees to the hazards of cave-ins, collapses, or from being struck by materials or equipment.			✓
Members of support systems securely fastened to prevent failure.			✓
Support systems provided to insure stability of adjacent structures, buildings, roadways, sidewalks, walls, etc.			✓
Excavations below the level of the base or footings approved by a registered professional engineer.			✓
Removal of support systems progresses from the bottom, and members are released slowly as to note any indication of possible failure.			✓
Excavation of material to a level of greater than 2 feet below the bottom of the support system and only if the system is designed to support the loads calculated for the full depth.			✓
Shield system placed to prevent lateral movement.			✓
Employees are prohibited from remaining in shield system during vertical movement.			✓
7. REMARKS:			
			

DAILY QUALITY CONTROL REPORTDATE: February 07, 2007

DAY	S	M	T	W	T	F	S
				H			

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	48	Lo	64	
Still	Moderate	High	NW@3mph	
Dry	Mod erate	High	30%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

sub-surface UXO sweep, and sifting operations (MRS -16) Site characterization Range 36A

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

K1

Report No. DO #0016-100304

Page 3 of 3

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).
NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)
SUXOS FADL dated 02/0707 UXOQCS/UXOSO FADL dated 02/0707, Tailgate Safety Meeting dated 02/06/07, JSA dated 02/06/07 (2 pages), trench permit for MRS-16

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/07/07

Date



DAILY LOG	DATE	02	07	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate; Informed by Tara Volpe that she does not/is not wearing her wrist brace as prescribed by doctor for her wrist. I advised her that she should be wearing it at all times.</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance and in the case of Range 36A trenching</p> <p>1000 Grant departed site, I assumed QC/Safety responsibilities</p> <p>1030 Visit to teams in field</p> <p>1300: Checked on the Teams</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
WEATHER CONDITIONS: cool 48 degrees 64 degrees PM	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>[Handwritten Signature]</i>	DATE: 02/07/07

DATE	2/7/2007
NO.	35
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	4
Bruce Tincknell	UXO QC/Safety	10
Jack Tortolano	Team Leader	0
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

Note: Al Grant demobe today at 1000.
 0630 - Conducted morning meetings.
 0700 - Same operation as yesterday. One UXO team on MRS-16 and another on Range 36A. One UXO Tech, Tara Volpe supporting the geophysical group.
 Note: Shortly after the Safety Tailgate Meeting, Tara Volpe told me her wrist felt fine and she would not have any problems during her checkup next week.
 Approx. 1100 - Team ONE working at range 36A reported that they located a suspect M9 Rifle Grenade. Our Safety Officer will contact USACE Safety Rep. In the meantime, the suspect M9 Rifle Grenade will remain in place and x-rayed to determine contents.
 1700 - Done for the day. Completed daily's and secured at 1800.
 Summary: Still conducting trenching operations at Range 36A. Removed another 1456 pounds of MD from the dig site located in grid C3ALF3.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 43. Afternoon in the mid 50's.	NONE

JSA: # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 2/7/07

Job#: 846075

Permit#:

Issued By: B. Tincknell

Range 36A Site Characterization

Location of Job (Unit/Location on Project): Range 36A; Former Fort Ord		
Required PPE: MOD "D" with Hard hat and reflective vest	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Main Gate, MOUNT site Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: Bruce Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: exit road	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy Equipment		
Recommended Action or Procedure		
Lift no more than sixty pounds		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Schonstedt Check		
Use of Dust Mask		
Eye contact with equipment operator, beware of swing radius		
Only one person gives signals to equipment operator		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date:

Job#:

846075

Permit#:

Issued By: B. Tincknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

PERMITS

- Required
- Cold Work
- Hot Work
- Entry Permit
- All Conditions Met
- Signed Off when Complete
- Other

PERSONAL PROTECTIVE EQUIPMENT (PPE)

- Type of Gloves
- Composition of Gloves
- Special Purpose Gloves
- Tyvek Suit
- Acid Suit/Slicker Suit
- Rubber boots
- Mono Goggles (vented-non-vented)
- Face Shield
- Respirator
- Fresh Air
- Ear Protection
- Safety Harness
- Burning Goggles
- Other
- Coveralls

TOOLS

- Current Inspection
- Proper Tools for the Job
- Good Tool Condition
- Qualifications
- Other

EMERGENCY EQUIPMENT

- Fire Extinguishers
- Safety Shower
- Evacuation Route
- Other

ACCESS

- Scaffold (properly inspected)
- Ladder (Tied Off)
- Manliest
- Personnel Basket (Inspected & Approved)
- Operator training
- Other

WELDING

- Flashburns
- Combustibles
- Spark Containment
- Shields
- Grounding
- Water Hose
- Fire extinguisher
- Fire Blanket
- Fire Watch
- Sewer Covers
- Other

OVERHEAD WORK

- Barricades
- Signs
- Hole Cover
- Handrail
- Other

ELECTRICAL

- Locked and Tagged Out
- Try Start/Stop Switch
- GFCI Test
- Assured Grounding
- Extension Cord Inspection
- Other

LIFTING

- Forklift
- Cherry Picker
- Load Chart
- Angle
- Crane
- Chainfall
- Proper Rigging Practices
- Manual Lifting
- Condition of Equipment
- Operator Certificate

HAZARDS (ENVIRONMENTAL)

- Electrical Shock
- Heat Stress
- Heavy Objects
- Hot/Cold Surf or Mat
- Inadequate Lighting
- Line Breaking
- Noise
- Poor Access/Egress
- Sharp Objects
- Other
- UXO

HAZARDS/CHEMICALS

- Chemical Burn Skin/Eyes
- Flammable
- Ingestion
- Inhalation
- Skin Contamination
- Other

HAZARDS/BODY

- Fall potential
- Pinch Points
- Slip-Trip Potential
- Other

OTHER WORK IN AREA

- Others Working Overhead
- Type of Work Others Doing
- PPE Due to Other Work
- Other

Confined Space

Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

JSA # _____

L19



JOB SAFETY ANALYSIS

Date: 2/7/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 and Range 36A Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office	Supervisor of Work: Tim Mathisen
	Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Sweep Operations		Supervisor's Comments
Trenching		
Potential Hazards		Supervisor's Initials
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>[Handwritten Signature]</i>	
<i>[Handwritten Signature]</i>	<i>[Handwritten Signature]</i>	
<i>[Handwritten Signature]</i>	<i>[Handwritten Signature]</i>	
<i>[Handwritten Signature]</i>	<i>[Handwritten Signature]</i>	
<i>[Handwritten Signature]</i>	<i>[Handwritten Signature]</i>	
<i>[Handwritten Signature]</i>	<i>[Handwritten Signature]</i>	

JOB SAFETY ANALYSIS

Date: 2/7/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 2/7/07 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep, Trenching

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment operation, trenches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
TARA VOLPE	
Sasha Jenkins	
JOHN SPARKS	
JEFF STEINWAND	
TIM MATHISEN	
Mike Lightner	
HARLEY DAVIDSON	
JAMES DRAKE	
Termy Flew	

Meeting Conducted by: Al Grant

Supervisor:

Manager:



Procedure No.
 Revision No.
 Date of Revision
 Last Review Date
 Page

HS307
 0
 04/25/02
 04/25/02
 11 of 16

ATTACHMENT 2
 EXCAVATION INSPECTION

THIS INSPECTION IS TO BE COMPLETED BY THE COMPETENT PERSON EACH DAY THAT EMPLOYEES WILL BE ENTERING AN EXCAVATION.

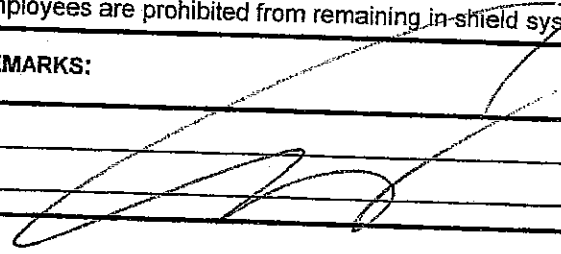
Project Name: Fort Ord MRS-16 Project No.: _____
 Date: 2/7/07 Time: 0825 Competent Person: A. Gammis
 Soil Classification (see Soil Classification Worksheet): _____
 Excavation Depth: 8' Excavation Width: 30'
 Type of Protective System Used: SLOPES

		☑		
		YES	NO	N/A
1 GENERAL:				
	Surface encumbrances removed or supported	✓		
	Employees protected from loose rock or soil that could pose a hazard by falling or rolling into the	✓		
	Hard hats, steel-toed boots, and safety glasses worn by all employees.	✓		
	Spoils, materials, and equipment set back at least 2 feet from the edge of the excavation.	✓		
	Walkways over excavations 6 feet or more above lower levels are equipped with standard guardrails.	✓		
	Warning vest or other highly visible clothing provided and worn by all employees exposed to public	✓		
	Employees required to stand away from vehicles being loaded or unloaded.	✓		
	Warning system established and utilized when mobile equipment is operating near excavation edge.	✓		
	Employees prohibited from going under suspended loads.	✓		
2 UTILITIES:				
	Utility companies contacted and/or utility locations delineated.	✓		
	Underground installations protected, supported, or removed while excavation is open.	✓		
3. MEANS OF ACCESS AND EGRESS:				
	Lateral travel to means of egress no greater than 25 feet in trench excavations 4 feet or more in depth.	✓		
	Ladders used in excavations secured and extended 3 feet above the edge of the trench.			✓
	Structural ramps used by employees designed by a competent person.	✓		
	Structural ramps used for equipment designed by a registered professional engineer.			✓
4. WET CONDITIONS:				
	Precautions taken to protect from the accumulation of water.			



Procedure No.
 Revision No.
 Date of Revision
 Last Review Date
 Page

HS307
 0
 04/25/02
 04/25/02
 12 of 16

Water removal equipment monitored by a competent person.				✓
Surface water or runoff diverted or controlled to prevent accumulation in the excavation.				✓
Inspections made after every rainstorm or other hazard-increasing occurrence.				✓
5. HAZARDOUS ATMOSPHERE:				
Atmosphere within the excavation tested where there is a reasonable possibility of an oxygen deficient, combustible, or otherwise hazardous atmosphere.				✓
Adequate precautions taken to protect employee from exposure to a hazardous atmosphere.				✓
Testing conducted to ensure that the atmosphere remains safe.				✓
Emergency equipment, such as breathing apparatus, safety harness and line, and basket stretcher readily available where hazardous atmosphere does exist.				✓
6. SUPPORT SYSTEMS:				
Materials and/or equipment for support systems selected based on soil analysis, trench depth, and expected loads.				✓
Materials and equipment used for protective systems inspected and in good condition.				✓
Damaged materials and equipment used for protective systems inspected by a Registered Professional Engineer after repairs and before being placed back into service.				✓
Protective systems installed without exposing employees to the hazards of cave-ins, collapses, or from being struck by materials or equipment.				✓
Members of support systems securely fastened to prevent failure.				✓
Support systems provided to insure stability of adjacent structures, buildings, roadways, sidewalks, walls, etc.				✓
Excavations below the level of the base or footings approved by a registered professional engineer.				✓
Removal of support systems progresses from the bottom, and members are released slowly as to note any indication of possible failure.				✓
Excavation of material to a level of greater than 2 feet below the bottom of the support system and only if the system is designed to support the loads calculated for the full depth.				✓
Shield system placed to prevent lateral movement.				✓
Employees are prohibited from remaining in-shield system during vertical movement.				✓
7. REMARKS:				
				

DAILY QUALITY CONTROL REPORT

DATE: February 08, 2007

DAY	S	M	T	W	T H	F	S
-----	---	---	---	---	----------------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-98-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	48	Lo	64	
Still	<u>Moderate</u>	High	NW@3mph	
Dry	<u>Moderate</u>	High	65%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Sub-surface UXO sweep, and sifting operations (MRS -16) Site characterization Range 36A

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

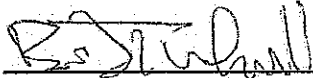
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/08/07 UXOQCS/UXOSO FADL dated 02/08/07, Tailgate Safety Meeting dated 02/08/07, JSA dated 02/08/07 (2 pages), trench permit for MRS-16

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell

SHAW-UXOQC Specialist

02/08/07

Date

DATE	2/8/2007
NO.	36
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	4
Bruce Tincknell	SUXOS	10
Jack Tortolano	Team Leader	0
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - Same operation as yesterday. One UXO team on MRS-16 and another on Range 36A.
On MRS-16 the UXO team ceased excavation operations in grid C3ALF3 due to the depth of the excavation site depth, 9 feet.
We are waiting further directions from upper managements on what we should do next. The MRS-16 UXO Team was moved to grid C3A2F1 and commenced another excavation of a large heavy subsurface contaminated area.

Summary: Collected 1300 pounds of MD from MRS-16 grid C3A2F1. No MEC located at MRS-16 or Range 36A.

1700 - Done for the week.
1730 - 1800 - Completed week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp. 51. Afternoon in the late 50's.	NONE



DAILY LOG	DATE	02	08	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate; discussed Shaw driving policy, work plus driving can not go over 16 hours</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance and Range 36A trenching</p> <p>1030 Visit to teams in field</p> <p>1300: Checked on the Teams</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 02/08/07

JOB SAFETY ANALYSIS

Date: _____
 Job#: 846075
 Permit#: _____
 Issued By: B. Tinncknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- _____ Required
 - _____ Cold Work
 - _____ Hot Work
 - _____ Entry Permit
 - _____ All Conditions Met
 - _____ Signed Off when Complete
 - _____ Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - _____ Composition of Gloves
 - _____ Special Purpose Gloves
 - _____ Tyvek Suit
 - _____ Acid Suit/Slicker Suit
 - _____ Rubber boots
 - _____ Mono Goggles (vented-non-vented)
 - _____ Face Shield
 - _____ Respirator
 - _____ Fresh Air
 - _____ Ear Protection
 - _____ Safety Harness
 - _____ Burning Goggles
 - _____ Other
 - Coveralls

- TOOLS**
- _____ Current Inspection
 - _____ Proper Tools for the Job
 - _____ Good Tool Condition
 - _____ Qualifications
 - _____ Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - _____ Safety Shower
 - Evacuation Route
 - _____ Other

- ACCESS**
- _____ Scaffold (properly inspected)
 - _____ Ladder (Tied Off)
 - _____ Manliest
 - _____ Personnel Basket (Inspected & Approved)
 - _____ Operator training
 - _____ Other

- WELDING**
- _____ Flashburns
 - _____ Combustibles
 - _____ Spark Containment
 - _____ Shields
 - _____ Grounding
 - _____ Water Hose
 - _____ Fire extinguisher
 - _____ Fire Blanket
 - _____ Fire Watch
 - _____ Sewer Covers
 - _____ Other

- OVERHEAD WORK**
- _____ Barricades
 - _____ Signs
 - _____ Hole Cover
 - _____ Handrail
 - _____ Other

- ELECTRICAL**
- _____ Locked and Tagged Out
 - _____ Try Start/Stop Switch
 - _____ GFCI Test
 - _____ Assured Grounding
 - _____ Extension Cord Inspection
 - _____ Other

- LIFTING**
- _____ Forklift
 - _____ Cherry Picker
 - _____ Load Chart
 - _____ Angle
 - _____ Crane
 - _____ Chainfall
 - _____ Proper Rigging Practices
 - Manual Lifting
 - _____ Condition of Equipment
 - _____ Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- _____ Electrical Shock
 - _____ Heat Stress
 - Heavy Objects
 - _____ Hot/Cold Surf or Mat
 - _____ Inadequate Lighting
 - _____ Line Breaking
 - Noise
 - _____ Poor Access/Egress
 - Sharp Objects
 - _____ Other
 - UXO

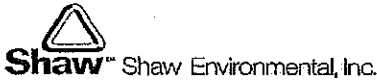
- HAZARDS/CHEMICALS**
- _____ Chemical Burn Skin/Eyes
 - _____ Flammable
 - _____ Ingestion
 - _____ Inhalation
 - _____ Skin Contamination
 - _____ Other

- HAZARDS/BODY**
- Fall potential
 - _____ Pinch Points
 - Slip-Trip Potential
 - _____ Other

- OTHER WORK IN AREA**
- _____ Others Working Overhead
 - _____ Type of Work Others Doing
 - _____ PPE Due to Other Work
 - _____ Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION: _____



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS. Arrive at office Tailgate safety brief Gather equipment test mags in test pit. Depart to base gas station Arrive at site 36A CONT. site characterization on trench #7 completed trench #7 started trench #6 still slow going more frag holes. moving war wagon is slow too. It's wet, Excavator pulled us out 3 times.

Equipment used (1) EXCAVATOR, (2) 4x4 pick-ups, (2) mags set on level 4 (2) radios broke (1) garden rake (1) war wagon No Mec or MD Scrap 8/3s NON mec return to shaw office secure for the day

VISITORS ON SITE: None

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None

WEATHER CONDITIONS: 43 - 50 °F

IMPORTANT TELEPHONE CALLS:

cloudy & spurts of light rain

None

SHAW PERSONNEL ON SITE: Drake Stienward Bennett

SIGNATURE: *James Drake*

DATE: 02/08/07



JOB SAFETY ANALYSIS

Date: 2/8/07
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Range 36A Site Characterization

Location of Job (Unit/Location on Project): Range 36A; Former Fort Ord		
Required PPE: MOD "D" with Hard hat and reflective vest	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Main Gate, MOUNT site Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: Bruce Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: exit road	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy Equipment		
Recommended Action or Procedure		Supervisor's Initials
Lift no more than sixty pounds		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Schonstedt Check		
Use of Dust Mask		
Eye contact with equipment operator, beware of swing radius		
Only one person gives signals to equipment operator		
Crew Name Signatures:		
	James Drake	



JOB SAFETY ANALYSIS

Date: 2/8/2007
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>[Handwritten Signatures]</i>	

JOB SAFETY ANALYSIS

Date: 2/8/2007
 Job#: 846075
 Permit#:
 Issued By: A.Grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/08/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
JEFF STEINWAND	
James Drake	
John Sparks	
Sasha Suley	
Mike Lightner	
CHUCK MYLUM	
Harley Davidson	

Meeting Conducted by: Bruce Tincknell

Supervisor: _____ Manager: _____

DAILY QUALITY CONTROL REPORT

DATE: February 12, 2007

DAY	S	M	T	W	TH	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	48	Lo	64	
WIND	Still	Moderate	High	NW@3mph	
HUMIDITY	Dry	Moderate	High	65%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
2	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site characterization Range 36A, Only worked preformed due to home leaves

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

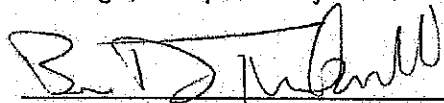
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/12/07 Tailgate Safety Meeting dated 02/12/07, JSA dated 02/12/07 (2 pages).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/12/07
Date

DATE	2/12/2007
NO.	37
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	UXO QC/Safety	0
Jack Tortolano	SUXOS	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	0
John Sparks	UXO Tech I	0
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	0
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - Only one team on Range 36A.

Summary: No MEC located at Range 36A. Note: suspect M-9 rifle grenade from FADL 35 was determined to be M-19/M-22 Rifle grenade smoke expended. No MEC has been found on Range 36A

1700 - Done for the day.
1730 - 1800 - Completed daily reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Morning temp: 45. Afternoon in the High 50's.	IMPORTANT TELEPHONE CALLS: NONE

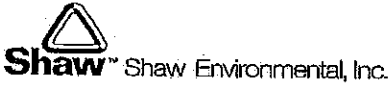
SIGNATURE: John Tortolano

2/12/2007

page 1 of 1

JSA # _____

L19



JOB SAFETY ANALYSIS

Range 36A Site Characterization

Date:
Job#: 846075
Permit#:
Issued By: B Tincknell

Location of Job (Unit/Location on Project): Range 36A; Ft Ord, CA		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MOUNT	
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization, trenching		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: _____
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space.
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Division/Subsidiary: Shaw Environmental, Inc

Facility: Concord, California

Date: 02/12/2007

Time: 06:30

Job Number: 846075

Customer: USACE

Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)


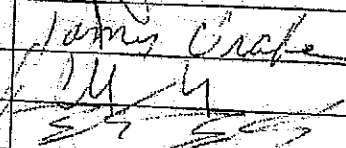
Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

ATTENDEES

NAME PRINTED

SIGNATURE

<u>Mike Lightner</u>	
<u>John Tortolano</u>	
<u>James Drake</u>	<u>James Drake</u>
<u>Carver NYCOM</u>	
<u>Joshua Jenkins</u>	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

48.55°

SHAW PERSONNEL ON SITE: Drake Jenkins Tortolano Bennett
SIGNATURE: James Drake DATE: 02-12-07

DAILY QUALITY CONTROL REPORTDATE: February 13, 2007DAY

S	M	T	W	TH	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	48	Lo	64	
Sill	Moderate	High	NW@3mph	
Dry	Moderate	High	65%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site characterization Range 36A, and MRA 16 Grid C3A2F1 burial pit excavation of 2.36 RKTS

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

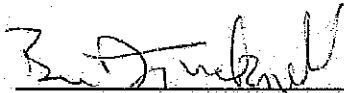
SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).
NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/13/07, Tm Ldr FADLs for MRA 16 and Range 36A, Tailgate Safety Meeting dated 02/13/07, JSA dated 02/13/07 (MRA 16 and Range 36A).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/13/07

Date



DAILY LOG	DATE	02	13	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate; discussed work after long weekend, new parts to "warwagon"</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance MRA-16 and Range 36A trenching</p> <p>0900: Tara Volpe returned from medical appt, doctor returned to full duty, paperwork faxed to Concord and placed in local file.</p> <p>1030 Visit to teams in field</p> <p>1300: Checked on the Teams</p> <p>1640: Secured MRS-16 for the day.</p> <p>1650 Informed by Jack Tortolano that he had hurt his left foot arch area during the day, at this time does not want medical care.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	N/A
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>[Handwritten Signature]</i>	DATE: 02/13/07

DATE	2/13/2007
NO.	38
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC Investigation) at Range 36A.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Same operation as yesterday. One UXO team on MRS-16 and another on Range 36A.

Team working grid C3A2F1 continuing excavation of a large heavy subsurface contaminated area.

Summary: Collected 2005 pounds of MD from MRS-16 grid C3A2F1. No MEC located at MRS-16 or Range 36A.

1700 - Done for the day.

1730 - 1800 - Completed daily ending reports.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

None

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning temp.43. Afternoon in the upper 50's.

NONE

SIGNATURE: John Tortolano

2/13/2007

page 1 of 1

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

36A

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

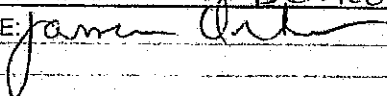
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS, Arrive Shaw office. Tailgate safety brief, JSA. Gather equipment Test mags in test pit. Depart for 36A, Cont'd in trench #6 - completed and started Trench #5 fueled excavator. 8lbs non mec out of trench #6 & 2lbs MD scrap. 3lbs of MD scrap out of #5 & 2lbs of MD scrap out of #4. going to dig trenches 5, 4 & 3 before we back-fill will be faster. MAGS are set on Level 4 when clearing trench.

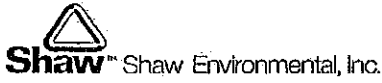
- (2) pick-ups (1) excavator (2) mags (1) war wagon
- (2) radios (1) camera shovels & RAKES

slow going damp soil on war-wagon we are getting some m.d. mortar tail booms & various fuze components some 40mm components & small arms slow & steady looks good to be done by end of week

VISITORS ON SITE: NONE CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: Digging trenches 5, 4 & 3 then back fill

WEATHER CONDITIONS: 48-53°F IMPORTANT TELEPHONE CALLS: none
partly cloudy

SHAW PERSONNEL ON SITE: Drake Steward Bennett
SIGNATURE:  DATE: 02-13-07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

Range 14

PROJECT NAME: FORT ORD, CA Project Number: 846075

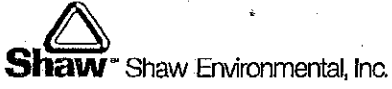
FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS. Morning muster + safety brief followed by Gear loadout + Schonstedt check out @ test grid. Arrived @ grid C3A2F1 + commenced backhoe dig of 2.36" rocket burial pit. End of day + pit was roped off + secured. 2005 lbs of msc taken out. 3.8 MHRS

VISITORS ON SITE: N/A CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Cloudy / cold 55° IMPORTANT TELEPHONE CALLS: N/A

SHAW PERSONNEL ON SITE: Harley Davidson
 SIGNATURE: [Signature] Jack Tortalano DATE: 2/13/07
 Josh Jenkins
 John Sparks



JOB SAFETY ANALYSIS

Range 36A Site Characterization

Date: _____
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): Range 36A; Ft Ord, CA		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MOUNT	Supervisor of Work: Tim Mathisen JSA Prepared by: Bruce Tincknell Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization, trenching		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date:
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

L1

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/13/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

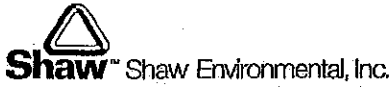
ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	Harley Davidson
JEFF STEINWAND	Jeff Steinwand
John Sparks	John Sparks
James Drake	James Drake
TARA VOLPE	Tara Volpe
Joshua Jenkins	Joshua Jenkins
Mike Lightner	Mike Lightner
Chuck Milum	Chuck Milum

Meeting Conducted by: Brent [Signature]

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Date: 2/13/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations Geophysical Data Collection		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	



JOB SAFETY ANALYSIS

Date: 2/13/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliet
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other: Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
 Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: February 14, 2007USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

DAY S M T **W** TH F S

WEATHER

Sunny	Clear	Over cast	Rain	Fog
Hi	48	Lo	64	
Still	Moderate	High	NW@4mph	
Dry	Mod erate	High	60%	

TEMP: H/L

WIND

HUMIDITY

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Site characterization Range 36A, and MRA 16 Grid C3A2F1 burial pit excavation of 2.36
RKTS; Work at all sites stopped to attend Ft Ord Safety Council meeting 1200 – 1315 hrs

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

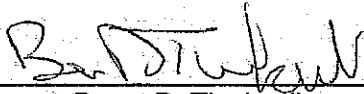
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Received instructions from USACE Huckins to change procedures in burial pit at Range 16. He doesn't want us to use the screening table any longer. Put personnel in the excavation with buckets and hand dig the rockets out of the hole.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/14/07, Tm Ldr FADLs for MRA 16 and Range 36A; Tailgate Safety Meeting dated 02/14/07, JSA dated 02/14/07 (MRA 16 and Range 36A).

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/14/07

Date



DAILY LOG	DATE	02	14	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate opened building 0630: Tailgate; weather; use sunscreen 0645: Watched the teams check their instruments at the test pit. All the units checked out. 0700: Teams onsite begin Sub-Surface clearance MRA-16 and Range 36A trenching 1030 Visit to teams in field 1200 Ft Ord Safety council meeting 1330: Checked on the Teams 1640: Secured MRS-16 for the day. 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: Rudy VonBerg	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: Process for rocket removal in burial pit on Range 16
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 02/14/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal **846075**
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Same operation as yesterday. One UXO team on MRS-16 and another on Range 36A.

1145 -1330 - All site personnel attended safety counsel meeting as requested by Peter Kellsaw.

Team working grid C3A2F1 continuing excavation of a large heavy subsurface contaminated area.

Summary: Collected 1701 pounds of MD from MRS-16 grid C3A2F1. No MEC located at MRS-16 or Range 36A.

1700 - Done for the day.

1730 - 1800 - Completed daily ending reports.

VISITORS ON SITE:

Rudy Vanberg

CHANGES FROM PLANS AND SPECIFICATIONS

None

WEATHER CONDITIONS:

Morning temp.43. Afternoon in the upper 50's.

IMPORTANT TELEPHONE CALLS:

NONE

SIGNATURE: John Tortolano

2/14/2007

page 1 of 1



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS. Arrive shaw office Tailgate safety brief JSA. Gather equipment head out to 36A. Cont digging on trenches 5, 4 & 3. Head back to shaw office for safety meeting 2 hours. Head back to 36A trenches 5, 4, & 3 are dug. started back filling trench #5. Head back to shaw office secure equipment. Secure from work for the day.

- (2) pick-ups (1) excavator (1) work wagon (2) radios
- (2) MABS set on level 4

VISITORS ON SITE: CSO/VAL CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None

WEATHER CONDITIONS: 50-56 Sunny IMPORTANT TELEPHONE CALLS: None

SHAW PERSONNEL ON SITE: SIGNATURE: *Jam Drake* DATE: 2/14/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:	7	14	07
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS, Formed up + had safety brief - continued digging burial pit in C2A3F1 w/ 4 personnel, and backhoe. 3.0 MHRS w/ 4701 lbs of MEC.

VISITORS ON SITE: Rudy Vanburg SHAW safety
 CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: cloudy cool
 IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:
 SIGNATURE: *[Signature]* Harley Davidson
 John Sparks
 Josh Jenkins
 Jack Tortalano
 DATE: 7/14/07



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Range 36A Site Characterization

Date: 2/14/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): Range 36A; Ft Ord, CA		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MOUNT	Supervisor of Work: Jack Tortanlano JSA Prepared by: Bruce Tincknell Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization, trenching		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Diabetes		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Watch intake of VALENTINE'S CANDY		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>James Drake</i>		
<i>[Signature]</i>		
<i>Jeff Stenmark</i>		



JOB SAFETY ANALYSIS

Date: 2/14/2007
Job#: 846075
Permit#:
Issued By: B Tincknell

SUPERVISOR/FOREMAN Jack Trotanlano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Date: 2/14/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord			
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office	Supervisor of Work: Jack Tortanlano JSA Prepared by: Bruce Tincknell Are other crews in area? yes	
	Wind Direction: Evacuation Route: Follow route maps		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/>	
		Revised: <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:	
OE Sub-surface Clearance Operations			
Geophysical Data Collection			
Potential Hazards			
Lifting			
Slip, Trip, and Falls		Supervisor's Comments	
Cuts and abrasions			
Poison oak			
UXO			
Dust			
Heavy equipment operations			
Diabetes			
Driving			
Recommended Action or Procedure			Supervisor's Initials
Observe walking areas			
Proper lifting technique, weight limit of 60 lbs			
Wear work gloves			
Mod "D" PPE			
Stay with UXO Personnel, Do not pick up any objects			
Use of Dust Mask			
Water intake, stay hydrated			
Watch intake of Valentines' Day Candy			
Hard hats and reflective vest when spotting for heavy equipment			
Eye contact with equipment operator			
Crew Name Signatures:	<i>Jack Tortanlano</i>		
<i>Bob Atwood</i>	<i>Chris</i>		
<i>James Chabre</i>	<i>Clay</i>		
<i>John</i>	<i>Trey</i>		
<i>Steve</i>			



JOB SAFETY ANALYSIS

Date: 2/14/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortanlano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
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 - Load Chart
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 - Crane
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 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
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- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
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 - Other

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- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/14/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

HAPPY VALENTINE'S DAY

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
JEFF STEINWAND	
John SPARKS	
James DROKE	
Joshua Jenkins	
Harley Davidson	
Mike Lightner	
CLARK NUCUM	

Meeting Conducted by: B. Tortolano

Supervisor:

Manager:

DAILY QUALITY CONTROL REPORT

DATE: February 15, 2007

DAY	S	M	T	W	TH	F	S
-----	---	---	---	---	-----------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	52	Lo	68	
WIND	Still	Moderate	High	NW@4mph	
HUMIDITY	Dry	Mod erate	High	40%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site characterization Range 36A, and MRA 16 Grid C3A2F1 burial pit excavation of 2.36 RKTS;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

None

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/15/07, Tm Ldr FADLs for MRA 16 and Range 36A; Tailgate Safety Meeting dated 02/15/07, JSA dated 02/15/07 (MRA 16 and Range 36A),

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/15/07

Date



DAILY LOG	DATE	02	15	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, use sunscreen</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance MRA-16 and Range 36A trenching</p> <p>1030 Visit to teams in field</p> <p>1300: Checked on the Teams</p> <p>1640: Secured MRS-16 for the day.</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>			
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
WEATHER CONDITIONS: Sunny and Warm		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>Brian T. [Signature]</i>		DATE: 02/15/07	

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Same operation as yesterday. One UXO team on MRS-16 and another on Range 36A.

Team working grid C3A2F1 continuing excavation of a large heavy subsurface contaminated area.

Summary: Collected 2530 pounds of MD from MRS-16 grid C3A2F1. No MEC located at MRS-16 or Range 36A.

1700 - Done for the day.

1730 - 1800 - Completed daily ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp.41. Afternoon in the upper 60's.	NONE

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS. Arrive Shaw office Tailgate/JSA Gather equipment. Test mags in test pit. depart for 36A. cont intrusive ops trench #4 completed digging in trenches 5/4 & 3. Start back filling, completed back-fill ops on trenches 5/4 & 3. Started intrusive ops on trench #2 no MEC items found. in trenches 5/4 & 3. Completed digging trench #2 no mec. Return to Shaw office secure equipment. Secure from work for the day. MABS are set on level #4 when checking trench for hits.

Eg. used: (2) pick-ups (2) radios (2) mags (1) excavator (1) camera (1) war wagon broke - 1 garden rake

Will finish 2-16-07 all equipment will be returned to Shaw office and excavator is going to track to MRS-16 from 36A no Low-Boy. War Wagon and ~~eye~~ eye/wash are going MRS-16 Port-O-Potty going to Shaw office. Crew is going on R/R where ever that big mouse is!

VISITORS ON SITE: none

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER

SPECIAL ORDERS AND IMPORTANT DECISIONS: none

WEATHER CONDITIONS: sunny 58-70° IMPORTANT TELEPHONE CALLS: none

SHAW PERSONNEL ON SITE: Drake Stienwand Bennett

SIGNATURE: James Drake

DATE: 2-15-07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	7	15	07
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS. Rallied the boys round - safety mtg., JSA. Picked up gear & checked out school carts @ prove out grill. Commenced digging in C3A2F1 rocket burial pit with backhoe & sifting. Pulled out 2530 lbs of mec w/ 38 MARS. Sealed burial pit & backhoe.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

[Signature] Jack Tortolano
 John Sparks
 Josh Jenkins
 Marken Dawson

DATE: 7/15/7



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/15/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

ATTENDEES

NAME PRINTED

SIGNATURE

<u>John Tartalano</u>	<u>[Signature]</u>
<u>JEFF STEINWAND</u>	<u>[Signature]</u>
<u>Sasha Jenkins</u>	<u>[Signature]</u>
<u>John SPARKS</u>	<u>[Signature]</u>
<u>Herby Davidson</u>	<u>[Signature]</u>
<u>TARA VALLI</u>	<u>[Signature]</u>
<u>Mike Lightner</u>	<u>[Signature]</u>
<u>James Drake</u>	<u>[Signature]</u>

Meeting Conducted by: [Signature]

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Date: 2/15/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? yes New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Geophysical Data Collection		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	 	

JOB SAFETY ANALYSIS

Date: 2/15/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
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 - Manual Lifting
 - Condition of Equipment
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- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

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- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
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Know the Following:
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SUPERVISOR/FOREMAN RECOMMENDATION:

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Range 36A Site Characterization

Date: 2/15/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): Range 36A; Ft Ord, CA		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Wind Direction: Evacuation Route: Follow route maps		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MOUNT	New: <input checked="" type="checkbox"/>
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization, trenching		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>Jan Orbach</i>		
<i>K. B. [Signature]</i>		
<i>Alf [Signature]</i>		



JOB SAFETY ANALYSIS

Date: 2/15/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortalano

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- PERMITS**
- Required
 - Cold Work
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 - Reflective vest near heavy equipment

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 - Good Tool Condition
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 - Ladder (Tied Off)
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 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: February 16, 2007DAY

S	M	T	W	TH	<u>E</u>	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>51</u>	Lo	<u>69</u>	
Still	<u>Moderate</u>	High	<u>NW@4mph</u>	
Dry	<u>Mod erate</u>	High	<u>40%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site characterization Range 36A, and MRA 16 Grid C3A2F1 burial pit excavation of 2.36 RKTS;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep and Range 36A site work

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

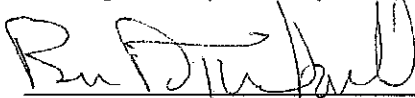
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

None

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/16/07, Tm Ldr FADLs for MRA 16 and Range 36A; Tailgate Safety Meeting dated 02/16/07, JSA dated 02/16/07 (MRA 16 and Range 36A),

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/16/07

Date

DATE	2/16/2007
NO.	41
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16 and Trenching (MEC investigation) at Range 36A.	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.

0700 - Same operation as yesterday. One UXO team on MRS-16 and another on Range 36A.

Team working grid C3A2F1 continuing excavation of a large heavy subsurface contaminated area.

Team working 36A range completed operations today. All equipment except the excavator was removed.

Summary: Collected 1800 pounds of MD from MRS-16 grid C3A2F1. No MEC located at MRS-16 or Range 36A.

1700 - Done for the day.

1730 - 1800 - Completed week ending reports.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

None

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning temp.41. Afternoon in the upper 60's.

NONE

SIGNATURE: John Tortolano	2/16/2007	page 1 of 1
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DAILY LOG	DATE	02	16	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, use sunscreen, 3 day weekend, driving "Be Carefull"</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance MRA-16 and Range 36A trenching</p> <p>1030 Visit to teams in field</p> <p>1300: Checked on the Teams</p> <p>1645: Secured MRS-16 for the day, Trenching at Range 36A completed, equipment returned to office, excavator will be moved to Range 16 on Tuesday</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	None
WEATHER CONDITIONS: Sunny and Warm	IMPORTANT TELEPHONE CALLS:
	None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 02/16/07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	2	16	7
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

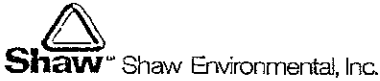
FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS, *MUSTER - safety mtg.*
Continue dig on C3A2F1 Burial Pit w/
backhoe. Pulled out 1800 lbs of msc after 38 MINS.

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: *John Sparks*
 SIGNATURE: *[Signature]* *Harley Davidson* DATE: 2-16-7
Josh Jenkins
Jack Tortalano



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS, Arrive Shaw office Tailgate & JSA
Gather equipment Test mags in test pit depart for 36A
start back-filling trench # ~~5~~2 trench # ~~2~~2 completed
15 lbs MD scrap 20 lbs of non-mec scrap start on
trench # 1 trench # 1 completed 130 lbs of MD scrap
AND 25 lbs non-mec scrap project completed
ALL equipment back to Shaw office war-wagon
port-8-John eye-wash ALL road block returned
DID not have time to track excavator over MRS -16
will do that Tuesday. All MD scrap locked up at
MRS 16 20 lbs small-arms brass placed in barrels of 16

VISITORS ON SITE: none

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
SPECIAL ORDERS AND IMPORTANT DECISIONS: none

WEATHER CONDITIONS: 68-70°F
Sunny

IMPORTANT TELEPHONE CALLS: none

SHAW PERSONNEL ON SITE: Drake Stienwand Benneff

SIGNATURE: *John Drake*

DATE: 16 FEB 07



JOB SAFETY ANALYSIS

Range 36A Site Characterization

Date: 2/16/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): Range 36A; Ft Ord, CA		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MOUNT	Supervisor of Work: Jack Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Site Characterization, trenching		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Fire		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 2/16/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____ Cold Work _____ Hot Work _____ Entry Permit _____ All Conditions Met _____ Signed Off when Complete _____ Other _____</p>	<p>WELDING</p> <p>Flashburns _____ Combustibles _____ Spark Containment _____ Shields _____ Grounding _____ Water Hose _____ Fire extinguisher _____ Fire Blanket _____ Fire Watch _____ Sewer Covers _____ Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____ Heat Stress _____ Heavy Objects <input checked="" type="checkbox"/> Hot/Cold Surf or Mat _____ Inadequate Lighting _____ Line Breaking _____ Noise _____ Poor Access/Egress _____ Sharp Objects _____ Other Cold stress <input checked="" type="checkbox"/> UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/> Composition of Gloves <input checked="" type="checkbox"/> Special Purpose Gloves _____ Tyvek Suit _____ Acid Suit/Slicker Suit _____ Rubber boots _____ Mono Goggles (vented-non-vented) _____ Face Shield _____ Respirator _____ Fresh Air _____ Ear Protection _____ Safety Harness _____ Burning Goggles _____ Other _____ Coveralls <input checked="" type="checkbox"/> Reflective vest near heavy equipment <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____ Signs _____ Hole Cover _____ Handrail _____ Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____ Flammable _____ Ingestion _____ Inhalation _____ Skin Contamination <input checked="" type="checkbox"/> Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____ Proper Tools for the Job _____ Good Tool Condition _____ Qualifications _____ Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____ <input checked="" type="checkbox"/> Try Start/Stop Switch _____ GFCI Test _____ Assured Grounding _____ Extension Cord Inspection _____ Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/> Pinch Points _____ Slip-Trip Potential <input checked="" type="checkbox"/> Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/> Safety Shower _____ Evacuation Route <input checked="" type="checkbox"/> Other _____</p>	<p>LIFTING</p> <p>Forklift _____ Cherry Picker _____ Load Chart _____ Angle _____ Crane _____ Chainfall _____ Proper Rigging Practices _____ Manual Lifting _____ Condition of Equipment _____ Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____ Type of Work Others Doing <input checked="" type="checkbox"/> Doing _____ PPE Due to Other Work _____ Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____ Ladder (Tied Off) _____ Manliest _____ Personnel Basket (Inspected & Approved) _____ Operator training _____ Special Provisions _____ Other _____</p>	<p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there 	

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Date: 2/16/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Geophysical Data Collection		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 2/16/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 02/16/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A
 Type of Work: UXO Sub-Surface Sweep,
 Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask
 Chemical Hazards: Poison OAK, Paint, Dust, UXO
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch
 Other: Holiday weekend, drive and be safe

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
JOHN SPARNS	<i>John Sparns</i>
TARA VOLPE	<i>Tara Volpe</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
James Drake	<i>James Drake</i>
Vol Vance	<i>Vol Vance</i>
Harley Davidson	<i>Harley Davidson</i>
CHUCK MYLON	<i>Chuck Mylon</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORT

DATE: February 20, 2007

DAY	S	M	<u>T</u>	W	TH	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER	Sunny	Clear	<u>Overcast</u>	Rain	Fog
TEMP: H/L	Hi	<u>48</u>	Lo	<u>59</u>	
WIND	Still	<u>Moderate</u>	High	<u>NW@4mph</u>	
HUMIDITY	Dry	<u>Mod erate</u>	High	<u>50</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	20
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

MRA 16 Grid C3A2F1 burial pit excavation of 2.36 RKTS;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #4 for the magnetometer for sub-surface sweep

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

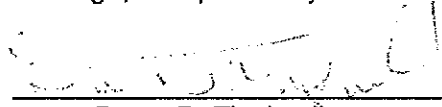
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Munitions Debris storage is becoming an issue due to lack of lockable storage containers and amount of MD recovered.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/20/07, QC/UXOSO FADL dated 2/20/07, Tm Ldr FADL for MRA 16; Tailgate Safety Meeting dated 02/20/07. JSA dated 02/15/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/20/07
Date



DAILY LOG	DATE	02	20	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, proper lifting of full buckets, also traffic tonight, be careful "Fat Tuesday" parties.</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Sub-Surface clearance MRA-16</p> <p>1000 Excavator arrived on site from Range 36A, work crew briefed on swing radius of equipment and "blind spots" of the operator.</p> <p>1030 Visit to teams in field; escort for POM Fire Dept; risk assessment for Friday Demo shot</p> <p>1300: Checked on the Teams</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
	None
WEATHER CONDITIONS: Partly cloudy and Warm	IMPORTANT TELEPHONE CALLS:
	None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 02/20/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal **846075**
Field Activity: Subsurface clearance MRS-16.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Conducted morning meetings.
0700 - All assigned UXO Techs working the excavation site in MRS-16, grid C3A2F1.
0900 - Delivered Detonation Approval/Risk Assessment Form to the BRAC Office in preparation for Friday, February 23 explosive venting operation at MRS-16.
1100 - Fire Department on site to perform a fire hazard assessment prior to our planned explosive operation.
Approx. 1200 - Large Excavator transferred over to MRS-16 from Range 36A. We are now using the excavator instead of the backhoe to perform excavation operations at MRS-16.

Summary: Located and removed 5176 pounds of MD from MRS-16 grid C3A2F1. No MEC encountered.

1700 - Secured from field operations.
1730 1800 - completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Cloudy - Morning temp.44. Afternoon in the late 50's.	NONE

SIGNATURE: Tim Mathisen

2/20/2007

page 1 of 1

FIELD ACTIVITY DAILY LOG

Daily Log	Date	2	20	07
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS, Morning Muster - Safety + team brief, Continue digging @ buried pit in C342FI w/ 6 personnel & backhoe. At midmorning we swapped out backhoe for an #320 Excavator. 6 personnel @ 57 MARS. Picked out 5,176 lbs ~~HAZE~~ ^{VS} MD. Secured from digging @ 1545 due to lack of bin space.

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
Sunny cool

SHAW PERSONNEL ON SITE: DATE: 2-20-07

SIGNATURE: *[Signature]* Jack Tortalano
 Harley Davidson
 Jimmy Drake
 Jeff Steinwand
 John Sparks Josh Jenkins



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/20/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

ATTENDEES

NAME PRINTED	SIGNATURE
Tim MATHISEN	
John SPARKS	
Joshua Jenkins	
Mike Lightner	
CHUCK NYLUM	
Harley Davidson	
JEFF STEINWAND	
James Drake	
Iron Fun TAPA VALPER	
Meeting Conducted by:	

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 2/20/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations Geophysical Data Collection		Supervisor's Comments
Potential Hazards		
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		
<i>Tim Mathisen</i>	<i>Ken [unclear]</i>	
<i>JOHN SPARKS</i>	<i>[unclear]</i>	
<i>[unclear]</i>	<i>[unclear]</i>	
<i>[unclear]</i>	<i>[unclear]</i>	
<i>James Drake</i>	<i>[unclear]</i>	

JOB SAFETY ANALYSIS

Date: 2/20/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: February 22, 2007DAY

S	M	T	W	TH	F	S
---	---	---	---	-----------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	<u>Overcast</u>	<u>Rain</u>	Fog
Hi	<u>46</u>	Lo	<u>56</u>	
Still	<u>Moderate</u>	High	<u>NW@6mph</u>	
Dry	Moderate	<u>High</u>	<u>100</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	1	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Conducted training on EM 61 and the PDA data base

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/22/07, QC/UXOSO FADL dated 2/22/07, Tailgate Safety Meeting dated 02/22/07, JSA dated 02/22/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/22/07
Date

DATE	2/22/2007
NO.	44
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075

Field Activity: Subsurface clearance MRS-16.

Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	7.5
Bruce Tincknell	QC/Safety	8.5
Jack Tortolano	SUXOS	8
Jimmy Drake	Team Leader	3.5
Harley Davidson	Team Leader	3.5
John Sparks	UXO Tech I	3.5
Jeff Steinwand	UXO Tech II	3.5
Tara Volpe	UXO Tech II	3.5
Josh Jenkins	UXO tech I	3.5

Today's Activities:

0800 - Crew at the field office. No field work today due to heavy rains last night and this morning.

0800 - Commenced training on PDA's and the EM-61.

1130 - Training complete. Field crew released for the day.

1300 - Jack, Bruce, and I visited MRS-16 to check on soil conditions in order to come up with a work plan for tomorrow. It was decided to delay the MEC explosive venting operation until next Tuesday due to mudding soil conditions. I notified the Fire Department and BRAC about the delay in explosive operations. We determined that soil conditions were favorable to perform anomaly investigation activities tomorrow, Friday February 23.

1500 - Jack and Bruce secured. Note: Bruce started work at 0630 to prepared for up coming training needs and Jack started at 0700 by helping the geo's prepare equipment for EM-61 training.

1600 - 1630 - Completed routine daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Heavy rains in the morning. Morning temp.46. Afternoon in the late 50's.	None



DAILY LOG	DATE	02	22	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0800 Tailgate; weather, no field work due to inclement weather 0815 Team training on EM 61 Usage and PDA data base 1130 Training completed, work crew release for day 1300 MRA 16 site visit, checking on work conditions for tomorrow, looks good UXO TM will start digging on flagged anomalies tomorrow. 1500 Secured for the day, <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Heavy rain throughout the day	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>[Handwritten Signature]</i>	DATE: 02/22/07



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 2/22/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - LUXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/22/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca., Ft Ord Field Office

Type of Work: Training

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: D

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
TARA VOLPE	<i>[Signature]</i>
John SPARKS	<i>[Signature]</i>
Hurley Davidson	<i>[Signature]</i>
JEFF STEINWAND	<i>[Signature]</i>
Justin Jenkins	<i>[Signature]</i>
James DRAKE	<i>[Signature]</i>
Tim MITCHELL	<i>[Signature]</i>
John [unclear]	<i>[Signature]</i>

Meeting Conducted by: *[Signature]*

Supervisor: _____ Manager: _____

DAILY QUALITY CONTROL REPORT

DATE: February 23, 2007

DAY	S	M	T	W	TH	F	S
-----	---	---	---	---	----	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	<u>Overcast</u>	Rain	Fog
Hi	<u>36</u>	Lo	<u>56</u>	
Still	<u>Moderate</u>	High	<u>NW@5mph</u>	
Dry	<u>Moderate</u>	<u>High</u>	<u>55%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	1	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Started Anomaly investigation clearance

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/23/07, QC/UXOSO FADL dated 2/23/07, Tailgate Safety Meeting dated 02/23/07, JSA dated 02/23/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/23/07

Date

DATE	2/23/2007
NO.	45
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16/Anomaly Investigation.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Crew at the field office. Conducted morning meetings.

0700 - Commenced anomaly investigations.

Summary: Investigated 101 anomalies. Items located and removed to a safe holding area: 5 - 2.36 inch Rockets, 1 - 2.36 inch Rocket fuze, 1 - M1 Mine Fuze, and 1 - 37mm projectile. USACE Safety approved the removal and storage of all items mentioned. All items are scheduled for future explosive venting operations.

1700 - Done for the day.

1730 - 1830 - Performed daily and week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Nice Day, morning temp 36 and afternoon early 50's.	None



DAILY LOG	DATE	02	23	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, wet slippery conditions</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Anomaly investigation clearance MRA-16</p> <p>1015 Visit to teams in field;</p> <p>1400 Checked on the Teams</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
None	None
WEATHER CONDITIONS: Nice Day	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>R. A. [Signature]</i>	DATE: 02/23/07



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 2/23/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations, swing radius of excavator		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>[Handwritten Signatures]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

JOB SAFETY ANALYSIS

Date: 2/23/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/23/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Wet, slippery conditions

ATTENDEES

NAME PRINTED	SIGNATURE
Hurley Davidson	
Toshia Salinas	
JOHN SPARKS	
TARA VAPE	
JAMES DRAKE	
John Ventolano	
JEFF STEINWAND	
TRISHA SMITH	

Meeting Conducted by:

Supervisor:

Manager:

DAILY QUALITY CONTROL REPORTDATE: February 26, 2007

DAY	S	M	T	W	TH	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	43	Lo	54	
Still	Moderate	High	NW@5mph	
Dry	Moderate	High	90%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	1	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly Investigation clearance MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQG/UXOSO FADL (attached)


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Work curtailed due to lack of flagged anomalies and severe weather

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/26/07, QC/UXOSO FADL dated 2/26/07, Tailgate Safety Meeting dated 02/26/07, JSA dated 02/26/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/26/07
Date



DAILY LOG	DATE	02	26	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, wet slippery, muddy conditions</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin Anomaly investigation clearance MRA-16</p> <p>1020 Visit to teams in field;</p> <p>1400 Checked on the Teams</p> <p>1500: Secured MRS-16 for the day, due to weather and lack of flagged anomalies</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: USACE GEO LOU HUNTER	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: TERRIBLE, VERY WINDY, COLD, AND WET	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>[Handwritten Signature]</i>	DATE: 02/26/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: Subsurface clearance MRS-16/Anomaly Investigation.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	8.5
Jimmy Drake	Team Leader	8.5
Harley Davidson	Team Leader	8.5
John Sparks	UXO Tech I	8.5
Jeff Steinwand	UXO Tech II	8.5
Tara Volpe	UXO Tech II	8.5
Josh Jenkins	UXO tech I	8.5

Today's Activities:

0630 - Conducted morning meetings.

0700 - Continued with anomaly investigations.

Summary: Investigated 149 anomalies. Collected less than one bucket of MD. Located and left in place 2 suspect 2.36 inch Rockets, and one suspect M9 Rifle Grenade. Detailed information of each excavation/anomaly is held in the PDA.

1530 - All current flagged anomalies have been investigated. Crew secured due to encountering heavy rains in the work area.

1530 - Bruce and Trish worked on training materials and equipment in preparation for tomorrow's Driver training Course.

1630 - 1730 - Completed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Light rain all day. Morning temp 43 and afternoon early 50's. Heavy rain in the late afternoon.	None

SIGNATURE: Tim Mathisen

2/26/2007

page 1 of 1



JOB SAFETY ANALYSIS

Date: 2/26/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations/ anomaly excavation		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations, swing radius of excavator/back hoe		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when NEAR for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 2/26/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest & hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Reaquire
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/26/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Anomaly excavation; Target Reacquisition

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, Backhoe, EM 61, PDA, Excavator

Other: **HARD HAT AND REFLECTIVE VEST NEAR HEAVY EQUIPMENT/BACKHOE**

ATTENDEES

NAME PRINTED	SIGNATURE
TARA VOLPE	<i>Tara Volpe</i>
Harley Davidson	<i>Harley Davidson</i>
Jim Mathison	<i>Jim Mathison</i>
John Tortolano	<i>John Tortolano</i>
John SPARUS	<i>John Sparus</i>
JAMES DRAKE	<i>James Drake</i>
Mike Lightner	<i>Mike Lightner</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
Joshua Jenkins	<i>Joshua Jenkins</i>

Meeting Conducted by: _____

DAILY QUALITY CONTROL REPORTDATE: February 27, 2007

DAY	S	M	<u>T</u>	W	H	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-98-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	<u>Overcast</u>	<u>Rain</u>	Fog
Hi	<u>43</u>	Lo	<u>54</u>	
Still	<u>Moderate</u>	High	<u>NW@5mph</u>	
Dry	Moderate	<u>High</u>	<u>90%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Defensive Driver Training conducted for two hours in morning, then burial pit excavation of 2.36" rocket pit in Grid C3A2E4

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

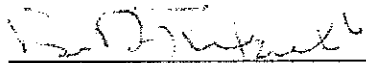
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 02/27/07, QC/UXOSO FADL dated 2/27/07, Tailgate Safety Meeting dated 02/27/07, JSA dated 02/27/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

02/27/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface clearance MRS-16/Anomaly Investigation.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	8.5
Bruce Tincknell	QC/Safety	8.5
Jack Tortolano	SUXOS	8
Jimmy Drake	Team Leader	8
Harley Davidson	Team Leader	8
John Sparks	UXO Tech I	8
Jeff Steinwand	UXO Tech II	8
Tara Volpe	UXO Tech II	8
Josh Jenkins	UXO tech I	0

Today's Activities:

0630 - Conducted morning meetings.

0700 - Conducted Defensive Driver Training per Knoxville's Training Department requirements.

0900 - Continued excavation operations in the 2.36. inch Rocket burial pit located in grid C3A2E4.

1100 - Attended meeting sponsored by USACE personnel.

1500 - Delivered explosive venting operation paperwork to the BRAC Office. Paperwork is in preparation for Thursday's explosive operation at MRS-16.

Summary: Collected 450 pounds of MD from burial pit located in grid C3A2E4. No MEC encountered.

1700 - Done for the day.

1800 - 1830 - Completed daily reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning temp 43 and afternoon early 50's.	None

SIGNATURE: Tim Mathisen

2/27/2007

page 1 of 1



DAILY LOG	DATE	02	27	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; weather, wet slippery, muddy conditions 0645: Conducted Shaw Driver Training Class 0900 Driver Class finished 0915 Watched the teams check their instruments at the test pit. All the units checked out. 0930: Teams onsite begin excavation of rocket burial pit along old rail line 1020 Visit to teams in field; 1400 Checked on the Teams 1645: Secured MRS-16 for the day, due to weather and lack of flagged anomalies 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: TERRIBLE, VERY WINDY, COLD, AND WET	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 02/27/07



JOB SAFETY ANALYSIS

Date: 2/27/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Tim Mathisen JSA Prepared by: Bruce Tincknell Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations/ anomaly excavation UXO FILL-IN RESET		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations, swing radius of excavator/back hoe Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when NEAR for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 2/27/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest & hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Reaquire
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/27/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Sweep,

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch

Other: Wet, slippery conditions

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner	
John A Kandelver	
Harley Davidson	
John SPARKS	
James DRAKE	
John Tortolero	
JEFF STEINWAND	
TMA VOLPE	

Meeting Conducted by:

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 2/27/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
Training		<u>Supervisor's Comments</u>
Potential Hazards		
Lifting Slip, Trip, and Falls		
Driving Weather		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Stay indoors during inclement weather		
James Drake	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 2/27/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 02/27/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. , Ft Ord Field Office

Type of Work: Training

Chemicals Used: NONE

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: D

Chemical Hazards: None

Physical Hazards: Slip, Trips and Falls, traffic, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe,

Other: _____

ATTENDEES

NAME PRINTED

SIGNATURE

JAMES DRAKE	<i>James Drake</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
TARA VOLPE	<i>Tara Volpe</i>
Tom Mathison	<i>Tom Mathison</i>
TRISH SMITH	<i>Trish Smith</i>
Harley Davidson	<i>Harley Davidson</i>
John Cortolano	<i>John Cortolano</i>
John SPARKS	<i>John Sparks</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 1, 2007DAY S M T W HUR F SUSACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	<u>35</u>	Lo	<u>55</u>	
Still	<u>Moderate</u>	High	<u>NW@8mph</u>	
Dry	<u>Moderate</u>	High	<u>45</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Explosive venting of 1383 2.36" rockets, trenching in highly saturated grids for investigated purposes

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/01/07, QC/UXOSO FADL dated 3/01/07, Tailgate Safety Meeting dated 03/1/07, JSA dated 03/01/07 (MRA 16); Explosive issue and usage forms, vehicle inspection forms

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/01/07
Date



DAILY LOG	DATE	03	01	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; Demo safety</p> <p>0700: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0900: Demo operations started</p> <p>1600: Demo Operations completed</p> <p>1605: Secured MRS-16 for the day,</p> <p>1615 Vehicle inspections, equipment cleaning and maintenance</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
<p>VISITORS ON SITE:</p> <p>None</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>None</p>
<p>WEATHER CONDITIONS:</p> <p>Cloudy, cool, slight breeze</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>B. D. [Signature]</i>	DATE: 03/01/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal 846075
Field Activity: MEC Explosive Venting Operations.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - On site. Attended morning meetings.
0700 - Prepared work site for MEC explosive venting operations.
0900 - Received explosive materials needed for venting operations from USACE Safety Rep.
0930 - Conducted explosive venting operations.
1600 - Explosive Venting operations complete.

Summary: Explosively vented 1383 - 2.36. inch Rockets. All rockets were determined to be inert. Also destroyed one 37mm projectile (consider live) and one M1 Mine fuze (considered live). MD scrap collected after explosive venting operations: Grid C3A2F3 - 900 lbs. Grid C3A2E2 - 2550 lbs. and Grid C3A2E4 - 699 lbs.

1700 - Secured for the day.
1730 - 1830 - Completed day ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Partly cloudy. Morning temp mid 30's and afternoon mid 50's.	None

Form M-11

EXPLOSIVES USAGE RECORD

Team Number: 2 Date: 3/1/07

Team Leader: John Toland Project: MRS 16 846075
Tom Mathisen

EXPLOSIVES ISSUED			
Signature of Team Leader: <u>[Signature]</u>			
Item	Quantity	Lot Number	Checker's Initials
Time Fuze	100	EMB 934002-107	JM
Non Elec CAP	18	131	JM
Weather Proof Ign	19	143	JM
Charge Demo M186	4	DU 1-15	JM
EXPLOSIVES EXPENDED			
Signature of Team Leader: <u>[Signature]</u>			
Item	Quantity	Lot Number	Checker's Initials
Time Fuze	100	EMB 934002-107	JM
Non Elec CAPS	18	131	JM
Weather Proof Ign	19	143	JM
Charge Demo M186	4	DU-1-15	JM
EXPLOSIVES RETURNED			
Signature of SUXOS:			
Item	Quantity	Lot Number	Checker's Initials
<u>[Signature]</u>			

[Signature]
 UXO Supervisor

3-1-07
 Date

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 4

SIZE AND WEIGHT: < 1.5 lbs

TIME OF SHOT: 1010-1600

LOCATION: MRS-16

DATE: 3-1-07

HOW MANY SHOTS: 8

SIZE AND WEIGHT: 12.5 lbs ea

TIME OF SHOT: ~~700-1500~~ 1030-1500

LOCATION: MRS 16

DATE: 3-1-07

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:
 LOCATION FOR FIRE TRUCK: _____

CALLED:

TIME

CALLER	PHONE NUMBER	TIME
FIRE DEPARTMENT:	242-7701	0651
FEDERAL POLICE:	242-7851	0652
CSU POLICE: (Non-Emergency)	655-0268	0652
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188	0653
BRAC	242-7909	0655
SAFETY OFFICE	242-6509	0655
BLM	394-8314 FORT ORD FAX / 394-8346	0657
U.S. ARMY CORPS OF ENGINEERS	884-9925 / FAX 884-9030	0659
PUBLIC AFFAIRS OFFICE <i>via ANSWER</i>	242-6430 / FAX 242-5464	0700
PARK RANGER HEADQUARTERS	758-3604	0701
LAGUNA SECA RACEWAY	648-5117 <i>DISCONNECTED</i>	0702
MONTEREY COMMUNICATIONS (non-emergency)	373-1259	0702
CSU PRESS RELATIONS	582-3653	0703
UNIFIED AIR POLLUTION CONTROL OF MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210	0704
EMERGENCY OPERATIONS CENTER ATTN: RICH SAVKO	242-5784 / FAX 242-7028	0705
SHAW ENVIRONMENTAL, INC.	883-0103 / FAX 883-0152	



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 01/02/06 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Area; Former Fort Ord, Ca.

Type of Work: UXO Demolition Operations

Chemicals Used: PETN, NO-NEL(Shock Tube), Detonating Cord, Blasting Caps, Shaped Charged perforators, Time fuze

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Dust, UXO, Explosives

Physical Hazards: Slip, Trips and Falls, UXO, Heat and /or Cold Stress, Traffic

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Explosives, Forklift

Other: **Demo Team Leaders Control Communications**

ATTENDEES

NAME PRINTED	SIGNATURE
Nick Busse	[Signature]
John SARKIS	[Signature]
JEFF STEINWAND	[Signature]
Tom MATHEWSON	[Signature]
John Tortolano	[Signature]
John Salas	[Signature]
James DRAKE	[Signature]
TRISIA SMITH	[Signature]

Meeting Conducted by: Bruce Tincknell; UXOSO

[Signature]

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

MRS-16

Date: 3/1/07

Job#: 846475

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16, Ft Ord, CA		
Required PPE: Mod "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Main Gate MRS 16	JSA Prepared by: Bruce Tincknell Are other crews in area?
	Wind Direction: n/a Eucalyptus to Parker	
	Evacuation Route: Flats	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main Gat MRS 16	New: <input checked="" type="checkbox"/>
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Demolition Operations		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Fire		
MSD		
Traffic/Non-essential personnel		
Demolition shot misfire		
Accidental detonation		
Recommended Action or Procedure		
Observe walking area/conditions		
No Demo operations in electrical storms or winds > 15 MPH		
2 ea 10 BC Fire extinguishers on and and NO Smoking material within 100 ft		
Establish a Frag/Blast radius around each UXO to be disposed of		
Road blocks established, non-essential personnel kept out of Area		
Follow misfire procedures in SOP OE-005 Wait time 60 min		
Initiators and HE kept a minimum of 50 ft apart until needed. With proper storage and transport.		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

JOB SAFETY ANALYSIS

Date: 3/1/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

VEHICLE INSPECTION CHECKLIST

DATE 3-1-07

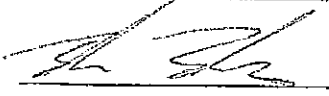
Mileage 6403

Name of Inspector Joshua Tealins

Vehicle Number 8D31972

ITEMS TO BE CHECKED	SAT	UNSAT	Note Deficiencies
Tires / Air Pressure	✓		
Brakes	✓		
Parking Brake	✓		
Back-U Alarm or Strobe Light	✓		
Horn	✓		
Lights and Signals	✓		
Seat Belts	✓		
Windshield & Wipers	✓		
State Inspection Sticker / License Plate	✓		
Windows & Mirrors	✓		
Belts & Hoses			
Fluid Levels (Oil, Water, Fuel, Battery)	✓		
Leaks (Water, Oil, Air Fuel)			
Fire Extinguisher	✓		
Heater/Defroster	✓		
Mirrors	✓		
First Aid Kit	✓		
Insurance Card/Accident Reports/Hospital Route Map	✓		

COMMENTS: _____

SIGNATURE: 

VEHICLE INSPECTION CHECKLIST

DATE 1 MAR 07

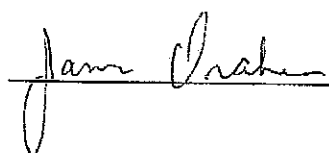
Mileage 24742

Name of Inspector DRAKE

Vehicle Number GSA #3584A

ITEMS TO BE CHECKED	SAT	UNSAT	Note Deficiencies
Tires / Air Pressure	✓		
Brakes	✓		
Parking Brake	✓		
Back-U Alarm or Strobe Light			GSA vehicle
Horn	✓		
Lights and Signals	✓		
Seat Belts	✓		
Windshield & Wipers	✓		
State Inspection Sticker / License Plate			GSA Vehicle
Windows & Mirrors	✓		
Belts & Hoses	✓		
Fluid Levels (Oil, Water, Fuel, Battery)	✓		
Leaks (Water, Oil, Air Fuel)	✓		
Fire Extinguisher	✓		
Heater/Defroster	✓		
Mirrors	✓		
First Aid Kit	✓		
Insurance Card/Accident Reports/Hospital Route Map		✓	NO hospital Route MAP Insurance CARD NOT IN TRUCK

COMMENTS: Truck just serviced this week at Ford

SIGNATURE: 

VEHICLE INSPECTION CHECKLIST

DATE 3/1/07

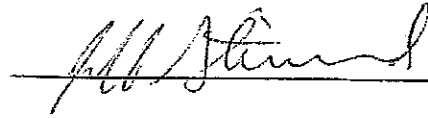
Mileage 6094

Name of Inspector JEFF STEINWALD

Vehicle Number 8B17306

ITEMS TO BE CHECKED	SAT	UNSAT	Note Deficiencies
Tires / Air Pressure	✓		
Brakes	✓		
Parking Brake	✓		
Back-U Alarm or Strobe Light	NA		
Horn	✓		
Lights and Signals			
Seat Belts	✓		
Windshield & Wipers	✓		
State Inspection Sticker / License Plate	✓		
Windows & Mirrors	✓		
Belts & Hoses			
Fluid Levels (Oil, Water; Fuel, Battery)	✓		CHECK ENGINE OIL LIGHT ON
Leaks (Water, Oil, Air Fuel)	✓		
Fire Extinguisher	✓		
Heater/Defroster	✓		
Mirrors	✓		
First Aid Kit	✓		
Insurance Card/Accident Reports/Hospital Route Map	✓		

COMMENTS: _____

SIGNATURE: 

DAILY QUALITY CONTROL REPORTDATE: March 2, 2007

DAY	S	M	T	W	THUR	<u>F</u>	S
-----	---	---	---	---	------	----------	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	<u>35</u>	Lo	<u>63</u>	
Still	<u>Moderate</u>	High	<u>NW@8mph</u>	
Dry	<u>Moderate</u>	High	<u>45</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Team excavating Grid C3A2E4 with excavator and "Warwagon", large trench filled with rockets

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

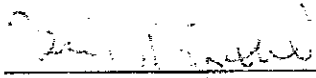
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/02/07, QC/UXOSO FADL dated 3/02/07, Tailgate Safety Meeting dated 03/2/07, JSA dated 03/02/07 (MRA 16);

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/02/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface MEC Removal MRS-16.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	5.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh Jenkins	UXO tech I	8

Today's Activities:
0630 - On site. Attended morning meetings.
0700 0900 - Gathered all MD resulting from the explosive venting operation conducted yesterday.
0900 - 1700 - Continued excavation operations in grid C3A2E4.

Summary: Collected and removed 1375 pounds of MD from excavation site, grid C3A2E4. No MEC encountered.

1700 - Secured from site activities.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS None
WEATHER CONDITIONS: Nice day. Morning low 30's. Afternoon in the late 50's.	IMPORTANT TELEPHONE CALLS: None



DAILY LOG	DATE	03	02	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated</p> <p>0715: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0730: Team excavating in Grid C3A2E4</p> <p>1400 Checked on the Teams, Team excavating rocket burial pit along old rail line</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
<p>VISITORS ON SITE:</p> <p>None</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>None</p>
<p>WEATHER CONDITIONS:</p> <p>Warm and Sunny</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>[Handwritten Signature]</i>	DATE: 03/02/07



JOB SAFETY ANALYSIS

Date: 3/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		Crew Name Signatures:
Eye contact with equipment operator		
[Signature]		
[Signature]		
[Signature]		
[Signature]		
[Signature]		

JOB SAFETY ANALYSIS

Date: 3/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN _____

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- _____ Required
 - _____ Cold Work
 - _____ Hot Work
 - _____ Entry Permit
 - _____ All Conditions Met
 - _____ Signed Off when Complete
 - _____ Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - _____ Special Purpose Gloves
 - _____ Tyvek Suit
 - _____ Acid Suit/Slicker Suit
 - _____ Rubber boots
 - _____ Mono Goggles (vented-non-vented)
 - _____ Face Shield
 - _____ Respirator
 - _____ Fresh Air
 - _____ Ear Protection
 - _____ Safety Harness
 - _____ Burning Goggles
 - _____ Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- _____ Current Inspection
 - _____ Proper Tools for the Job
 - _____ Good Tool Condition
 - _____ Qualifications
 - _____ Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - _____ Safety Shower
 - Evacuation Route
 - _____ Other

- ACCESS**
- _____ Scaffold (properly inspected)
 - _____ Ladder (Tied Off)
 - _____ Manliest
 - _____ Personnel Basket (Inspected & Approved)
 - _____ Operator training
 - _____ Special Provisions
 - _____ Other

- WELDING**
- _____ Flashburns
 - _____ Combustibles
 - _____ Spark Containment
 - _____ Shields
 - _____ Grounding
 - _____ Water Hose
 - _____ Fire extinguisher
 - _____ Fire Blanket
 - _____ Fire Watch
 - _____ Sewer Covers
 - _____ Other

- OVERHEAD WORK**
- _____ Barricades
 - _____ Signs
 - _____ Hole Cover
 - _____ Handrail
 - _____ Other

- ELECTRICAL**
- _____ Locked and Tagged Out
 - _____ Try Start/Stop Switch
 - _____ GFCI Test
 - _____ Assured Grounding
 - _____ Extension Cord Inspection
 - _____ Other

- LIFTING**
- _____ Forklift
 - _____ Cherry Picker
 - _____ Load Chart
 - _____ Angle
 - _____ Crane
 - _____ Chainfall
 - _____ Proper Rigging Practices
 - _____ Manual Lifting
 - _____ Condition of Equipment
 - _____ Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- _____ Electrical Shock
 - _____ Heat Stress
 - _____ Heavy Objects
 - _____ Hot/Cold Surf or Mat
 - _____ Inadequate Lighting
 - _____ Line Breaking
 - _____ Noise
 - _____ Poor Access/Egress
 - _____ Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- _____ Chemical Burn Shin/Eyes
 - _____ Flammable
 - _____ Ingestion
 - _____ Inhalation
 - _____ Skin Contamination
 - _____ Other

- HAZARDS/BODY**
- Fall potential
 - _____ Pinch Points
 - Slip-Trip Potential
 - _____ Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - _____ PPE Due to Other Work
 - _____ Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/2/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: UXO Sub-Surface Anomaly removal

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)


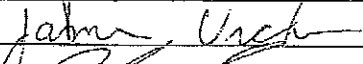
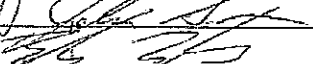
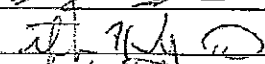
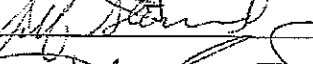
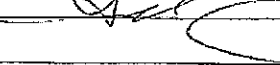

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, Backhoe, Fire watch


Other: _____

ATTENDEES

NAME PRINTED

SIGNATURE

John Tortolano	
James DRAKE	
John SPARKS	
Joshua Jenkins	
Harley Davidson	
JEFF STEINWITZ	
TRISHA SMITH	

Meeting Conducted by: 

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 5, 2007DAY S **M** T W THUR F SUSACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hr	43	Lo	67	
Still	<u>Moderate</u>	High	NW@8mph	
Dry	<u>Moderate</u>	High	45	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Team excavating Grid C3A2E4 with excavator and "Warwagon", large trench filled with rockets

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface MEC Removal MRS-16.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - On site. Attended morning meetings.

0700 - Continued with the excavation in Grid C3A2E4. Removed 650 pounds of MD. Located and stored in a safe holding area one live 2.36 inch Rocket booster and one live M9 Rifle Grenade booster.

0700 - Two junior UXO Techs supported the geo group with filling in missed data.

1700 - Secured field operations.

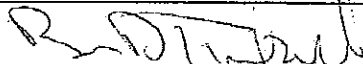
1730 - 1800 - Performed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Nice day. Morning early 40's. Afternoon in the late 60's.	None



DAILY LOG	DATE	03	05	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated</p> <p>0715: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0730: Team excavating in Grid C3A2E4</p> <p>1300 Checked on the Teams, Team excavating rocket burial pit along old rail line</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
<p>VISITORS ON SITE:</p> <p>None</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>None</p>
<p>WEATHER CONDITIONS:</p> <p>Warm and Sunny</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: 	DATE: 03/05/07

JOB SAFETY ANALYSIS

Date: 3/5/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input checked="" type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input checked="" type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input checked="" type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
--	--	---

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe, OFF-road fork lift; excavator, "War-wagon"

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

ATTENDEES

NAME PRINTED	SIGNATURE
John Mathison John SPARKS	[Signature]
JEFF STEINWAND	[Signature]
Joshua Jenkins	[Signature]
John Vortolano	[Signature]
Mike Lightner	[Signature]
James Drake	[Signature]
Harley Davidson	[Signature]

Meeting Conducted by: [Signature]

Supervisor:


Manager:

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 03/05/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED	SIGNATURE
TASHA SMITH	
CHUCK NICHUM	OK
TARA VOLPE	TJERY

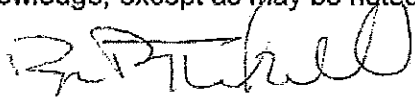
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Instructions from USACE Huckins, to stop using the screening table, only the "Warwagon". On 3/6/07 we will not be digging in the bowl area as to allow Geo to acquire grid targets in that area. UXO TMS will be using an EM 61 in real time mode and clearing around trees and other natural areas that the GEO team could not acquire data in.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/05/07, QC/UXOSO FADL dated 3/05/07, Tailgate Safety Meeting dated 03/5/07, JSA dated 03/05/07 (MRA 16);

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/05/07
Date

DAILY QUALITY CONTROL REPORT

DATE: March 6, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	----------	---	------	---	---

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi 44	Lo		67	
WIND	Slll Moderate	High	NW@8mph		
HUMIDITY	Dry Moderate	High	45		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Assisted GEO on Reacquire of target anomalies; Mag and dig around trees. This process stopped by USACE at 1215. TM then marked tree areas.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

UXO TMS using an EM 61 in real time mode and clearing around trees and other natural areas that the GEO team could not acquire data in, stopped at 1215 hrs by USACE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/06/07, QC/UXOSO FADL dated 3/06/07, Tailgate Safety Meeting dated 03/6/07, JSA dated 03/06/07 (MRA 16);

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/06/07

Date



DAILY LOG	DATE	03	06	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 36A Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; weather, warm stay hydrated 0715: Watched the teams check their instruments at the test pit. All the units checked out. 0730: Mag and dig around trees/ Reacquire anomalies 1230 Mag and dig operations stopped, awaiting FWV, TM marking tree boundaries 1400 Checked on the Teams 1645: Secured MRS-16 for the day, 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Warm and Sunny	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/06/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface MEC Removal MRS-16.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - On site. Attended morning meetings.

0700 - Moved equipment and materials out of bowl area to allow EM-61 operations without interference with large mobile metal objects.

0800 - One team re-checking/verifying PDA data and one team performing mag and dig around previously marked trees that did not receive EM-61 attention during phase 1 survey due to tree canopy interference.

0900 - 1500 - Provided one UXO Tech to support BLM activities.

1100 - Attended meeting sponsored by the Corps.

1215 - Stopped performing mag and dig around trees due to not have written procedures to do such an activity. Crew now marking tree canopy areas on trees not marked by geo's in their phase 1 survey. Trees areas will receive subsurface clearance upon approval of written clearance procedures.

1700 - Field operations done for the day.

1730 - 1800 - Daily reports completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Same as yesterday. Morning early 40's. Afternoon in the late 60's.	None



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/06/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear, Backhoe,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John SPARKS	
Joshua Se...s	
Harley Davidson	
Jim MATHISEN	
John Tortolano	
James DRAKE	
TARA VOLPE	
Mike Lightner	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 03/06/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED	SIGNATURE
CHUCK NYCOM	<i>Chk</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>

JOB SAFETY ANALYSIS

Date: 3/6/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: March 7, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	44	Lo	67	
Still	Moderate	High	NW@8mph	
Dry	Moderate	High	45	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Assisted GEO on Reacquire of target anomalies; TM marking out tree areas to mag and dig due to loss on GPS for data collection.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/07/07, QC/UXOSO FADL dated 3/07/07, Tailgate Safety Meeting dated 03/7/07, JSA dated 03/07/07 (MRA 16);

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



John Tortolano
SHAW-UXOQC Specialist

03/07/07

Date



LLP

DAILY LOG	DATE	03	07	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated</p> <p>0715: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0730: TM marking tree boundaries, 2 personnel assisting GEO during reacquire</p> <p>1200: Jack Tortolano assumes UXO Safety and QC duties. Bruce Tincknell on vacation for 5 days.</p> <p>1400 Checked on the Teams</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>			
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: Warm and Sunny		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE:		DATE: 03/07/07	

7

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface MEC Removal MRS-16.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	5.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
0630 - On site. Attended morning meetings.
0700 - Two UXO Techs supporting the geo group with anomaly reacquisition. The rest of the crew is continuing to mark tree canopy areas the same as conducted yesterday.
1200 - Bruce Tincknell went on 5 days vacation. Jack Tortolano will assume UXO Safety and QC duties.
1700 - Done for the day.

Note: Easy going day, no problems encountered.
1730 - 1800 - Completed day ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning early 40's. Afternoon in the mid 60's.	None



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/07/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	
John SPARKS	
James DRAKE	
JEFF STEINWAND	
Randy Davidson	
John Tortolano	
Mike Lightner	
TARA VOLPE	

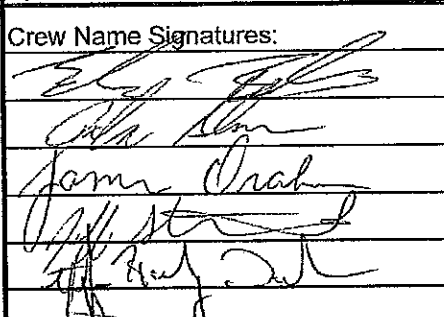
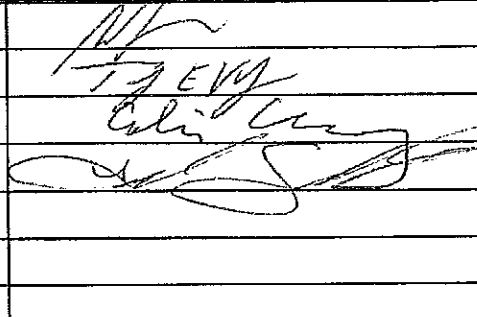
Meeting Conducted by:

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 3/7/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Tim Mathisen JSA Prepared by: Bruce Tincknell Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
OE Sub-surface Clearance Operations		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures: 		

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p> <hr/>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p> <hr/>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p>_____ Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p style="text-align: right;">Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: March 8, 2007DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.

WEATHER

DELIVERY ORDER NO. 0016

TEMP: H/L

CONTRACT NO. DACW05-96-D-0011

WIND

PROJECT NO. 846075

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	<u>57</u>	Lo	<u>44</u>	
Still	<u>Moderate</u>	High	<u>NW@8mph</u>	
Dry	<u>Moderate</u>	High	<u>57</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Excavator	1	Y	10
EM-61 MK 2 A	5	N	50
EM-61 MK 2 A	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Assisted GEO on Reacquire of target anomalies; TM marking out tree areas to mag and dig due to loss on GPS for data collection. TM moving scrap bins and equipment to allow GEO to collect data in bowl area.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

Explosives received from vendor. Put in storage and turned over to USACE, Clinton Huchins. ATF transaction form signed and on file.

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

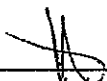
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/08/07, QC/UXOSO FADL dated 3/08/07, Tailgate Safety Meeting dated 03/8/07, JSA dated 03/08/07 (MRA 16); ATF form 5400.4 dated 3/08/07; bill of lading dated 3/07/07; Material Request Field Worksheet, Explosive Request dated 2/20/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



John Tortolano
SHAW-UXOQC Specialist

03/08/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Subsurface MEC Removal MRS-16.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	0
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	7
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
0630 - Attended morning meetings.
0700 - One UXO Tech supporting the geo group with anomaly reacquisition. Two other UXO Techs are using the GPS to identify tree areas that still require subsurface clearance underneath their canopy. We are also providing UXO Techs to support the moving of equipment such as bins, tractor etc. to an area on range that is clear of subsurface anomalies. This moving of equipment and bins will allow the geo's and there EM-61 array to continue the survey in and around the bowl area.
1000 - 1400 - Provided one UXO Tech to support BLM.
1000 - Explosive vendor on site with our demolition material order. All explosive materials were transferred to the custody of Clinton Huchins, USACE OE Safety Specialist. ATF Transaction Form signed by me and Clinton Huchins is on file with Shaw's on site UXO QC Manager.
1700 - Field activities secured for the day.
1700 - 1800 - Completed week ending report.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning early 40's. Afternoon in the late 50's.	None



L6

DAILY LOG	DATE	03	08	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated</p> <p>0715: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0730: TM marking tree boundaries, 2 personnel assisting GEO during reacquire. TM moving scrap bins and equipment to allow GEO to collect data in bowl area.</p> <p>1000: Explosive delivery. Explosives turned over to USACE, Clinton Huchins. ATF transition form on file.</p> <p>1100: Checked on the Teams.</p> <p>1430: Checked on Teams.</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center; border-top: 1px dashed black;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Warm and Sunny	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/08/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/08/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range.

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe.

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Herby Davidson	
Sam Mathisen	
JOHN SPARKS	
Joshua Salinas	
James DRAKE	
TARA VOLPE	
CHUCK NYQUIST	
C. Lin Chang	

Meeting Conducted by: John Tortolano

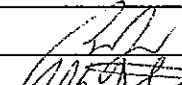

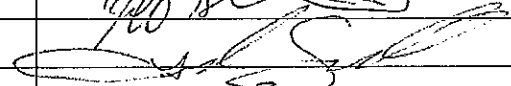
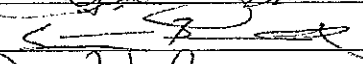
Supervisor: _____ Manager: _____

TAILGATE SAFETY MEETING CONTINUATION SHEET

DATE: 03/07/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED	SIGNATURE
Mike Lightner	
JEFF STEINWARD	
TERESA SMITH	
Steven Bennett	
DOY HOLMES	DOY HOLMES



JOB SAFETY ANALYSIS

Date: 3/8/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: John Tortolano Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Limited Permittee Transaction Report

Affix ATF Form 5400.30, Intrastate Purchase of Explosives Coupon (IPEC) - Copy B	For ATF Use Only Transaction Serial Number (Optional)
--	--

Section A - (Must be completed by the person purchasing the explosive materials)

- PERSON USING THIS COUPON TO PURCHASE EXPLOSIVE MATERIALS: I declare under the penalties of perjury that I am either the limited permittee identified below, a responsible person or an employee of the limited permittee authorized to receive explosive materials on the limited permittee's behalf (name is listed on the list of names provided by the limited permittee to purchase explosive materials on their behalf.)
- What is the intended use of the purchased explosive materials? (e.g., well drilling, beaver dam, model rocket, fireworks, drilling rock, blasting, construction, theatrics, etc.)
UXO Disposal AT Ft. Ord, CA.
- Under the penalties imposed by 18 U.S.C. 844, I certify that the answers are true, correct, and complete. I also certify that I am familiar with all published Federal, State laws and local ordinances related to explosive materials for the location in which I reside and intend to use these explosives.

Print Name of Distributee (Buyer or authorized employee) Clinton J. Huskins	Title: Military Munitions Specialist	Date: 3-8-07
---	--	------------------------

Distributee's (Buyer's or authorized employee's) Signature:
[Signature]

Section B - (Must be completed by the Federally licensed explosives distributor or seller)

- The distributees listed above purchased the following explosive materials with this Intrastate Purchase Explosive Coupon. (If additional space is required, use a separate sheet.)

Quantity in Pound/Units	Manufacturer's/Importer's Name or Brand Name	Manufacturer's/Importer's Marks of Identification (optional)	Description (e.g., Dynamite, detonators)	Size (optional)
2000 FT.	Cord Detonating	06FE0601 Primacord	Det Cord	
60 EA.	Detonator Assemblies	05DE05W1	BLASTING CAPS	
110 EA.	Detonator Assemblies	12DE05W1	BLASTING CAPS	
2000 FT.	Lead Line	08JA07W1	Non-E	

- The distribution of explosive materials was identified in the manner described below. (Check one)
 - a. The explosive materials were distributed by the distributor, or an employee of the distributor. (Complete item 2c-e and see instruction 12); or
 - b. A common or contract carrier hired by the distributor delivered the explosive materials to the distributee and identification information on the distributee was obtained by other means. (Complete item 2c-e and see instruction 13);
- | | | |
|---|--|--|
| c. Distributee's Type of Identification (e.g., driver's license or other valid government issued photo identification)
Military DD-form 3 | d. Number on Identification:
520-90-6419 | e. Expiration Date of Identification (if any)
2011 |
|---|--|--|
- The above person is: (Check one)
 - a. The person identified above in Section B, number 2 as the "Limited Permittee."
 - b. Listed as an employee authorized to receive explosive materials for the limited permittee. (NOTE: A current list of names of employees authorized to accept delivery of explosive materials on behalf of the limited permittee must be on file.)

4. <input type="checkbox"/> The explosive materials were delivered to the limited permittee by contract or common carrier. (ATF Form 5400.8 must completed and attached.) Not received from vendor		
5. Distributor's Business Name and Address Shaw B-1 Bldg 4522 Joe Lloyd Way Monterey, CA 93944	6. Distributor's License Number 1-VA-510-33-9B-0037A	
7. Distributor's Signature <i>[Signature]</i>	8. Title SUXOS	9. Transaction Date 3-8-07

Section C - (Must be completed by the individual (purchaser or purchaser's employee) receiving the explosive materials if the distribution of the explosive materials takes place on a different day from the date the limited permittee signed in Section A.

- Print Name of person receiving the explosive materials:

2. Signature:	3. Date:
---------------	----------



A Dyno Nobel Distributor

P.O. BOX 310
 LINCOLN, CALIFORNIA 95648
 TELEPHONE (916) 645-3377
 FAX (916) 645-8512

Delivery
Gerald E Martin Jr.
(Jerry)

3/7/2007	20516	
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STRAIGHT
 BILL OF LADING
 NON-NEGOTIABLE

SOLD TO: SHAW ENVIRONMENTAL
 PO BOX 1698

SHIP TO: SHAW ENVIRONMENTAL
 BLDG 4522 JOE HAYD WAY

MARINA, CA 93933

MONTEREY, CA 93944

REF # *1-VA-510-33-9B-00374*

Expiration: *FEB 1, 2009*

ORDER NO.	ORDER DATE	CUSTOMER NO.	SALES PERSON	PURCHASE ORDER NO.	SHIP VIA			SHIP DATE	ROUTE	
20516	3/7/2007	519933		265727 OP	ALPHA TRUCK			3/8/2007		
PROPER SHIPPING NAME					HAZARD CLASS	UN NUMBER	PKG GROUP	DOT EXEMPTION	SHIP UNIT	SHIPPED QUANTITY
QTY RETURNED	UNIT	QTY SHIPPED	ITEM NUMBER	ITEM DESCRIPTION				SHIP UNIT	SHIPPED QUANTITY	
				CORD, DETONATING, FLEXIBLE						
	PT	2000	LOT: 06FE06G1	1.1D	UN0065	II		BT	2,000.00	
				PRIMACORD 10 10.6 G/M (5					2,000.00	
				DETONATOR ASSEMBLIES, NON-ELECTRIC, FOR BLASTING						
	EA	60	LOT: 05DE05W1	1.4E	UN0361	II		KA	1.67	
	EA	40	LOT: 12DR05W1	NONEL MS 40' OMS F80 60/✓					1.00	
	EA			NONEL MS 40' OMS F80 60/✓					0.67	
				ARTICLES, EXPLOSIVE, N.O.S (CONTAINS HMX, ALUMINUM POWDER)						
	SL	15	LOT: 08JAO7W1	1.4S	UN0343	II		RL	6.00	
				LEAD LINE 2500'✓					6.00	
				MISCELLANEOUS SUPPLIES						
	HR	10	DEBCH	DELIVERY CHARGE					10.00	

EMERGENCY CONTACT:
 1/800/535-5053

FEDERAL LICENSE NO. 9CA015269H11327
 FEDERAL LICENSE NO. 9CA031200808193
 U.S. DOT NO. 118279
 HAZ. MAT. LIC. NO. HMX 35151

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

FOR ALPHA DYNO NOBEL BY _____

RECEIVED BY:

[Signature]

TITLE: *SGX/S*

DATE: *3.17.07*

CUSTOMER COPY



Shaw Environmental, Inc.

Project: 783751 846075 X

DATE ORDERED: _____

ETA DATE: _____

ORDERED BY: _____

MATERIALS REQUEST FIELD WORKSHEET

DATE REQUESTED: 2/20/07	REQUESTOR: Kevin Siemann	DATE REQUIRED: 2/26/07	
----------------------------	-----------------------------	---------------------------	--

LINE #	QTY	U/M	DESCRIPTION	UNIT PRICE	EXTENDED PRICE w/tax	% Alloc	PROJECT	COST TYPE	COST CODE
1	16	RL	Lead Line (Shock Tubing)	181.00	2996.00		B		
2	100	ea	62 Dets w/ 12 to 40ft						
			Lead line - Instantaneous	7.47	747.00				
3	2	ea	50 grain det cord	300.00	600.00				
			Delivery		1000.00				
						100	846075		0620/350
			tax						
			Shipping, estimated:						
			Total		5243.00				
SUGGESTED VENDOR:			Alpha Explosives						
PHONE NO:			916-645-3377						

Items to be used for:

Demo operations

Is item(s) in approved budget or WVN

Yes No If no, explain:

X KJS

TASK MANAGER

X _____
ADMIN

X _____
QC

X _____
I/S

X [Signature]
COST/SCHEDULE

X [Signature]
PROJECT MANAGER

APPROVED NOT APPROVED

DAILY QUALITY CONTROL REPORT

DATE: March 13, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	----------	---	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	70	Lo	47	
Still	Moderate	High	NW@8mph	
Dry	Moderate	High	70	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	5	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

1 Team working on digital excavations, Schoenstedts set on level 4; UXO avoidance support to BLM.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

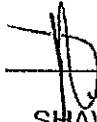
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/13/07, QC/UXOSO FADL dated 3/13/07, Tailgate Safety Meeting dated 03/13/07, JSA dated 03/13/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



John Tortolano
SHAW-UXOQC Specialist

03/13/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Anomaly Investigation MRS-16.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9.5
Bruce Tincknell	QC/Safety	0
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
0630 - Attended morning meetings.
0700 - One UXO Tech supporting the geo group with anomaly reacquisition. The other UXO Techs are investigating reacquired targets.
0830 - 1500- Provided one UXO Tech to support BLM.

Summary: Completed approx. 84 anomaly investigations. Four 2.36 inch Rockets left in place waiting to be x-rayed at a later date.

Note: Still slow going with target investigations. Many marked targets (flags) represents more then one anomaly. Most require 6 or more excavations to clear the hole of anomalies in order to reduce the real time QC reading on the EM-61 to less than 14 mv.

1700 - Secure field operations.
1730 - 1800 - Daily reports were completed and submitted.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Same as yesterday. Morning mid 40's. Afternoon in the late 60's.	None



L6

DAILY LOG	DATE	03	13	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated</p> <p>0715: Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: 1 person assisting GEO during reacquire/fill-in. TM working digital excavations.</p> <p>0830: 1 person escorting BLM</p> <p>0900: Checked on the Teams.</p> <p>1430: Checked on Teams.</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Warm and Sunny	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/13/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/13/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range.

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
TARA VOLPE	
Joshua Sealans	
JOHN SPARKS	
Jim MATTHESEN	
JEFF STEINWARD	
James Drake	
Colin Chang	
Mike Lightner	

Meeting Conducted by:

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

Date: 3/13/2007
 Job#: 846075
 Permit#:
 Issued By: J Tortolano

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: John Tortolano Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	James Drake	
	Cole, Amy	

JOB SAFETY ANALYSIS

Date: 3/13/2007
 Job#: 846075
 Permit#:
 Issued By: J Tortolano

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input checked="" type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: March 12, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	80	Lo	49	
Skill	Moderate	High	NW@8mph	
Dry	Moderate	High	80	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	3	Y	30
PICK-UP	2	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	5	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Assisted GEO on Reacquire of target anomalies and fill-ins; TM working on digital excavations, Schoenstedts set on level 4; UXO avoidance support to BLM.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/12/07, QC/UXOSO FADL dated 3/12/07, Tailgate Safety Meeting dated 03/12/07, JSA dated 03/12/07 (MRA 16)

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



John Tortolano
SHAW-UXOQC Specialist

03/12/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Anomaly Investigation MRS-16.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	0
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
0630 - Attended morning meetings.
0700 - One UXO Tech supporting the geo group with anomaly reacquisition. The other UXO Techs are investigating reacquired targets.
1000 - 1500 - Provided one UXO Tech to support BLM.

Summary: Completed 80 anomaly investigations. One piece of pyrotechnic material (live) from a M125 Signal was located and removed to a safe holding area.

Note: Slow going with target investigations is due to the distance needed to travel from one target to another and the time it takes to locate and remove a small piece of wire that has a mv reading of 14 or more.

1700 - Secure field operations.
1700 - 1800 - Daily reports were completed and submitted.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning mid 40's. Afternoon in the early 70's.	None



DAILY LOG	DATE	03	12	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA	PROJECT NO: 846075
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FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

0600: Prep for tailgate

0630: Tailgate; weather, warm stay hydrated

0715: Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.

0730: 1 person assisting GEO during reacquire/fill-in. TM working digital excavations.

0900: Checked on the Teams.

1000: 1 person escorting BLM .

1530: Checked on Teams.

1645: Secured MRS-16 for the day,

1700: COB

-----Nothing Follows-----

VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Warm and Sunny	IMPORTANT TELEPHONE CALLS: None

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE:	DATE: 03/12/07
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Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/12/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range.

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe.

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
KIM MATHESEN	
JOHN SPARKS	
JEFF STEINWAND	
JAMES DRAKE	
JOSHUA JENKINS	
TARA VOLPE	
MIKE LIGHTNER	
Harley Davidson	

Meeting Conducted by:

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

Date: 3/12/2007
 Job#: 846075
 Permit#:
 Issued By: J Tortolano

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: John Tortolano Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>[Handwritten signatures]</i>		
<i>[Handwritten signatures]</i>		
<i>[Handwritten signatures]</i>		
<i>[Handwritten signatures]</i>		
<i>[Handwritten signatures]</i>		

JOB SAFETY ANALYSIS

Date: 3/12/2007
 Job#: 846075
 Permit#:
 Issued By: J Tortolano

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: March 14, 2007DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	55	Lo	44	
Still	Moderate	High	NW@8mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
5	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	5	N	50
Tractor	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

1 Team working on digital excavations, Schoenstedts set on level 4; GEO TM reacquiring targets

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

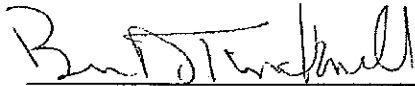
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Rental Tractor was down due to broken hydro line; repaired late in afternoon

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/14/07, QC/UXOSO FADL dated 3/14/07, Tailgate Safety Meeting dated 03/14/07, JSA dated 03/14/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/14/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Anomaly Investigation MRS-16.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - Two UXO Teams investigating reacquired targets.

1130 - 1230 - All personnel attended Shaw's monthly Ft. Ord "Safety Council Meeting".

1230 - Continued with target investigation activities.

Summary: Completed and QC'd approximately 115 anomalies. Four 2.36 inch Rocket left in place to be x-rayed later this week. Thirteen M1 practice mines with suspect live fuzing were located and stored in a safe holding area. All mines will be explosively vented during the next scheduled disposal operation.

1700 - Done for the day.

1800 - Secured after completed daily reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Foggy morning mid 40's. Afternoon in the late 50's.	None



L6

DAILY LOG	DATE	03	17	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated, severe fog in AM watch driving</p> <p>0715: Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: TM working digital excavations.</p> <p>0900: Checked on the Teams.</p> <p>0930 Conducted QC of PDA data files</p> <p>1130 – 1230 Attended Ft Ord Safety Council meeting</p> <p>1430: Checked on Teams.</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Warm and Sunny	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>[Handwritten Signature]</i>	DATE: 03/14/7



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 3/14/2007
 Job#: 846075
 Permit#:
 Issued By: J Tortolano

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: John Tortolano Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/14/2007
 Job#: 846075
 Permit#:
 Issued By: J Tortolano

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p> <hr/>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p> <hr/>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p>_____ Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following: * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/14/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range.

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe.

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
LUCK NYCOM	<i>[Signature]</i>
JEFF STEINWAND	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
Harley Davidson	<i>[Signature]</i>
Joshua Perkins	<i>[Signature]</i>
Bruce Tinkrell	<i>[Signature]</i>
TIM MATHISEN	<i>[Signature]</i>

Meeting Conducted by: *[Signature]*

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORT

DATE: March 15, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 PROJECT NO. 848075

WEATHER
 TEMP: H/L
 WIND
 HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	67	Lo	46	
Sill	Moderate	High	NW@4mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Backhoe	1	Y	10
Fork Lift	1	Y	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	5	N	50
Tractor	1	Y	10

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

1 Team working on digital excavations, afternoon TM using EM 61 in active mode under tree canopies. Schoenstedts set on level 4; GEO TM reacquiring targets; GEO using towed array acquiring new targets in "Bowl" area, 9 suspected UXO items x-rayed, all items either practice/inert.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

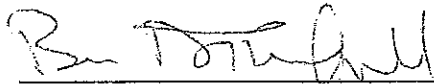
NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).
SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).
NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)
SUXOS FADL dated 03/15/07, QC/UXOSO FADL dated 3/15/07, Tailgate Safety Meeting dated 03/15/07, JSA dated 03/15/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/15/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Anomaly Investigation MRS-16.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	0
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - One UXO Team investigating reacquired targets. Another UXO Team is x-raying 2.36 inch Rockets that were left in place waiting further investigation. All rockets were determined to be practice/inert.

1400 - UXO crew is out of reacquisition targets. Crew commenced subsurface clearance around trees where the EM-61 could not be used due to losing tracking signals under tree canopies.

Summary: Completed and QC'd 50 reacquisition targets. No MEC encountered.

1700 - Field operations secured.

1730 - 1800 - Daily admin duties were performed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning mid 40's. Afternoon in the late 60's.	None

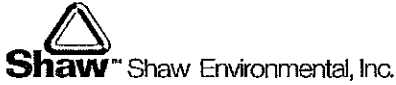


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DAILY LOG	DATE	03	15	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated,</p> <p>0715: Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: TM working digital excavations.</p> <p>0900: Checked on the Teams.</p> <p>1000 Conducted QC of PDA data files</p> <p>1400 TM out of DGM digs, moving to tree area</p> <p>1430: Checked on Teams.</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Warm and Sunny	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/15/7



JOB SAFETY ANALYSIS

Date: 3/15/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 3/15/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>X Coveralls _____</p> <p>Reflective vest and hard hats near heavy equipment _____</p> <p>X _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>x Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>x Heat Stress _____</p> <p>x Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>x Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>X UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>X Type of Work Others Doing _____</p> <p>x GEO Teams _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/15/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John SPARTS	
John Jenkins	
TARA VALE	
JEFF STEINWAND	
Tim MATHEISON	
Hurley Davidson	
Mike Lightner	
Colin Chang	

Meeting Conducted by:

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 16, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	68	Lo	43	
Sill	<u>Moderate</u>	High	NW@4mph	
<u>Dry</u>	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
5	UXO	BY	Shaw	Fort Ord, Calif./UXO
	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	4	Y	50
PICK-UP	1	GSA	10
Backhoe	1	Y	0
Fork Lift	1	Y	00
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	5	N	0
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
TM using EM 61 in active mode under tree canopies. Afternoon Team working on digital excavations, Schoenstedts set on level 4; GEO not scheduled for field work

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

N/A

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/16/07, QC/UXOSO FADL dated 3/16/07, Tailgate Safety Meeting dated 03/16/07, JSA dated 03/16/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist


03/16/07

Date



DAILY LOG	DATE	03	16	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16, Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:			
<p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated,</p> <p>0715: Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: TM working Tree areas</p> <p>0900: Checked on the Teams.</p> <p>1000 Conducted QC of PDA data files</p> <p>1400 TM working digital excavations</p> <p>1430: Checked on Team.</p> <p>1645: Secured MRS-16 for the day,</p> <p>1700: COB</p>			
-----Nothing Follows-----			
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: Warm and Sunny		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 03/16/7	

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Anomaly Investigation MRS-16.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	0
Jimmy Drake	Team Leader	0
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	6

Today's Activities:

- 0630 - Attended morning meetings.
- 0700 - Continued subsurface clearance activities under and around trees.
- 0830 - Current list of tree areas needing clearance is complete.
- 0830 - One UXO Team continued with target investigations.
- 0800 - 1200 - Josh Jenkins completed his annual medical physical.

Note: Jimmy Drake had the day off.

Summary: Completed and QC'd 56 targets. Located and remove to a safe holding area 4 - M1 Practice Mines with suspect live fuzes. These mines will be explosively vented during the next MEC disposal operation. One 2.36 inch Rocket left in place waiting to be investigated further using the x-ray unit.

- 1700 - Done for the week.
- 1700 - 1800 - Completed week ending reports, daily's, expense reports and time sheet.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning mid 40's. Afternoon in the late 60's.	None

SIGNATURE: Tim Mathisen

3/16/2007

page 1 of 1



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/16/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: UXO Sub-Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Joshua Jenkins	
John SPARK	
Hurley Davidson	
TARA VOLPE	
JEFF STEINWAND	

Meeting Conducted by:

Supervisor: _____

Manager: _____

JOB SAFETY ANALYSIS

Date: 3/16/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>____ Required</p> <p>____ Cold Work</p> <p>____ Hot Work</p> <p>____ Entry Permit</p> <p>____ All Conditions Met</p> <p>____ Signed Off when Complete</p> <p>____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>____ Special Purpose Gloves</p> <p>____ Tyvek Suit</p> <p>____ Acid Suit/Slicker Suit</p> <p>____ Rubber boots</p> <p>____ Mono Goggles (vented-non-vented)</p> <p>____ Face Shield</p> <p>____ Respirator</p> <p>____ Fresh Air</p> <p>____ Ear Protection</p> <p>____ Safety Harness</p> <p>____ Burning Goggles</p> <p>____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p>____ Current Inspection</p> <p>____ Proper Tools for the Job</p> <p>____ Good Tool Condition</p> <p>____ Qualifications</p> <p>____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>____ Other</p> <hr/> <p>ACCESS</p> <p>____ Scaffold (properly inspected)</p> <p>____ Ladder (Tied Off)</p> <p>____ Manliest</p> <p>____ Personnel Basket (Inspected & Approved)</p> <p>____ Operator training</p> <p>____ Special Provisions</p> <p>____ Other</p>	<p>WELDING</p> <p>____ Flashburns</p> <p>____ Combustibles</p> <p>____ Spark Containment</p> <p>____ Shields</p> <p>____ Grounding</p> <p>____ Water Hose</p> <p>____ Fire extinguisher</p> <p>____ Fire Blanket</p> <p>____ Fire Watch</p> <p>____ Sewer Covers</p> <p>____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>____ Barricades</p> <p>____ Signs</p> <p>____ Hole Cover</p> <p>____ Handrail</p> <p>____ Other</p> <hr/> <p>ELECTRICAL</p> <p>____ Locked and Tagged Out</p> <p>____ Try Start/Stop Switch</p> <p>____ GFCI Test</p> <p>____ Assured Grounding</p> <p>____ Extension Cord Inspection</p> <p>____ Other</p> <hr/> <p>LIFTING</p> <p>____ Forklift</p> <p>____ Cherry Picker</p> <p>____ Load Chart</p> <p>____ Angle</p> <p>____ Crane</p> <p>____ Chainfall</p> <p>____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>____ Condition of Equipment</p> <p>____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>____ Hot/Cold Surf or Mat</p> <p>____ Inadequate Lighting</p> <p>____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>____ Poor Access/Egress</p> <p>____ Sharp Objects</p> <p>____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>____ Chemical Burn Shin/Eyes</p> <p>____ Flammable</p> <p>____ Ingestion</p> <p>____ Inhalation</p> <p>____ Skin Contamination</p> <p>____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>____ Others Working Overhead</p> <p>____ Type of Work Others Doing</p> <p>____ <u>GEO Teams</u></p> <p>____ PPE Due to Other Work</p> <p>____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: March 19, 2007

DAY	S	<u>M</u>	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	<u>64</u>	Lo	<u>44</u>	
WIND	Sill	<u>Moderate</u>	High	<u>NW@3mph</u>	
HUMIDITY	Dry	<u>Moderate</u>	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Backhoe	1	Y	0
Fork Lift	1	Y	00
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	4	N	40
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM starting surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Preparatory meeting for Range 44 surface sweep

Initial inspection surface sweep of Range 44

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

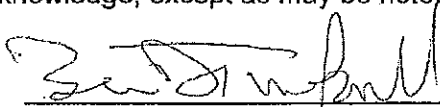
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/19/07, QC/UXOSO FADL dated 3/19/07, Tailgate Safety Meeting dated 03/19/07, JSA dated 03/19/07 Range 44 and MRS 16, Initial Phase Inspection Checklist for Range 44

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/19/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep 846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended morning meetings.
0700 - Team Begins Surface clearance operations on range 44.
0830 - One UXO Tech supporting GEO with target reacquire and fill-ins

Summary: Completed approximately 11 grids on range 44. Located and remove to a safe holding area 35ea - M73 35mm Sub Cal Rockets, 4 ea Dragon rocket motors, 1 ea M-48 Fuze. These items will be explosively vented during the next MEC disposal operation. 95 LBS MD removed.

1700 - Done for the day.
1700 - 1800 - Completed daily reports, expense reports and time sheet.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning upper 40's. Afternoon in the low 60's.	None

SIGNATURE: John Tortolano 3/19/2007 page 1 of 1



DAILY LOG	DATE	03	19	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA	PROJECT NO: 846075
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FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

0600: Prep for tailgate
 0630: Tailgate; weather, very foggy, caution while driving
 0700: Attended Prep meeting Range 44 surface sweep
 0745 Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.
 0815: TM starting surface sweep of Range 44
 0900: Checked on the Teams at Range 44 and GEO TMS working on MRS 16
 1000 Conducted QC of PDA data files
 1100 Conducted Initial Phase Inspection of Range 44 operations, no discrepancies noted.
 1430: Checked on Teams.
 1645: Secured MRS-16 and Range 44 for the day,
 1700: COB

-----Nothing Follows-----

VISITORS ON SITE:
None

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
None

WEATHER CONDITIONS:
Foggy and overcast most of the day

IMPORTANT TELEPHONE CALLS:
None

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE:

DATE: 03/19/07



JOB SAFETY ANALYSIS

Date: 3/18/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: J. Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/18/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Date: 3/18/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? NO
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate Range 44
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Repetative stress injuries		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/18/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>_____ Reflective vest near heavy equipment</p> <p><input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p>_____ Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/19/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear, Backhoe,

Other: Range 44 New site, check your surroundings; repetitive stress while using Schonstedts

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	
Harley Davidson	
JOHN SPARKS	
JEFF STEINWAND	
John Tostolano	
James DRAKE	
Colin Chang	
Mike Lightner	
TARA VOLPE	
Meeting Conducted by:	

Supervisor: _____

Manager: _____

Form QC-4

INITIAL PHASE INSPECTION CHECK LIST

TERC II - K.3

Contract No.: DACW 05-96-D-0011
Task Order No. 016
Fort Ord, California

Date: 3/19/2007

Title and No. of Technical Section: Draft Technical Memorandum, Surface Sweep, Range 44 Special Case Areas

Description and Location of Work Inspected: Surface Sweep, Range 44, Former FT Ord, CA

Reference Contract Drawings: Figures 1 and 2 (included in TM)

A. Key Personnel Present:

	<u>Name</u>	<u>Position</u>	<u>Company</u>
1)	Jack Tortolano	Lead UXO	Shaw
2)	Jimmy Drake	UXO Tech III	Shaw
3)	Clinton Huckins	OE Safety Specialist	USACE
4)	Bruce Tincknell	UXOQC/SO	Shaw

B. Materials being used are in strict compliance with the contract plans and specifications: Yes No

If not, explain: _____

C. Procedures and/or work methods witnessed are in strict compliance with the contract specifications: Yes No

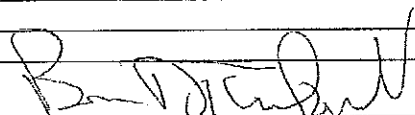
If not, explain: _____

D. Workmanship is acceptable: Yes No

State where improvement is needed: _____

E. Workmanship is free of safety violations: Yes No

If no, corrective action taken: _____



Contractor Quality Control Representative

DAILY QUALITY CONTROL REPORTDATE: March 20, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	64	Lo	44	
Skill	Moderate	High	NW@5mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
5	UXO	BY	Shaw	Fort Ord, Calif./UXO
	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Fork Lift	1	Y	00
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	4	N	40
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

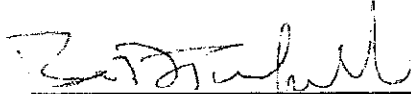
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/20/07, QC/UXOSO FADL dated 3/20/07, Tailgate Safety Meeting dated 03/20/07, JSA dated 03/20/07 Range 44 and MRS 16,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/20/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep	846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	0
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
0630 - Attended morning meetings.
0700 - Team continues Surface clearance operations on range 44.
0830 - One UXO Tech supporting GEO with target reacquire and fill-ins
1000-1400 Jimmy Drake takes annual physical and personal time the rest of the day.

Summary: Completed approximately 10 grids on range 44. Located and remove to a safe holding area 26ea - M73 35mm Sub Cal Rockets. These items will be explosively vented during the next MEC disposal operation
70 LBS MD removed.

1700 - Done for the day.
1700 - 1730 - Completed daily reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning upper 40's. Afternoon in the low 60's.	None



L6

DAILY LOG	DATE	03	20	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, overcast, possible rain, caution while driving</p> <p>0700 Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: TM starting surface sweep of Range 44</p> <p>0900: Checked on the Teams at Range 44 and GEO TMS working on MRS 16</p> <p>1430: Checked on Teams. QC'd sweep areas; sweep is to standards</p> <p>1645: Secured MRS-16 and Range 44 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Overcast morning; rain, heavy at times afternoon	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/20/07



JOB SAFETY ANALYSIS

Date: 3/20/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/20/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other _____

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 3/20/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate Range 44	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? NO New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
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Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Repetative stress injuries		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/20/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

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type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input 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type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input checked="" type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/20/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Backhoe,

Other: Range 44 repetitive stress while using Schonstedts, LOTS OF POISON OAK

ATTENDEES

NAME PRINTED	SIGNATURE
JOHN SPHAKS	
John Tortolano	
John Sphaks	
JEFF STEINWAND	
TARA VOLPE	
Harley Davidson	
Mike Lightner	
Colin Chung	

Meeting Conducted by:

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 21, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	65	Lo	47	
Still	Moderate	High	NW@5mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
5	UXO	BY	Shaw	Fort Ord, Calif./UXO
	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	4	N	40
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/21/07, QC/UXOSO FADL dated 3/21/07, Tailgate Safety Meeting dated 03/21/07, JSA dated 03/21/07 Range 44 and MRS 16,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/21/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep 846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
0630 - Attended morning meetings.
0700 - Team continues Surface clearance operations on range 44.
0730 - One UXO Tech supporting GEO with target reacquire and fill-ins

Summary: Completed approximately 12 grids on range 44. Located and remove to a safe holding area 49ea - M73 35mm Sub Cal Rockets. These items will be explosively vented during the next MEC disposal operation
75 LBS MD removed.

1700 - Done for the day.
1700 - 1800 - Completed daily reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None

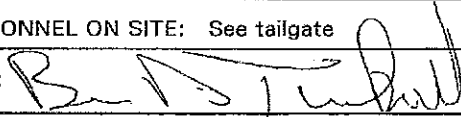
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning upper 40's. Afternoon in the low 60's.	None



L6

DAILY LOG	DATE	03	21	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, clear, cool</p> <p>0700 Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: TM starting surface sweep of Range 44</p> <p>0900: Checked on the Teams at Range 44 and GEO TMS working on MRS 16</p> <p>1430: Checked on Teams. QC'd sweep areas; sweep is to standards</p> <p>1645: Secured MRS-16 and Range 44 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>			
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: Overcast morning; then sunny and cool		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 03/21/07	



JOB SAFETY ANALYSIS

Date: 3/21/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas/ wet slippery conditions		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> <u>GEO Teams</u></p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Date: 3/21/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate Range 44	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Repetative stress injuries		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas; wet, muddy and slippery conditions		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures:		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> 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type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input checked="" type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/21/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: Wet, muddy, and slippery conditions

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
Joshua Jenkins	
JOHN SPARKS	
Harley Davidson	
JEFF STEWART	
James Drake	
TARA VOLPE	
Colin Chang	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 22, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	66	Lo	42	
Still	Moderate	High	NW@4mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
4	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	4	N	10
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

One Lane re-swept on range 44, USACE SO located two items that sweep team had missed; Shaw QC directed re-sweep.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/22/07, QC/UXOSO FADL dated 3/22/07, Tailgate Safety Meeting dated 03/22/07, JSA dated 03/22/07 Range 44 and MRS 16,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/22/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep 846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	0

Today's Activities:
0630 - Attended morning meetings.
0700 - Team continues Surface clearance operations on range 44.
0730 - One UXO Tech supporting GEO with target reacquire and fill-ins
0830 - 1230 One UXO Tech supporting BLM in avoidance role.

Summary: Completed approximately 5 grids on range 44. Located and remove to a safe holding area 45ea - M73 35mm Sub Cal Rockets, 1 ea fuze component. These items will be explosively vented during the next MEC disposal operation
Also 1 ea M72 LAWS rocket found and left in place. Disposal Operation scheduled for next week.

Low number of grids complete was due to high scrap density, short manning level, One person out sick, BLM support, and the USACE QA person found 2 items in completed sweep area. Shaw UXO/QC had team resweep the area in question.

65 LBS MD removed.
1700 - Done for the day.
1700 - 1830 - Completed daily reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning upper 30's. Afternoon in the low 60's.	None



L6

DAILY LOG	DATE	03	23	07
	NO.			
	SHEET	1 OF 1		

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA	PROJECT NO: 846075
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FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

0600: Prep for tailgate

0630: Tailgate; weather, clear, cool

0700 Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.

0730: TM starting surface sweep of Range 44

0900: Checked on the Teams at Range 44 and GEO TMS working on MRS 16

1430: Checked on Teams.

1445: While at Range 44 GPS'ing suspect MEC, USACE Safety Mr. Huckins brought to my attention the he has found 2 ea Sub cal rockets. He asked me if that lane had been swept and I informed him that it had been swept. He left the area and I called the team leader Mr. Drake over to the marked lane, showed him the items and directed him to re-sweep that lane. His team started the re-sweep.

1645: Secured MRS-16 and Range 44 for the day,

1700: COB

-----Nothing Follows-----

VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: Sunny and cool	IMPORTANT TELEPHONE CALLS: None

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: DATE: 03/23/07

JOB SAFETY ANALYSIS

Date: 3/22/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p>_____ Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment</p> <hr/> <p>TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p>_____ Noise</p> <p>_____ Poor Access/Egress</p> <p><input checked="" type="checkbox"/> Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/22/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
<u>John Testalano</u>	<u>[Signature]</u>
<u>JOHN SPARKS</u>	<u>[Signature]</u>
<u>Harley Davidson</u>	<u>[Signature]</u>
<u>JEFF STEINWARD</u>	<u>[Signature]</u>
<u>James Drake</u>	<u>[Signature]</u>
<u>Mike Lightner</u>	<u>[Signature]</u>
<u>TARA VOLPE</u>	<u>[Signature]</u>
<u>Colin Chung</u>	<u>[Signature]</u>

Meeting Conducted by: [Signature]

Supervisor: _____

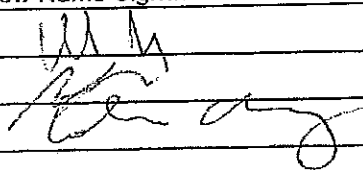
Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 3/22/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		<u>Supervisor's Initials</u>
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures: 		

JOB SAFETY ANALYSIS

Date: 3/22/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>_____ Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p>_____ Noise</p> <p><input checked="" type="checkbox"/> Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ GEO Teams</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: March 23, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	66	Lo	39	
Still	Moderate	High	NW@4mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
5	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	4	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	6
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

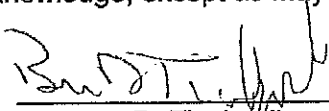
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/23/07, QC/UXOSO FADL dated 3/23/07, Tailgate Safety Meeting dated 03/23/07, JSA dated 03/23/07 Range 44 and MRS 16, FWV #TH-018 Range 44

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/23/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep	846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	6
Josh Jenkins	UXO tech I	0

Today's Activities:

0630 - Attended morning meetings.

0700 - Team continues Surface clearance operations on range 44.

0900-1500 - One UXO Tech supporting GEO with target reacquire and fill-ins

1300- Field work variance completed and implemented for target areas on range 44

Summary: Completed approximately 3 grids on range 44. Located and remove to a safe holding area 21ea - M73 35mm Sub Cal Rockets. These items will be explosively vented during the next MEC disposal operation

Low number of grids complete was due to high scrap density, short manning level, and starting to enter old target area, and the amount of subsurface anomalies within the thick ground cover. All hits must be investigated to insure no surface MD

100 LBS MD removed.

1700 - Done for the day.

1700 - 1800 - Completed daily reports and week ending reports

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	Field work variance signed and implemented
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning low 40's. Afternoon in the low 60's.	None



L6

DAILY LOG	DATE	03	23	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, foggy, cool</p> <p>0700 Watched the teams check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0730: TM starting surface sweep of Range 44</p> <p>0900: Checked on the Teams at Range 44 and GEO TMS working on MRS 16</p> <p>1000: Fire Dept Risk assessment Range 44 Demo on Tues 3/27/07</p> <p>1325 FWV # TH-018 in effect Range 44, All parties notified.</p> <p>1430: Checked on Teams.</p> <p>1500: Fire Dept can not support demo operations until 1300 hrs 3/27/03. Kevin notified BRAC of time change of demo operations</p> <p>1645: Secured MRS-16 and Range 44 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: FWV #TH-018 in effect
WEATHER CONDITIONS: Foggy in AM, then afternoon Sunny and warm	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/23/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep	846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
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Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	6
Josh Jenkins	UXO tech I	0

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0630 - Attended morning meetings.

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1300- Field work variance completed and implemented for target areas on range 44

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Low number of grids complete was due to high scrap density, short manning level, and starting to enter old target area, and the amount of subsurface anomalies within the thick ground cover. All hits must be investigated to insure no surface MD

100 LBS MD removed.

1700 - Done for the day.

1700 - 1800 - Completed daily reports and week ending reports

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	Field work variance signed and implemented
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning low 40's. Afternoon in the low 60's.	None



Field Work Variance No. TJ-018
Page 1 of 1

FIELD WORK VARIANCE

Project Name/Number Fort Ord / 348075 CTO/WAD CTO 18 / WAD 07
Applicable Document Technical Memorandum, Surface Sweep, Range 44 Date 03/22/07
Special Case Issues, Revision C

Problem Description:
Main target area is extremely saturated with MD, RRD and potential MEC. Maintaining the two inches and above criteria for all surface debris in main target area will slow progress through the area. Primary objective of surface sweep is to allow BLM safe access to this area.

Recommended solution:
Implement recommended revisions to the plan outlined below.

Impact on project and completed work:
Will allow completion of main target area faster than if two inches and above criteria for all surface debris is maintained.

Requested by Kevin Siemann

Recommended revisions to the plan:
Two inches and above criteria be resorted and only 35mm sub cal and 68mm rocket bodies, not fragments of MD or RRD, to be removed. Any MEC items encountered will be treated.

Clarification Minor Change Major Change

Affects Budget Yes No
Affects Schedule Yes No

Signature [Signature] Date 3/23/07
Reviewer

Shaw Approvals:
Signature [Signature] Date 3/23/07 Signature [Signature] Date 3/23/07
Project Manager

Signature [Signature] Date 3/23/07

USACE Approvals (if Major Change):
Signature [Signature] Date 3/22/07 Signature [Signature] Date 3/23/07
SE Safety Specialist USACE COM of FM



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 3/23/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: J. Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/23/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manilest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

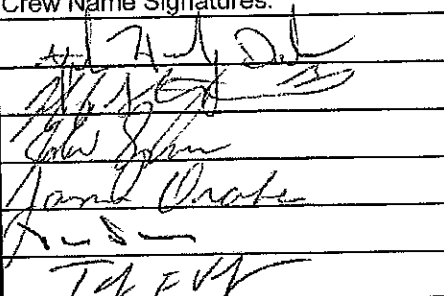
JOB SAFETY ANALYSIS

Date: 3/23/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate Range 44	JSA Prepared by: Bruce Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Repetative stress injuries		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas; rodent holes, burnt sagebrush Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Positive ID of MEC before movement Use of Dust Mask Water intake, stay hydrated Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures: 		

JOB SAFETY ANALYSIS

Date: 3/23/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/23/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear, Small tractor, towed array

Other: Emergency phone numbers

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Harley Davidson	<i>Harley Davidson</i>
JOHN SPARKS	<i>John Sparks</i>
James DRAKE	<i>James Drake</i>
VAL VALDEZ	<i>Val Valdez</i>
TARA VULPE	<i>Tara Vulpe</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 27, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	64	Lo	48	
WIND	Still	Moderate	High	NW@5mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
5	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	60
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	10
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16; Demolition operation at Range 44

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/28/07, QC/UXOSO FADL dated 3/28/07, Tailgate Safety Meeting dated 03/28/07, JSA dated 03/28/07 Range 44 and MRS 16, AND Demo Ops. Explosive usage report and explosive transportation documentation.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/28/07

Date



DAILY LOG	DATE	03	28	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated, discussed Demo safety</p> <p>0700 Demo equipment loaded and vehicle inspected. Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0900 Observed issued of demolition materials at ESL</p> <p>0915 Demo operations started Range 44, POM Fire Dept on Site briefed on operations, due to rain earlier in week no need to wet down the area prior to demo ops</p> <p>1030 Demo operations completed, all items destroyed; no problems</p> <p>1045: TM starting surface sweep of Range 44</p> <p>1300: Checked on the Teams at Range 44 and GEO TMS working on MRS 16</p> <p>1645: Secured MRS-16 and Range 44 for the day,</p> <p>1700: COB</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE	
WEATHER CONDITIONS: Cold, very windy		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>B. D. [Signature]</i>		DATE: 03/28/07	

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep		846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep		
Company Name: Shaw Environmental Inc.		
Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Today's Activities:		
0630 - Attended morning meetings.		
0700- 1030 Conducted demolition operations on range 44,		
1030 - Team continues Surface clearance operations on range 44.		
0730 - One UXO Tech supporting GEO with target reacquire and fill-ins		
Summary: Completed approximately 2 grids on range 44. Located and remove to a safe holding area 5ea - M73 35mm Sub Cal Rockets. These items will be explosively vented during the next MEC disposal operation.		
1ea bulk explosive item unfuzed and M72 LAWS rocket destroyed on 28 Mar 07.		
Low number of grids complete was due to high scrap density, working old target area, and the amount of subsurface anomalies within the thick ground cover. All hits must be investigated to insure no surface MD/MEC		
80 LBS MD removed.		
1700 - Done for the day.		
1700 - 1800 - Completed daily reports		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS
Jeff Anderson from DTSC on-site		
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS:
Morning high 30's. Afternoon in the low 60's.		None
SIGNATURE: John Tortolano		3/28/2007 page 1 of 1



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/28/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, Demo Operations Range 44, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

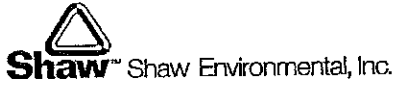
Other: DEMO OPERATIONS RANGE 44

ATTENDEES

NAME PRINTED	SIGNATURE
Harley Davidson	<i>[Signature]</i>
John SPRIGGS	<i>[Signature]</i>
JAMES DRAKE	<i>[Signature]</i>
Joshua Jenkins	<i>[Signature]</i>
JEFF STEINMANN	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
Colin Chang	<i>[Signature]</i>
Mark Busse	<i>[Signature]</i>
Meeting Conducted by: <i>[Signature]</i>	<i>[Signature]</i>

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Date: 3/28/2007
 Job#: 846075
 Permit#: _____
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/28/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

DEMOLITION OPERATIONS

Date: 3/28/2007
 Job#: 846475
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): RANGE 44; Former Fort Ord		
Required PPE: Mod "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Main Gate Range 44 Wind Direction: n/a Eucalyptus to Parker Evacuation Route: Flats	JSA Prepared by: B. Tincknell Are other crews in area?
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main Gate RNG 44	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Job Task (What are You Doing)	
UXO Demolition Operations		Audit the Job Audit Time:
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Fire		
MSD		
Traffic/Non-essential personnel		
Demolition shot misfire		Supervisor's Initials
Accidental detonation		
Recommended Action or Procedure		
Observe walking area/conditions		
No Demo operations in electrical storms or winds > 15 MPH		
2 ea 10 BC Fire extinguishers on and NO Smoking material within 100 ft		
Establish a Frag/Blast radius around each UXO to be disposed of		
Road blocks established, non-essential personnel kept out of Area		
Follow misfire procedures in SOP OE-005 Wait time 60 min		
Initiators and HE kept a minimum of 50 ft apart until needed. With proper storage and transport.		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/28/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <hr/> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input 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hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 3/28/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate Range 44	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Repetative stress injuries		
Possible severe weather in afternoon		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas; rodent holes, burnt sagebrush		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures:	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 3/28/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input 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SUPERVISOR/FOREMAN RECOMMENDATION:

MOTOR VEHICLE INSPECTION (TRANSPORTING HAZARDOUS MATERIALS)

(Read Instructions before completing this form.)

This form applies to all vehicles which must be marked or placarded in accordance with Title 49 CFR.

1. GOVERNMENT BILL OF LADING/TRANSPORTATION CONTROL NUMBER

SECTION I - DOCUMENTATION

2. CARRIER/GOVERNMENT ORGANIZATION

ORIGIN
a.

DESTINATION
b.

3. DATE/TIME OF INSPECTION

4. LOCATION OF INSPECTION

5. OPERATOR(S) NAME(S)

6. OPERATOR(S) LICENSE NUMBER(S)

7. MEDICAL EXAMINER'S CERTIFICATE*

8. *(X if satisfactory at origin)*

a. MILITARY HAZMAT ENDORSEMENT

d. ERG OR EQUIVALENT COMMERCIAL:

YES NO

9. CVSA DECAL DISPLAYED ON COMMERCIAL EQUIPMENT*

YES NO

b. VALID LEASE*

e. DRIVER'S VEHICLE INSPECTION REPORT*

a. TRUCK/TRACTOR

c. ROUTE PLAN

f. COPY OF 49 CFR PART 397

b. TRAILER

SECTION II - MECHANICAL INSPECTION

All items shall be checked on empty equipment prior to loading. Items with an asterisk shall be checked on all incoming loaded equipment.

10. TYPE OF VEHICLE(S)

Pick-up

11. VEHICLE NUMBER(S)

662-3584A

12. PART INSPECTED
(X as applicable)

ORIGIN
(1)
SAT UNSAT

DESTINATION
(2)
SAT UNSAT

ORIGIN
(1)
SAT UNSAT

DESTINATION
(2)
SAT UNSAT

COMMENTS
(3)

a. SPARE ELECTRICAL FUSES

k. EXHAUST SYSTEM

b. HORN OPERATIVE

l. BRAKE SYSTEM*

c. STEERING SYSTEM

m. SUSPENSION

d. WINDSHIELD/WIPERS

n. COUPLING DEVICES

e. MIRRORS

o. CARGO SPACE

f. WARNING EQUIPMENT

p. LANDING GEAR*

g. FIRE EXTINGUISHER*

q. TIRES, WHEELS, RIMS

h. ELECTRICAL WIRING

r. TAILGATE/DOORS*

i. LIGHTS AND REFLECTORS

s. TARPAULIN*

j. FUEL SYSTEM*

t. OTHER *(Specify)*

13. INSPECTION RESULTS *(X one)* ACCEPTED

REJECTED

(If rejected give reason under "Remarks". Equipment will be approved if deficiencies are corrected prior to loading.)

14. SATELLITE MOTOR SURVEILLANCE SYSTEM: *(X one)* ACCEPTED

REJECTED

15. REMARKS

16. INSPECTOR SIGNATURE *(Origin)*

KL Busse

17. INSPECTOR SIGNATURE *(Destination)*

KL Busse

SECTION III - POST LOADING INSPECTION

This section applies to Commercial and Government/Military vehicles. All items will be checked prior to release of loaded equipment and shall be checked on all incoming loaded equipment.

ORIGIN
(1)
SAT UNSAT

DESTINATION
(2)
SAT UNSAT

COMMENTS
(3)

18. LOADED IAW APPLICABLE SEGREGATION/COMPATIBILITY TABLE OF 49 CFR

19. LOAD PROPERLY SECURED TO PREVENT MOVEMENT

20. SEALS APPLIED TO CLOSED VEHICLE; TARPAULIN APPLIED ON OPEN EQUIPMENT

21. PROPER PLACARDS APPLIED

22. SHIPPING PAPERS/DD FORM 836 FOR GOVERNMENT VEHICLE SHIPMENTS

23. COPY OF DD FORM 626 FOR DRIVER

24. SHIPPED UNDER DOT EXEMPTION 868

25. INSPECTOR SIGNATURE *(Origin)*

KL Busse

26. DRIVER(S) SIGNATURE *(Origin)*

KL Busse

27. INSPECTOR SIGNATURE *(Destination)*

KL Busse

28. DRIVER(S) SIGNATURE *(Destination)*

KL Busse

INSTRUCTIONS

SECTION I - DOCUMENTATION

General Instructions.

All items (2 through 9) will be checked at origin prior to loading. Items with an asterisk (*) apply to commercial operators or equipment only. Only Items 2 through 7 are required to be checked at destination.

Items 1 through 5. Self explanatory.

Item 6. Enter operator's Commercial Driver's License (CDL) number or Military OF-346 License Number. CDL and OF-346 must have the HAZMAT and other appropriate endorsements IAW Part 383.

Item 7. *Enter the expiration date listed on the Medical Examiner's Certificate.

Item 8.a. APPLIES TO MILITARY OPERATORS ONLY. Military Hazardous Materials Certification. In accordance with applicable service regulations, ensure operator has been certified to transport hazardous materials.

b. *Valid Lease. Shipper will ensure a copy of the appropriate contract of lease is carried in all leased vehicles and is available for inspection. (Defense Transportation Regulation (DTR) requirement.)

c. Route Plan. Prior to loading any Hazard Class/Division 1.1, 1.2, or 1.3 (Explosives) for shipment, ensure that the operator possesses a written route plan in accordance with 49 CFR Part 397. Route Plan requirements for Hazard Class 7 (Radioactive) materials are found in 49 CFR 397.101.

d. Emergency Response Guidebook (ERG) or Equivalent. Commercial operators must be in possession of an ERG or equivalent document. Shipper will provide applicable ERG page(s) to military operators.

e. *Driver's Vehicle Inspection Report. Review the operator's Vehicle Inspection Report. Ensure that there are no defects listed on the report that would affect the safe operation of the vehicle.

f. Copy of 49 CFR Part 397. Operators are required by regulation to have in their possession a copy of 49 CFR Part 397 (Hazardous Materials Driving and Parking Rules). If military operators do not possess this document, shipper may provide a copy to operator.

Item 9. *Commercial Vehicle Safety Alliance (CVSA) Decal. Check to see if equipment has a current CVSA decal and mark applicable box. Vehicles without CVSA, check documentation of the last vehicle periodic inspection.

SECTION II - MECHANICAL INSPECTION

General Instructions.

All items (12.a. through 12.t.) will be checked on all incoming empty equipment prior to loading. All UNSATISFACTORY conditions must be corrected prior to loading. Items with an asterisk (*) shall be checked on all incoming loaded equipment. Unsatisfactory conditions that would affect the safe off-loading of the equipment must be corrected prior to unloading.

SECTION II (Continued)

Item 12.a. Spare Electrical Fuses. Check to ensure that at least one spare fuse for each type of installed fuse is carried on the vehicle as a spare or vehicle is equipped with an overload protection device (circuit breaker). (49 CFR 393.95)

b. Horn Operative. Ensure that horn is securely mounted and of sufficient volume to serve purpose. (49 CFR 393.81)

c. Steering System. The steering wheel shall be secure and must not have any spokes cracked through or missing. The steering column must be securely fastened. Universal joints shall not be worn, faulty or repaired by welding. The steering gear box shall not have loose or missing mounting bolts or cracks in the gear box mounting brackets. The pitman arm on the steering gear output shaft shall not be loose. Steering wheel shall turn freely through the limit of travel in both directions. All components of a power steering system must be in operating condition. No parts shall be loose or broken. Belts shall not be frayed, cracked or slipping. The power steering system shall not be leaking. (49 CFR 396 Appendix G)

d. Windshield/Wipers. Inspect to ensure that windshield is free from breaks, cracks or defects that would make operation of the vehicle unsafe; that the view of the driver is not obscured and that the windshield wipers are operational and wiper blades are in serviceable condition. Defroster must be operative when conditions require. (49 CFR 393.60, 393.78 and 393.79)

e. Mirrors. Every vehicle must be equipped with two rear vision mirrors located so as to reflect to the driver a view of the highway to the rear along both sides of the vehicle. Mirrors shall not be cracked or dirty. (49 CFR 393.80)

f. Warning Equipment. Equipment must include three bidirectional emergency reflective triangles that conform to the requirements of FMVSS No. 125. FLAME PRODUCING DEVICES ARE PROHIBITED. (49 CFR 393.95)

g. Fire Extinguisher. Military vehicles must be equipped with two serviceable fire extinguishers with an Underwriters Laboratories rating of 10 BC or more. (Commercial motor vehicles must be equipped with one serviceable 10 BC Fire Extinguisher). Fire extinguisher(s) must be located so that it is readily accessible for use and securely mounted on the vehicle. The fire extinguisher must be designed, constructed and maintained to permit visual determination of whether it is fully charged. (49 CFR 393.95)

h. Electrical Wiring: Electrical wiring must be clean and properly secured. Insulation must not be frayed, cracked or otherwise in poor condition. There shall be no uninsulated wires, improper splices or connections. Wires and electrical fixtures inside the cargo area must be protected from the lading. (49 CFR 393.28, 393.32, 393.33)

Shipping Manifest

EMERGENCY RESPONSE NUMBER

Date: 3/28/07

From: Ft Ord ESL

To: MRS-16, Ft Ord, CA

Page 1 of 1

Quantity	Description	Hazard Class	Identification Number	Packing Group
each	Charges Shaped w/o Detonator:	1.4S	UN0441	II
34 each	Detonator, Non-Electric for Blasting	1.4B	UN0225	II
X feet	Cord, Detonating, Flexible	1.4D	UN0065	II
feet	Cord Detonating Flexible	1.4D	UN0289	II
1 each	Charges, Demolition	1.1D	UN0048	II
feet	Articles Explosive NOS (None! Trunkline)	1.4D	UN0289	II

Consignee: Tim Mathisen

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Printed Name: Kirk Busse

Signature: 

EMERGENCY INSTRUCTIONS FOR MOTOR VEHICLE DRIVERS AND INITIAL RESPONDERS

The shipping manifest is behind this document

Date: 3/28/07

THIS TRUCK IS CARRYING DEMOLITION EXPLOSIVES

HAZZARD CLASS: 1.1D

UN ID NUMBER: See Shipping manifest

<p>IN CASE OF ACCIDENT/INCIDENT OR BREAKDOWN: Send for firemen, police, ambulance (call 911). Set brake and block vehicle to prevent moving. Place non-flame producing highway warning devices for traffic approaching from both directions. Do not attempt to tow loaded vehicle. Do not expose cargo to impact, sparks, smoking, flames, or heat of any kind.</p>	<p>FIRE FIGHTING METHODS: Fires may be fought until flames reach the cargo area (initiators are contained in the right side of the tool box and the explosives are contained in the day box or cargo area in the bed of the truck), at which time fireman and others will be withdrawn to 1200 feet. Water should be used for extinguishing fires. SPECIFIC HAZARDS FOR CARGO: Blast Explosion Fire Intense Heat Inhalation</p>
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<p>Emergency Phone Numbers: Police, Ambulance, Fire 911 Ft Ord Fire Dept 242-4700 Shaw Environmental</p>	<p>Prompt Notification will be given to: Corps of Engineers Additional Assistance NRC 1-800-424-8802 Chemtec 1-800-424-9300</p>
---	---

<p>Drivers Precautionary Statements. I will comply with all company rules and Federal, State, and local regulations. I will keep at least 600 feet from trucks loaded with other hazardous materials and a safe distance from other vehicles while operating over public roads. I will have a copy of the route plan and will use designated routes, avoiding congested residential and business routes. I will not permit unauthorized personnel to ride in or on the vehicle. I will maintain required surveillance and ensure subsequent drivers understand and follow surveillance procedures. I will not exceed the posted speed limit, and not exceed 25mph on unpaved roads. I have all documentation required for the shipment of hazardous materials.</p>	<p>Read the statement then place an X in each block. I will not allow smoking or use of flame, or spark producing equipment within 25 feet of the vehicle. I will select safe parking spaces at authorized stopping locations designated by the state and/or by the carrier. Ensuring that I am at least 5 feet off of the traveled part of the road, and 300 feet from public areas. I understand the nature of the cargo and actions to take in the event of an accident, incident, or fire. I will perform tire checks and vehicle safety checks every 2 hours or 100 miles. I will protect the public from the hazards contained in this vehicle. I will ensure that all hazardous material is transported in accordance with all applicable Federal, State, and local regulations. I will ensure that all subsequent drivers receive, read, understand and sign this form.</p>
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<p>Signature of Shipper Representative</p>	<p>Signature of First Driver</p> <p style="text-align: center;"><i>[Handwritten Signature]</i></p>
<p>Signature of Second Driver</p>	

Form M-11

EXPLOSIVES USAGE RECORD

Team Number: 1 Date: 3/28/07

Team Leader: Harley Davidson Project: RNG 44

EXPLOSIVES ISSUED			
Signature of Team Leader: <u>[Signature]</u>			
Item	Quantity	Lot Number	Checker's Initials
Charge Demo M112	1 ea	LOP 9/L021-003	JAT
Caps nonelectric	4 ea	131	JAT
Igniters	6 ea	143	JAT
Time Fuse	50 FT	EMB 93H002-107	JAT
EXPLOSIVES EXPENDED			
Signature of Team Leader: <u>[Signature]</u>			
Item	Quantity	Lot Number	Checker's Initials
Charge Demo M112	1 ea	LOP 9/L021-003	JAT
Caps nonelectric	4 ea	131	JAT
Igniters	5 ea	143	JAT
Time Fuse	50 FT	Emb 93H002-107	JAT
EXPLOSIVES RETURNED			
Signature of SUXOS: <u>[Signature]</u>			
Item	Quantity	Lot Number	Checker's Initials
Igniter	1 ea	143	JAT

[Signature]
UXO Supervisor

3/28/07
Date

Form M-2

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 1

SIZE AND WEIGHT: 3 lbs

TIME OF SHOT: 0900 - 1100

LOCATION: Range 44

DATE: 3/28/07

HOW MANY SHOTS: _____

SIZE AND WEIGHT: _____

TIME OF SHOT: _____

LOCATION: _____

DATE: _____

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:
 LOCATION FOR FIRE TRUCK: 43 gate 0900

CALLED:

TIME

FIRE DEPARTMENT:	242-7701	0700
FEDERAL POLICE:	242-7851	0700
CSU POLICE: (Non-Emergency)	655-0268	0705
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188	0707
BRAC	242-7909	0708
SAFETY OFFICE	242-6509	N/C 0710
BLM	394-8314 FORT ORD	0710
	FAX / 394-8346	
U.S. ARMY CORPS OF ENGINEERS	884-9925 / FAX 884-9030	0710
PUBLIC AFFAIRS OFFICE	242-6430 / FAX 242-5464	0715
PARK RANGER HEADQUARTERS	758-3604	0717
LAGUNA SECA RACEWAY	648-5117	N/C 0717
MONTEREY COMMUNICATIONS (non-emergency)	373-1259	0719
CSU PRESS RELATIONS	582-3653	0720
UNIFIED AIR POLLUTION CONTROL OF MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210	0721
EMERGENCY OPERATIONS CENTER ATTN: RICH SAVKO	242-5784 / FAX 242-7028	0725
SHAW ENVIRONMENTAL, INC.	883-0103 / FAX 883-0152	0728

DAILY QUALITY CONTROL REPORTDATE: March 29, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	67	Lo	32	
WIND	Still	Moderate	High	NW@4mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	60
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/29/07, QC/UXOSO FADL dated 3/29/07, Tailgate Safety Meeting dated 03/29/07, JSA dated 03/29/07 Range 44 and MRS 16, Ft Ord Weather Report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/29/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep 846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended morning meetings.
0700 - Team continues Surface clearance operations on range 44.
0730 - One UXO Tech supporting GEO with target reacquire and fill-ins

Summary: Completed approximately 8 grids on range 44. Located and remove to a safe holding area 10ea - M73 35mm Sub Cal Rockets, 1ea flare pellet. These items will be explosively vented during the next MEC disposal operation.

45 LBS MD removed.

1700 - Done for the day.
1700 - 1800 - Completed daily reports

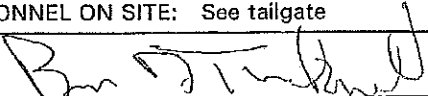
VISITORS ON SITE: Jeff Anderson from DTSC on-site	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: Morning high 30's. Afternoon in the high 60's.	IMPORTANT TELEPHONE CALLS: None



L6

DAILY LOG	DATE	03	29	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated,</p> <p>0700 Watched the team check their instruments at the test pit, Set on I level 4, All the units checked out.</p> <p>0715: TM starting surface sweep of Range 44</p> <p>1300: Checked on the Teams at Range 44 and GEO TMS working on MRS 16</p> <p>1645: Secured MRS-16 and Range 44 for the day,</p> <p>1700: COB</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE	
WEATHER CONDITIONS: See Weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 03/29/07	

Weather Conditions for ESPC1

Current time: March 29, 2007 - 16:38 PDT

Most Recent Observations at March 29, 2007 - 16:02 PDT

	16:02	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	67.0° F	69.0 at 14:02	32.0 at 7:02	69.0 at 14:02	32.0 at 7:02
Dew Point	41.9° F	41.9 at 16:02	18.0 at 2:02	41.9 at 16:02	18.0 at 2:02
Relative Humidity	40%	77 at 5:02	31 at 2:02	77 at 5:02	31 at 2:02
Wind Speed	4 mph from NW	5 at 15:02	1 at 0:02	7 at 17:02	1 at 22:02
Wind Gust	13 mph	14 at 15:02	2 at 6:02	23 at 19:02	2 at 6:02
Solar Radiation	925.0 W/m*m	1033.0 at 14:02	0.0 at 0:02	1033.0 at 14:02	0.0 at 22:02
Fuel Temperature	66.0° F	85.0 at 13:02	33.0 at 7:02	85.0 at 13:02	33.0 at 7:02
10 hr Fuel Moisture	13 gm	14 at 10:02	13 at 0:02	14 at 10:02	13 at 17:02
Battery voltage	14.50 volt	14.60 at 15:02	12.40 at 6:02	14.60 at 15:02	12.40 at 6:02



JOB SAFETY ANALYSIS

GEO Physics

Date: 3/29/2007
 Job#: 846075
 Permit#: _____
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 3/29/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Date: 3/29/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate Range 44	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? NO New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Repetative stress injuries		
Possible severe weather in afternoon		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas; rodent holes, burnt sagebrush		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures:		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p><input checked="" type="checkbox"/> Sharp Objects _____</p> <p>Other Cold stress _____</p> <p><input checked="" type="checkbox"/> UXO _____</p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves _____</p> <p><input checked="" type="checkbox"/> Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment _____</p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential _____</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential _____</p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route _____</p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/29/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, Demo Operations Range 44, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: **WARM WEATHER, STAY HYDRATED**

ATTENDEES

NAME PRINTED	SIGNATURE
John Sparks	
Joshua Jenkins	
James Drake	
Harley Davidson	
TARA VOLPE	
Mike Lightner	
Colin Cheng	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

DAILY QUALITY CONTROL REPORTDATE: March 30, 2007DAY

S	M	T	W	THUR	E	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	67	Lo	38	
WIND	Still	Moderate	High	NW@4mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	60
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

UXO TM surface sweep of Range 44 Completed, Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

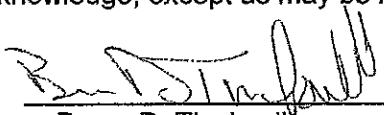
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 03/30/07, QC/UXOSO FADL dated 3/30/07, Tailgate Safety Meeting dated 03/30/07, JSA dated 03/30/07 Range 44 and MRS 16

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

03/30/07
Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal, Range 44 Surface Sweep 846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16, Range 44 Surface Sweep
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	8.5
Jack Tortolano	SUXOS	8.5
Jimmy Drake	Team Leader	8
Harley Davidson	Team Leader	8
John Sparks	UXO Tech I	8
Jeff Steinwand	UXO Tech II	8
Tara Volpe	UXO Tech II	8
Josh Jenkins	UXO tech I	8

Today's Activities:

0630 - Attended morning meetings.
0700 - Team continues Surface clearance operations on range 44.
0730 - One UXO Tech supporting GEO with target reacquire and fill-ins
1500 Clearance operations on range 44 complete.

Summary: Completed approximately 9 grids on range 44. Located and remove to a safe holding area 2ea - M73 35mm Sub Cal Rockets. These items will be explosively vented during the next MEC disposal operation.

12 LBS MD removed.

1500 - Done for the day.
1600 - 1700 - Completed weekly reports

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning high 30's. Afternoon in the high 60's.	None

SIGNATURE: John Tortolano

3/30/2007

page 1 of 1



L6

DAILY LOG	DATE	03	30	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16 and Range 44; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated,</p> <p>0700 Watched the team check their instruments at the test pit, Set on 1 level 4, All the units checked out.</p> <p>0715: TM starting surface sweep of Range 44</p> <p>1300: Checked on the Teams at Range 44 and GEO TMS working on MRS 16</p> <p>1330 Surface sweep completed, TM cleaning up range and filling ruts on road</p> <p>1445: Secured MRS-16 and Range 44 for the day,</p> <p>1500: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: See Weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 03/30/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 03/30/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Range 44 Former Fort Ord, Ca. and MRS 16

Type of Work: UXO Surface Sweep, Demo Operations Range 44, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: **WARMER WEATHER, STAY HYDRATED**

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	
John SPARKS	
JEFF STEINWAND	
TARA VOLPE	
John Kortelous	
JAMES DRAKE	
Mike Lightner	
Harley Davidson	

Meeting Conducted by:

Supervisor:

Manager:



JOB SAFETY ANALYSIS

GEO Physics

Date: 3/30/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		<u>Supervisor's Initials</u>
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 3/30/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Range 44 Surface Sweep

Date: 3/30/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

Location of Job (Unit/Location on Project): Range 44 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: Bruce Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
	Assembly Point: Main gate Range 44	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Repetative stress injuries		
Possible severe weather in afternoon		
Recommended Action or Procedure		
Observe walking areas; rodent holes, burnt sagebrush		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Change grip on schonstedt, change hands, take breaks and flex fingers and arms		
Crew Name Signatures:	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

John Crane

JOB SAFETY ANALYSIS

Date: 3/30/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tinncknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p>_____ Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p>_____ Noise</p> <p>_____ Poor Access/Egress</p> <p><input checked="" type="checkbox"/> Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p style="padding-left: 20px;">Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: April 3, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER

Sunny	Clear	Overcast	Rain	Fog
Hi	66	Lo	47	
Still	Moderate	High	NW@7mph	
Dry	Moderate	High		

TEMP: H/L

WIND

HUMIDITY

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	5

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS 16 Grid C3A2B3, False positive investigation in Grid C3A3C6; Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 04/03/07, QC/UXOSO FADL dated 04/03/07, Tailgate Safety Meeting dated 04/03/07, JSAs dated 04/03/07 Anomaly excavation and GEO, Ft Ord weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/03/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	0
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - On site. Attended morning meetings.
0700 - One UXO Tech II supporting the Geo group.
0700 - 1130 - One UXO Team conducting target reacquisition investigations.
1215 - One UXO Team continuing with target investigations in grid C3A2B3. An UXO Team is using a backhoe to investigate false/positive targets identified in grid C3A3C6.

Summary: Investigated 27 anomalies in grid C3A2B3. No MEC encountered. The Team using the backhoe dug 13 targets and did not located any MEC or MEC scrap. The weight of MEC scrap collected in grid C3A2B3 is recorded in the PDA.

1700 - Secured field operations.
1730 - 1800 - Performed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning low 40's. Afternoon in the low 60's.	None



L6

DAILY LOG	DATE	04	03	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated; very dry conditions speed on range roads and dust</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0715: TM starting anomaly excavation MRS 16 Grid C3A2B3</p> <p>0900 Observed anomaly excavation and dig checks with Schoenstedts</p> <p>1230: Escorted backhoe to site, one dig TM starting excavation of false positive anomalies in Grid C3A3C6</p> <p>1500 Checked on the dig Team and GEO TMS working on MRS 16</p> <p>1445: Secured MRS-16 and Range 44 for the day,</p> <p>1500: COB</p> <p style="text-align: center; border-top: 1px dashed black;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: See Weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 04/04/07

Weather Conditions for RTGC1

Current time: April 4, 2007 - 6:44 PDT

Most Recent Observations at April 4, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	47.0° F	50.0 at 3:51	47.0 at 0:51	66.0 at 13:51	43.0 at 7:51
Dew Point	45.6° F	46.6 at 4:51	40.5 at 0:51	50.2 at 14:51	38.9 at 21:51
Relative Humidity	95%	95 at 4:51	77 at 3:51	95 at 6:51	45 at 13:51
Wind Speed	3 mph from SE	8 at 3:51	2 at 4:51	12 at 14:51	1 at 8:51
Wind Gust	7 mph	23 at 4:51	6 at 0:51	23 at 4:51	4 at 9:51
Pressure	29.04 in	29.05 at 0:51	29.00 at 3:51	29.05 at 23:51	28.98 at 6:51
Sea Level Pressure	29.57 in	29.58 at 0:51	29.53 at 3:51	29.58 at 23:51	29.51 at 17:51
Altimeter	29.56 in	29.57 at 0:51	29.52 at 3:51	29.57 at 23:51	29.50 at 6:51
Solar Radiation	5.0 W/m*m	5.0 at 5:51	0.0 at 0:51	1248.0 at 13:51	0.0 at 20:51
Fuel Temperature	46.0° F	49.0 at 3:51	44.0 at 2:51	76.0 at 13:51	41.0 at 6:51
10 hr Fuel Moisture	15 gm	15 at 5:51	10 at 0:51	18 at 6:51	6 at 15:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 1:51	13.00 at 9:51	12.30 at 6:51



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/3/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/2/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/3/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 4/3/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/03/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: **WATCH FOR EXCLUSION ZONE INVASIONS; DUST OBSERVE SPEED ON RANGE ROADS, GO SLOW!!!!!!!!!!**

ATTENDEES

NAME PRINTED	SIGNATURE
Jim Mathison	<i>Jim Mathison</i>
John Sparks	<i>John Sparks</i>
Hurley Davidson	<i>Hurley Davidson</i>
James Drake	<i>James Drake</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
TARA VOLPE	<i>TARA VOLPE</i>
JEFF STEINWAND	<i>JEFF STEINWAND</i>
Colin Chang	<i>Colin Chang</i>

Meeting Conducted by: _____

DAILY QUALITY CONTROL REPORT

DATE: April 4, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	68	Lo	47	
WIND	Still	Moderate	High	NW@10mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	5

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS 16 Grid C3A2B3, False positive investigation in Grid C3A3C6; Schoenstedts set on level 4; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Final inspection Range 44,

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 04/04/07, QC/UXOSO FADL dated 04/04/07, Tailgate Safety Meeting dated 04/04/07, JSAs dated 04/04/07 Anomaly excavation and GEO, Ft Ord weather report; Final inspection report Range 44

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/04/07

Date



L6

DAILY LOG	DATE	04	04	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, warm stay hydrated; very dry conditions speed on range roads and dust</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0715: TM starting anomaly excavation MRS 16 Grid C3A2B3 and C3A3C6</p> <p>0900 QC Final inspection Range 44</p> <p>0945 Observed anomaly excavation and dig checks with Schoenstedts</p> <p>1000: TM completed excavation of false positive anomalies in Grid C3A3C6</p> <p>1500 Checked on the dig Team and GEO TMS working on MRS 16</p> <p>1445: Secured MRS-16 and Range 44 for the day,</p> <p>1500: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: See Weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>B. D. [Signature]</i>	DATE: 04/04/07



FINAL INSPECTION CHECKLIST (PART I)

TERC II - K 4.3

Contract No.: DACW05-96-D-0011
Task Order No. 016
Fort Ord, California

Project No. SH6675

Date: 4/4/07

WAD No. 07

Project / Area of Inspection: Range 44

A. Definable Features of Work:

Status of Inspection:

Surface Slopes

I hereby certify, that to the best of my knowledge and belief, that the work inspected is complete and all materials and equipment used and work performed were completed in accordance with plans submitted and approved.

Tom Th...
Contractor Quality Control Systems Manager

B. Final Acceptance is Approved, Subject to the Correction of the Punchlist Items Below:

None



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/4/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		<u>Supervisor's Initials</u>
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

JSA # _____

L19



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/4/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/4/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
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 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/04/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: **I-PODS AND OTHER PERSONAL LISTENING DEVICES NOT AUTHORIZED FOR USE**

ATTENDEES

NAME PRINTED	SIGNATURE
JOHN SPITAN S	
JEFF STEINWARD	
Joshua Jenkins	
LIM MATHISON	
James Drake	
TARA VALPE	
Colin Spang	
Mike Lightner	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Anomaly Reacquire/Fill ins MRS-16.	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	0
Jimmy Drake	Team Leader	10
Harley Davidson	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - On site. Attended morning meetings.

0700 - One UXO Team continuing with target investigations in grid C3A2B3. Another UXO Team continuing to use a backhoe to investigate false/positive targets identified in grid C3A3C6.

Approx. - 1000 - Target activities in grid C3A3C6 have been completed. No scrap of any kind was encountered.

1420 - The Corps Safety Rep, Clinton Huckins directed us to use only the EM-61 to QC excavated anomalies. Previously we were using the EM-61 and the Schonstedt to QC each excavation as directed by the client.

Summary: Investigated 14 anomalies in grid C3A3C6, 24 in grid C3A2B3, and 22 in grid C3A2B4. One M9 Rifle Grenade (main body section only) was located. The body of this M9 Rifle Grenade contains a small amount of HE. The M9 is held in safe holding area waiting disposal during the next MEC venting operation.

1700 - Done for the week. Job will be shut down until April 10 due to most taking home leave.

1730 - 1800 - Completed week ending reports and daily's.

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<p>VISITORS ON SITE:</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS</p>
<p>WEATHER CONDITIONS:</p> <p>Morning low 40's. Afternoon in the low 60's.</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>

Weather Conditions for RTGC1

Current time: April 4, 2007 - 15:59 PDT

Most Recent Observations at April 4, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	58.0° F	68.0 at 14:51	47.0 at 0:51	68.0 at 14:51	47.0 at 23:51
Dew Point	45.1° F	53.1 at 14:51	36.7 at 7:51	53.1 at 14:51	36.7 at 7:51
Relative Humidity	62%	95 at 4:51	44 at 13:51	95 at 4:51	44 at 13:51
Wind Speed	10 mph from W	10 at 15:51	1 at 13:51	12 at 16:51	1 at 13:51
Wind Gust	16 mph	23 at 4:51	6 at 0:51	23 at 4:51	6 at 23:51
Pressure	28.98 in	29.05 at 0:51	28.98 at 15:51	29.05 at 23:51	28.98 at 15:51
Sea Level Pressure	29.50 in	29.58 at 0:51	29.50 at 14:51	29.58 at 23:51	29.50 at 14:51
Altimeter	29.50 in	29.57 at 0:51	29.50 at 15:51	29.57 at 23:51	29.50 at 15:51
Solar Radiation	455.0 W/m*m	1134.0 at 12:51	0.0 at 0:51	1134.0 at 12:51	0.0 at 20:51
Fuel Temperature	62.0° F	74.0 at 11:51	44.0 at 2:51	74.0 at 11:51	44.0 at 2:51
10 hr Fuel Moisture	7 gm	15 at 5:51	6 at 14:51	15 at 5:51	6 at 16:51
Battery voltage	12.90 volt	13.00 at 9:51	12.30 at 6:51	13.00 at 9:51	12.30 at 6:51

DAILY QUALITY CONTROL REPORTDATE: April 5, 2007DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP:
H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	68	Lo	47	
Still	Moderate	High	NW@10mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
0	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
1	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	2	Y	10
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

No FADL, See Tailgate

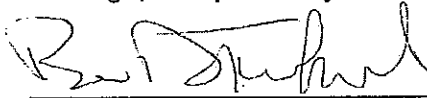
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

Tailgate Safety Meeting dated 04/05/07, JSAs dated 04/05/07 GEO,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/05/07

Date



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment, EM-61 Gear,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner Colin Chagny	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/5/2007
 Job#: 846075
 Permit#: _____
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/5/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> <u>GEO Teams</u></p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input checked="" type="checkbox"/> Other</p> <p><input type="checkbox"/> UXO Intrusive</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: April 9, 2007DAY S M T W THUR F SUSACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>66</u>	Lo	<u>44</u>	
Still	<u>Moderate</u>	High	<u>NW@10mph</u>	
Dry	<u>Moderate</u>	High		

TEMP:
H/L

WIND

HUMIDITY

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
0	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
1	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	2	Y	10
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

No FADL, See Tailgate

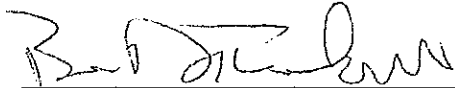
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

Tailgate Safety Meeting dated 04/09/07, JSAs dated 04/09/07 GEO.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/09/07

Date



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/09/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other:

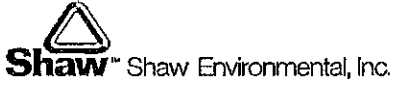
ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner	
Colin Chardy	
Sasha Jenkins	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/9/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		<u>Supervisor's Initials</u>
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/9/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: April 10, 2007

DAY	S	M	<u>T</u>	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP:
H/L

WIND

HUMIDITY

<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>66</u>	Lo	<u>45</u>	
Still	<u>Moderate</u>	High	<u>NW@8mph</u>	
Dry	Moderate	<u>High</u>		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
4	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	6	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	10
EM-61 MK 2 A	4	N	20
Tractor	1	Y	10
John Deere 310 Backhoe	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation Grid C3A2B4; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Excavations will be checked with EM 61, no checks required with Schonstedts, 1 UXO Tech III (James Drake) off due to medical conditions

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/10/07, UXOSO FADL 4/10/07, Tailgate safety Meeting dated 04/010/07, JSAs dated 04/10/07 GEO and UXO, FT Ord weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/10/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Anomaly Reacquire and Investigation.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	6
Marc Isabell	Team Leader	10
John Sparks	UXO Tech I	0
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - On site. Attended morning meetings.

0700 - One UXO Tech supporting the Geo's with target reacquisition. One UXO Team continuing to investigate reacquired anomalies.

1100 -1200 - I attended project progress meeting at the Corp office.

1200 - 1300 - The entire Ft. Ord crew attended the monthly safety council meeting.

Summary: UXO Team investigated and QC'd 60 targets located in grid C3A2B4. One M73 - 35mm sub-caliber Rocket was located and removed to a safe holding area. This 35mm is considered UXO since it appears to contain live flash powder and primer.

1700 - Secured.

1700 - 1800 - Completed the usual daily reports.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning mid 40's. Afternoon in the low 60's.

None

SIGNATURE: Tim Mathisen

4/10/2007

page 1 of 1



L6

DAILY LOG	DATE	04	10	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; weather, warm stay hydrated; very dry conditions speed on range roads and dust 0700 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out. 0715: TM starting anomaly excavation MRS 16 Grid C3A2B4 0730 James Drake returned to clinic, Health resources, problem with physical, needs rechecked 0945 Observed anomaly excavation and dig checks with Schoenstedts 1200-1300 Attended FT Ord Safety Council meeting 1330 James Drake returned from clinic, Health resources does not want him working until medical conditions are remedied. 1400 Advised by Kevin that we are no longer checking hole with Schoenstedts, all digs checked with EM 61 1500 Checked on the dig Team and GEO TMS working on MRS 16 1645: Secured MRS-16 and Range 44 for the day, 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: See Weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 04/10/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/10/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: 200 hundred feet between work crews

ATTENDEES

NAME PRINTED	SIGNATURE
JAMES DRAKE	<i>James Drake</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
Jim Mathisec	<i>Jim Mathisec</i>
Joshua Salkins	<i>Joshua Salkins</i>
TARA VOLPE	<i>Tara Volpe</i>
Mike Lightner	<i>Mike Lightner</i>
Colin Chang	<i>Colin Chang</i>
CHUCK NUCUM	<i>Chuck Nucum</i>

Meeting Conducted by: *Ben Steinwand*

Supervisor:

Manager:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/10/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Possible severe weather in afternoon		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/10/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/10/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
<i>James Drake</i>	<i>James Drake</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

JOB SAFETY ANALYSIS

Date: 4/10/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: April 11, 2007 - 6:47 PDT

Most Recent Observations at April 11, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	47.0° F	50.0 at 0:51	46.0 at 1:51	66.0 at 12:51	45.0 at 6:51
Dew Point	44.5° F	45.4 at 0:51	36.8 at 3:51	46.6 at 23:51	35.2 at 11:51
Relative Humidity	91%	91 at 4:51	70 at 3:51	91 at 4:51	33 at 12:51
Wind Speed	8 mph from SSW	11 at 0:51	7 at 3:51	16 at 19:51	1 at 7:51
Wind Gust	-	22 at 0:51	15 at 3:51	26 at 19:51	6 at 7:51
Pressure	29.00 in	29.04 at 0:51	29.00 at 3:51	29.13 at 8:51	29.00 at 3:51
Sea Level Pressure	29.53 in	29.57 at 0:51	29.53 at 5:51	29.65 at 8:51	29.53 at 5:51
Altimeter	29.52 in	29.56 at 0:51	29.52 at 3:51	29.65 at 8:51	29.52 at 3:51
Solar Radiation	2.0 W/m ²	2.0 at 5:51	0.0 at 0:51	1287.0 at 13:51	0.0 at 6:51
Fuel Temperature	46.0° F	48.0 at 0:51	44.0 at 3:51	80.0 at 12:51	42.0 at 6:51
10 hr Fuel Moisture	14 gm	14 at 5:51	11 at 2:51	15 at 6:51	6 at 13:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 1:51	13.00 at 8:51	12.30 at 6:51

DAILY QUALITY CONTROL REPORTDATE: April 11, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP:
H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	58	Lo	44	
Still	Moderate	High	NW@10mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
5	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	10
EM-61 MK 2 A	4	N	30
Tractor	1	Y	10
John Deere 310 Backhoe	1	Y	5

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

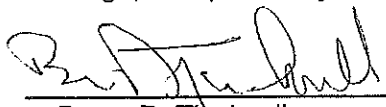
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

1 UXO Tech III (James Drake) off due to medical conditions

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/11/07, UXOSO FADL 4/11/07, Tailgate safety Meeting dated 04/011/07, JSAs dated 04/11/07 GEO and UXO, FT Ord weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/11/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. **846075**
Field Activity: Anomaly Reacquire and Investigation.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	0
Marc Isabell	Team Leader	10
John Sparks	UXO Tech I	0
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:
Note: Jimmy Drake attending doctor appointments all day and John Sparks on leave until this coming Monday.
0630 - On site. Attended morning meetings.
0700 - One UXO Tech supporting the Geo's with target reacquisition. One UXO Team continuing to investigate reacquired anomalies.
0800 - 1615 - One UXO Tech supporting BLM activities.

Summary: Performed target investigation operations in 7 different grids. Investigated a total of 100 targets and no MEC was discovered.

1700 - Field activities done for the day.
1730 -1800 - Daily reports were completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Light to heavy rain in the morning hours. Morning mid 40's. Afternoon in the late 50's.	None



L6

DAILY LOG	DATE	04	11	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; weather, colds and very wet</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0715: TM starting anomaly excavation MRS with back hoe</p> <p>0730 James Drake returned to clinic, Health resources, problem with physical, needs rechecked</p> <p>0845 Observed anomaly excavation and dig checks with Schoenstedts</p> <p>1000 QC'd 166 anomaly packets</p> <p>1430 James Drake returned from clinic, Health resources does not want him working until medical conditions are remedied.</p> <p>1500 Checked on the dig Team and GEO TMS working on MRS 16</p> <p>1645: Secured MRS-16 and Range 44 for the day,</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: See Weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 04/11/07

Weather Conditions for RTGC1

Current time: April 12, 2007 - 8:26 PDT

Most Recent Observations at April 12, 2007 - 7:51 PDT

	7:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	46.0° F	49.0 at 1:51	45.0 at 6:51	58.0 at 15:51	45.0 at 6:51
Dew Point	38.2° F	44.0 at 2:51	38.2 at 7:51	50.6 at 13:51	38.2 at 7:51
Relative Humidity	74%	86 at 2:51	74 at 7:51	94 at 10:51	74 at 7:51
Wind Speed	8 mph from WNW	16 at 5:51	8 at 7:51	19 at 17:51	5 at 10:51
Wind Gust	21 mph	32 at 5:51	19 at 0:51	37 at 17:51	10 at 9:51
Pressure	29.07 in	29.07 at 0:51	29.05 at 4:51	29.07 at 0:51	29.00 at 8:51
Sea Level Pressure	29.60 in	29.60 at 7:51	29.58 at 4:51	29.60 at 7:51	29.52 at 15:51
Altimeter	29.59 in	29.59 at 0:51	29.57 at 4:51	29.59 at 0:51	29.52 at 8:51
Solar Radiation	54.0 W/m*m	54.0 at 7:51	1.0 at 0:51	1167.0 at 14:51	0.0 at 20:51
Fuel Temperature	43.0° F	47.0 at 0:51	43.0 at 7:51	64.0 at 15:51	43.0 at 7:51
10 hr Fuel Moisture	15 gm	16 at 0:51	15 at 6:51	33 at 12:51	0 at 9:51
Battery voltage	12.30 volt	12.50 at 0:51	12.30 at 6:51	13.00 at 10:51	12.30 at 8:51



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: BIKE RACERS!!!!!!!!!!!!!!!!!!!!11

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark Isabel</i>
Jim Mathison	<i>Jim Mathison</i>
Joshua Jeffers	<i>Joshua Jeffers</i>
JEFF STEINWARD	<i>Jeff Steinward</i>
John Tostolova	<i>John Tostolova</i>
Mike Lightner	<i>Mike Lightner</i>
Colin [unclear]	<i>Colin [unclear]</i>
TARA VOLPE	<i>TARA VOLPE</i>

Meeting Conducted by: *B. D. Fenwick*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/11/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen						
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">New:</td> <td style="width: 15%;"></td> <td style="width: 70%;"></td> </tr> <tr> <td>Revised:</td> <td style="text-align: center;">X</td> <td></td> </tr> </table>	New:			Revised:	X	
	New:							
Revised:	X							
Assembly Point: Main gate MRS-16								
Job Task (What are You Doing)		Audit the Job Audit Time:						
OE Sub-surface Clearance Operations								
Potential Hazards		Supervisor's Comments						
Lifting								
Slip, Trip, and Falls								
Cuts and abrasions								
Poison oak								
UXO								
Dust								
Heavy equipment operations								
Driving on/off range. Off range as posted. On range 5 - 10 MPH								
Recommended Action or Procedure			Supervisor's Initials					
Observe walking areas								
Proper lifting technique, weight limit of 60 lbs								
Wear work gloves								
Mod "D" PPE, Clean PPE/Work boots with alcohol								
Use of Dust Mask								
Water intake, stay hydrated								
Hard hats and reflective vest when spotting for heavy equipment								
Eye contact with equipment operator								
Crew Name Signatures:								
<i>Mark Deahle</i>	<i>[Signature]</i>							
<i>Tim Mathisen</i>								
<i>[Signature]</i>								
<i>[Signature]</i>								
<i>[Signature]</i>								
<i>[Signature]</i>								

JOB SAFETY ANALYSIS

Date: 4/11/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/11/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Possible severe weather in afternoon Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/11/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

The Shaw Group Inc.

440451 Bruce D. Tincknell

INVOICE		DESCRIPTION	GROSS	DEDUCTIONS	AMOUNT PAID
NUMBER	DATE				
EXP033007	03/30/07		1,175.30		1,175.30
TOTALS			\$ 1,175.30	\$	\$ 1,175.30



THE SHAW GROUP INC.
4171 ESSEN LANE
BATON ROUGE LA 70809

Advice Number: 00226632

Advice Date: 04/13/07

BANK NO.	NAME OF BANK	ACCOUNT NUMBER	AMOUNT
122000661		10740-06929	*****1,175.30

Bruce D. Tincknell
8786 Betelgeuse Way
San Diego CA 92126
Bruce.Tincknell@shawgrp.com

NON-NEGOTIABLE

DAILY QUALITY CONTROL REPORT

DATE: April 12, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	58	Lo	45	
WIND	Still	Moderate	High	NW@18mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	10
EM-61 MK 2 A	4	N	30
Tractor	1	Y	10
John Deere 310 Backhoe	1	Y	2

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

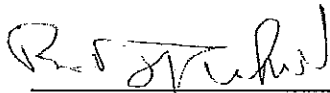
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Access to work site hindered by bike race, numerous pauses in work to due to exclusion zone violations by bike racers.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/12/07, UXOSO FADL 4/12/07, Tailgate safety Meeting dated 04/12/07, JSAs dated 04/12/07 GEO and UXO, FT Ord weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

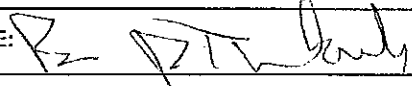
04/12/07

Date



DAILY LOG	DATE	04	12	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed routes of bike race</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0715: TM starting anomaly excavation MRS</p> <p>0900 QC'd 86 anomaly packets</p> <p>1645: TM Escorted back to office due to bike race</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: See Weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: 	DATE: 04/12/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Anomaly Reacquire and Investigation.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	0
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - One UXO Tech supporting the Geo's with target reacquisition. One UXO Team continuing to investigate reacquired anomalies.

Summary: Performed target investigation operations in 3 different grids. Investigated a total of 65 targets and no MEC was discovered. It was slow going today while investigating targets because the UXO dig team had to pause numerous times to allow bicyclists to pass through and beyond the exclusion area.

1700 - Done for the day. Crew had to be escorted by police from MRS-16 to Giggling Rd. There is a bicycle race on the roads leading around MRS -16. All vehicle traffic must be escorted into and out of MRS-16 until after work hours this Friday.

1730 - 1830 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning mid 40's. Afternoon in the late 50's.	None

Weather Conditions for RTGC1

Current time: April 12, 2007 - 16:41 PDT

Most Recent Observations at April 12, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	54.0° F	55.0 at 14:51	45.0 at 6:51	55.0 at 16:51	45.0 at 6:51
Dew Point	42.5° F	44.0 at 2:51	38.2 at 7:51	48.6 at 16:51	38.2 at 7:51
Relative Humidity	65%	86 at 2:51	61 at 11:51	87 at 21:51	61 at 11:51
Wind Speed	19 mph from WNW	20 at 13:51	8 at 7:51	20 at 13:51	8 at 7:51
Wind Gust	34 mph	34 at 15:51	16 at 8:51	37 at 17:51	16 at 8:51
Pressure	29.02 in	29.07 at 0:51	29.02 at 14:51	29.07 at 0:51	29.00 at 16:51
Sea Level Pressure	29.54 in	29.60 at 7:51	29.54 at 14:51	29.60 at 7:51	29.52 at 16:51
Altimeter	29.54 in	29.59 at 0:51	29.54 at 14:51	29.59 at 0:51	29.52 at 16:51
Solar Radiation	1147.0 W/m ²	1296.0 at 13:51	1.0 at 0:51	1296.0 at 13:51	0.0 at 20:51
Fuel Temperature	60.0° F	62.0 at 12:51	43.0 at 7:51	62.0 at 12:51	43.0 at 7:51
10 hr Fuel Moisture	10 gm	16 at 0:51	10 at 14:51	16 at 21:51	10 at 14:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 6:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/12/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/12/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		
Mark Small		
B. Tincknell		
Tom K. P.		
James Drake		



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/12/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range,

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: **MORE BIKE RACERS!!!!!!!!!!!!!!!!!!!!!!**

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Salans	
Mark ISABELL	Mark Isbell
JEFF STEINWAND	
John Costolano	
TARA VOLPE	
JAMES DRAKE	James Drake
Mike Lightner	
Colin Conway	

Meeting Conducted by:

DAILY QUALITY CONTROL REPORT

DATE: April 13, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	---	---	------	----------	---

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi 58	Lo 37			
WIND	Still	Moderate	High	NW@9mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	4	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	0	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16; GEO acquiring and reacquiring targets at MRS-16;

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

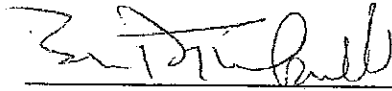
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Access to work site hindered by bike race, numerous pauses in work to due to exclusion zone violations by bike racers.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/13/07, UXOSO FADL 4/13/07, Tailgate safety Meeting dated 04/13/07, JSAs dated 04/13/07 GEO and UXO,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist


04/13/07

Date



DAILY LOG	DATE	04	13	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed routes of bike race</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0715: TM starting anomaly excavation MRS</p> <p>0830 In processed new UXO personnel</p> <p>1645: TM Escorted back to office due to bike race</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
<p>VISITORS ON SITE:</p> <p>NONE</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>NONE</p>
<p>WEATHER CONDITIONS:</p> <p>Partly cloudy, 30 – 50 degree</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: 	DATE: 04/13/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Anomaly Reacquire and Investigation.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	0
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:

0630 - Attended morning meetings.

0700 - 1500 - One UXO Tech supporting the Geo's with target reacquisitions. One UXO Team continuing to investigate reacquired anomalies.

Summary: UXO Team investigated anomalies in grid C3A2B4. A total of 63 targets were investigated and QC'd. Same type of field operations as yesterday due to the Bicycle race. No MEC encountered.

1700 - Secured for the day.

1730 1800 - Completed daily's and week ending reports.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning mid 30's. Afternoon in the late 50's.	None



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

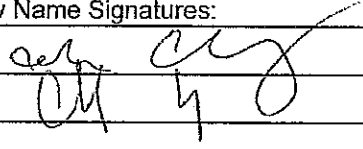
GEO Physics

Date: 4/13/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		Supervisor's Initials
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures: 		



REUNION DE SEGURIDAD

División/Subsidiario Shaw E & I Facilidad Concord, California
 Fecha 04/13/2007 Hora 0630 Número del Trabajo 846075
 Cliente USACE Dirección SacrAmento, CA
 Specific Location MRS-16, Ft Ord, CA
 Tipo de Trabajo ANOMALY EXCAVATION AND GEO PHYSICS FILL IN AND REACT
 Químicos Usados OBTENER HOJAS DE DATOS DE SEGURIDAD DE LOS MATERIALES PARA LOS QUÍMICOS QUE VAN HACER USADOS EN EL SITIO

ASUNTOS DE SEGURIDAD PRESENTADOS

Ropa de Seguridad/Equipo Mod "D"
 Peligros Químicos Poison Oak, Paint , Dust, UXO
 Peligros Físicos Slips, Trips and Falls, UXO, Vehicle traffic, noise, lifting, driving off-road, slopes and uneven terrain
 Procedimiento de Seguridad Stop work, Notify Supervisor and/or Safety Officer, Remain calm
 Hospital/Clinica CHOMPS Teléfono 408-625-4900 Teléfono del Paramedico 831-242-7700
 Dirección del Hospital 23625 Holman Hwy, Monterey, CA (South on HWY 1 to Holman Hwy West)
 Equipo Especial First aid kits, Fire extinguishers, Schonstedts, GPS Equipment, EM 61 Gear,
 Otros **MANY, MANY, MANY BIKE RACERS**

Asistentes

NOMBRE IMPRESO	SIGNATURA
<u>MARK ISABELL</u>	<u>Mark Isabell</u>
<u>TARA VOLPE</u>	<u>Tara Volpe</u>
<u>El John Jenkins</u>	<u>El John Jenkins</u>
<u>JEFF STEINWAND</u>	<u>Jeff Steinwand</u>
<u>Josh King</u>	<u>Josh King</u>
<u>John Tortolone</u>	<u>John Tortolone</u>
<u>Colin Chan</u>	<u>Colin Chan</u>
<u>JAMES DRAKE</u>	<u>James Drake</u>



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/13/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:	<i>James Orab</i>	
<i>Mark J. ...</i>		
<i>T. ...</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

DAILY QUALITY CONTROL REPORT

DATE: April 16, 2007USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 848075

DAY	S	M	T	W	THUR	F	S
-----	---	----------	---	---	------	---	---

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	60	Lo	46	
WIND	Still	Moderate	High	NW@10mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	4	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	0	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	10
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16; GEO acquiring and reacquiring targets at MRS-16; Brush clearing MRA for 2007 burn

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

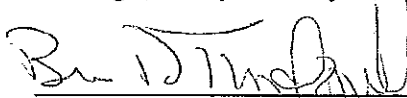
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/16/07, UXOSO FADL 4/16/07, Brush escort FADL dtd 4/16/07, Tailgate safety Meeting dated 04/16/07, JSAs dated 04/16/07 GEO, UXO, and Brush clearance, Equipment inspections for Brush clearing equipment

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/16/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Anomaly Reacquire and Investigation/UXO Safety Escort for 2007 Burn Area.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:

0630 - Attended morning meetings.
0700 - Attended Prep meeting for the 2007 prescribed burn area.
0700 - Two UXO Team investigating targets in MRS -16.
0730 - One UXO Tech provided UXO Safety Escort for the 2007 prescribed burn area vegetation removal crew.
1415 - Fire Department on MRS-16 to conduct a fire assessment inspection in preparation of this Wednesday's explosive venting operation.

Summary: UXO Teams investigated and QC'd 82 targets. Two 2.36 inch Rockets were located and left in place and will be inspected further using the x-ray unit to determine their contents. Three seed items located and removed: One blue colored M9 rifle Grenade, two 37mm projectiles, one blue and one orange.

1700 - Done for the day.
1730 - 1800 - Performed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning Low 40'S. Afternoon in the low 60's.	None



DAILY LOG	DATE	04	16	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed two digs teams and 2 Geo teams in the field, exclusion zone 200 ft between teams</p> <p>0650 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out.</p> <p>0700 Attended prep meeting for 2007 burn area brush cutting</p> <p>0715: TM starting anomaly excavation MRS 16</p> <p>0900 QC'd 66 dig records</p> <p>1030 Weekly status conference call</p> <p>1645: TM Escorted back to office due to bike race</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE	
WEATHER CONDITIONS: Partly cloudy, 40 - 60 degree		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE:		DATE: 04/16/07	

Weather Conditions for RTGC1

Current time: April 17, 2007 - 7:25 PDT

Most Recent Observations at April 17, 2007 - 6:51 PDT

	6:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	48.0° F	49.0 at 3:51	48.0 at 0:51	60.0 at 11:51	46.0 at 7:51
Dew Point	47.2° F	47.9 at 3:51	44.9 at 0:51	49.0 at 13:51	43.3 at 9:51
Relative Humidity	97%	97 at 4:51	89 at 0:51	97 at 4:51	60 at 9:51
Wind Speed	10 mph from WSW	15 at 0:51	10 at 6:51	16 at 22:51	3 at 8:51
Wind Gust	19 mph	22 at 0:51	19 at 3:51	24 at 17:51	10 at 9:51
Pressure	29.15 in	29.15 at 6:51	29.12 at 1:51	29.15 at 6:51	28.96 at 7:51
Sea Level Pressure	29.68 in	29.68 at 6:51	29.65 at 3:51	29.68 at 6:51	29.49 at 9:51
Altimeter	29.67 in	29.67 at 6:51	29.64 at 1:51	29.67 at 6:51	29.48 at 7:51
Solar Radiation	39.0 W/m ² m	39.0 at 6:51	6.0 at 0:51	1308.0 at 13:51	3.0 at 20:51
Fuel Temperature	48.0° F	49.0 at 0:51	48.0 at 2:51	69.0 at 12:51	44.0 at 7:51
10 hr Fuel Moisture	18 gm	18 at 6:51	14 at 0:51	18 at 6:51	9 at 17:51
Battery voltage	12.30 volt	12.50 at 0:51	12.30 at 6:51	13.00 at 8:51	12.30 at 7:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

Equipment Nos: _____

Equipment Type: Bobcat T-300

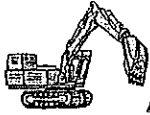
Equipment Hrs: 31.7



Date: 4/16/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

SAFETY INSPECTION CHECK LIST FOR CONSTRUCTION EQUIPMENT



(Including Cranes, Derricks, and Hoisting Equipment)

PROJECT	CONTRACTOR	CONTRACT NO.
TYPE AND MAKE OF EQUIPMENT <i>Bobcat T-300</i>	MODEL <i>T-300</i>	SERIAL NO.

Before any machinery or mechanized equipment is placed in use, it shall be inspected and tested by a competent mechanic and certified to be in good operating condition. Records of tests and inspections shall be maintained as part of the active contract file at Project or Resident Office. Check list set forth herein requires the application of EM 385-1-1, Safety and Health Requirements Manual, 1 Oct 87. The appropriate EM paragraph to be applied is listed at the end of each testing requirement.

CHECK LIST	Yes	No	Not Appl
1. ARE ADEQUATE AND SERVICEABLE FIRE EXTINGUISHERS PROVIDED? (13.A.01)	/		
2. ARE ALL WIRE ROPE CABLES IN GOOD CONDITION? (17.C.01)	/		
3. ARE WIRE ROPE, SOCKETS, SPLICES, THIMBLES AND CLIPS ADEQUATE AND PROPERLY APPLIED? (17.C.09)	/		
4. ARE HOOKS, SAFETY NOOKS, SHACKLES, RINGS, ETC., IN GOOD CONDITION? (17.A.02, 17.A.05)	/		
5. ARE NECESSARY PLATFORMS, FOOTWALKS, ETC., PROVIDED? (18.B.08)	/		
6. ARE ACCESS STEPS, PLATFORMS, ETC., PROVIDED WITH NON-SLIP SURFACES? (18.B.08, 19.A.14, 26.B.03)	/		
7. IS OPERATOR PROTECTED AGAINST THE ELEMENTS, FALLING OR FLYING OBJECTS, SWINGING LOADS, AND SIMILAR HAZARDS? (18.B.18, 19.A.13, 18.B.17, 18.B.19, 18.B.21)	/		
8. ARE ALL GLASSES IN OPERATOR'S COMPARTMENT SAFETY GLASS AND IN GOOD REPAIR? (19.A.15, 19.A.16, 18.B.18)	/		
9. IS SUITABLE ACCESS PROVIDED TO LUBRICATION POINTS? (18.A.18)	/		
10. DO ALL MODIFICATIONS, EXTENSIONS, REPLACEMENT PARTS, AND/OR REPAIRS TO EQUIPMENT MAINTAIN THE SAME FACTOR OF SAFETY AS ORIGINAL DESIGNED EQUIPMENT? (18.A.33, 18.C.04)	/		
11. ARE DRUMS FOR LOAD LINES EQUIPPED WITH AT LEAST ONE POSITIVE HOLDING DEVICE, APPLIED DIRECTLY TO THE MOTOR SHAFT OR SOME PART OF THE TRAIN GEAR? (18.C.05)			/
12. IS THERE SUFFICIENT CABLE TO ALLOW TWO FULL WRAPS OF CABLE ON DRUMS AT ALL WORKING POSITIONS? (18.C.07)			/
13. ARE ADEQUATE HEADLIGHTS, TAIL-LIGHTS AND TURN SIGNALS PROVIDED AND ARE THEY IN PROPER OPERATING CONDITION? (19.A.08, 18.A.15)	/		
14. ARE ALL APPROVED BRAKES ON WHEELED EQUIPMENT AND IN GOOD OPERATING CONDITION? (18.A.21, 18.A.22, 18.A.07, 19.A.08)			/
15. DO WINDSHIELDS HAVE WIPERS IN PROPER OPERATING CONDITION? (19.A.10, 18.A.29)	/		
16. ARE REAR VIEW MIRRORS PROVIDED? (19.A.12)			/
17. ARE OPERATING LEVERS EQUIPPED WITH LATCH OR OTHER DEVICES TO PREVENT ACCIDENTAL STARTING? (19.A.21)	/		

CHECK LIST	Yes	No	Not Appl
18. IS ENGINE EQUIPPED WITH POWER-OPERATED STARTING DEVICE IN OPERATIVE CONDITION? (19.A.24)	/		
19. DO ALL PRESSURE VESSELS HAVE VALID INSPECTION CERTIFICATES? (21.A.01, 21.B.01, 21.C.01, 21.D.01)	/		/
20. ARE REVERSE SIGNAL ALARMS ON EQUIPMENT? (18.B.01)	/		
21. ARE BELTS, GEARS, SHAFTS, ELECTRICAL CONTACTS, ETC., ADEQUATELY GUARDED? (18.B.03, 16.A.04)	/		
22. ARE ALL HOT PIPES AND SURFACES SUITABLY GUARDED? (18.B.04)	/		
23. ARE FUEL TANKS LOCATED SO THAT SPILLS OR OVERFLOWS WILL NOT COME IN CONTACT WITH ENGINE OR EXHAUST? (18.B.05)	/		
24. ARE EXHAUSTS AND DISCHARGES SO DIRECTED AS NOT TO ENDANGER WORKMEN OR OBSTRUCT VIEW OF OPERATOR? (18.B.06)	/		
25. ARE GUARDS IN PLACE ON EQUIPMENT WITH DROP TYPE SKIP PANS? (18.B.07)	/		
26. ARE ADEQUATE SEATS PROVIDED FOR ALL RIDERS? (18.A.07, 19.C.01, 19.C.02)	/		/
27. ARE TIRES IN SERVICEABLE CONDITION? ARE TESTING/INSPECTIONS DOCUMENTED? (18.A.01, 19.A.03)	/		/
28. ARE STEERING LINKAGE AND TIE ROD IN GOOD OPERATING CONDITION? ARE TESTING/INSPECTIONS DOCUMENTED? (18.A.01)	/		/
29. ARE DUMP BODIES PROVIDED WITH HOLDING DEVICE OR OTHER SUITABLE DEVICE FOR LOCKING BODY IN RAISED POSITION? (19.A.20)	/		/
30. ARE TAILGATE DUMPING DEVICES SO ARRANGED THAT OPERATOR WILL BE IN THE CLEAR WHILE DUMPING LOADS? (19.A.22)	/		/
31. ARE TRIP-HANDLES PROVIDED ON TAILGATES TO FACILITATE HANDLING? (19.A.22)	/		/
32. IS AIR HOSE FREE FROM LEAKS OR DEFECTS? (18.A.07)	/		/
33. ARE SAFETY LASHINGS FOR QUICK MAKE-UP TYPE CONNECTIONS PROVIDED? (18.E.03, 12.A.18)	/		/
34. IS ACCEPTABLE SPARK ARRESTOR INSTALLED AND WORKING? (18.B.06, 12.C.03)	/		/
35. DO HEATING DEVICES COMPLY WITH REFERENCES? (08.B, 12.D)	/		/
36. DOES WELDING EQUIPMENT COMPLY WITH CODE REQUIREMENTS? (14.A.01, 14.A.02, 14.A.03, 15.A.04)	/		/
37. IS EQUIPMENT ADEQUATELY GROUNDED? (14.C.02, 14.C.03, 16.A.08)	/		/
38. DO ELECTRICAL COMPONENTS COMPLY WITH CODE? (15.A.01)	/		/
39. ARE REQUIRED PRESSURE, TEMPERATURE OR RELIEF GAGES AND VALVES INSTALLED AND OPERABLE? (21.A.10, 21.A.11, 08.B.05)	/		/
40. ARE APPROVED SEAT BELTS AND ROLL-OVER PROTECTION PROVIDED? (18.B.16, 18.B.20)	/		/
41. IS RECOMMENDED PREVENTIVE MAINTENANCE BEING FOLLOWED? (18.A.03)	/		/

CHECK LIST	Yes	No	Not Appl
42. DO HELICOPTER CRANES MEET CONSTRUCTION REQUIREMENTS? (18.Q.01, 18.Q.04, 18.Q.10)			
43. DO HYDRAULIC JACKS MEET SPECIAL SAFETY CONDITIONS? (18.R)			
44. IS CONCRETE EQUIPMENT FITTED WITH ADEQUATE SAFETY DEVICES? (18.O.02, 18.O.03, 18.O.05, 18.O.07, 18.O.08)			
45. ARE ELEVATING AND ROTATING WORK PLATFORMS IN CONFORMANCE WITH ANSI A92.2? (18.N.01)			
46. DO CONVEYORS, CABLEWAYS, AND RELATED EQUIPMENT CONFORM TO ANSI B20.01? (18.K.01)			
47. ARE PILE DRIVERS EQUIPPED WITH ALL APPROPRIATE SAFETY DEVICES? (18.J)			
48. DO MATERIAL HOISTS CONFORM TO ANSI A10.5? (18.I)			
49. DO PASSENGER ELEVATORS CONFORM TO ANSI A10.4? DO TEMPORARY HOISTS IN ACCORDANCE TO ANSI A10.22? (18.H.01)			
50. DO HAND AND POWER TOOLS COMPLY WITH APPLICABLE ANSI STANDARDS? (SEC 16)			
<i>The following six questions apply to Cranes and Hoisting Equipment only and need not be answered for other construction equipment.</i>			
51. IS HIGH VOLTAGE SIGN POSTED? (15.E.08, 18.C.02)			
52. IS EQUIPMENT FITTED WITH POSITIVE STOPS FOR ROTATION WHEN NEAR POWER LINES? (15.E.08)			
53. IS THERE ANY VISIBLE EVIDENCE OF DAMAGE TO BOOM? (18.A.01, 18.C.01)			
54. IS THE BOOM POSITION INDICATOR OPERATING AND VISIBLE TO OPERATOR? (18.D.04, 18.C.13, 18.E.08, 18.F.03, 18.G.04)			
55. HAVE ALL OPERATORS HAD A CURRENT PHYSICAL EXAMINATION? (05.A.01, 05.B.03)			
56. IS BRAKING EQUIPMENT CAPABLE OF EFFECTIVELY BRAKING, LOWERING AND SAFELY HOLDING A LOAD OF AT LEAST THE FULL RATED LOAD AS REQUIRED? (18.C.06)			
REMARKS:			
CERTIFICATION: <i>I hereby certify that this item of equipment is in good operating condition and that it meets all above requirements except as noted under remarks.</i>			
 _____ SIGNATURE OF COMPETENT MECHANIC		 _____ DATE	
_____ SIGNATURE OF SUPERINTENDENT/QUALITY CONTROL ENGINEER		_____ DATE	

SAFETY INSPECTION CHECK LIST FOR CONSTRUCTION EQUIPMENT

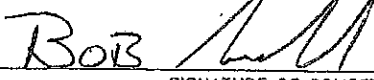
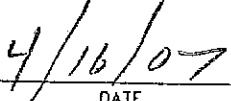
(Including Cranes, Derricks, and Hoisting Equipment)

PROJECT <u>CONTAINMENT CUTTING</u> <u>For 2007 Burn Area</u>	CONTRACTOR <u>TIMBERLINE</u>	CONTRACT NO.
TYPE AND MAKE OF EQUIPMENT <u>CAT EXCAVATOR</u>	MODEL <u>325 CL</u>	SERIAL NO.

Before any machinery or mechanized equipment is placed in use, it shall be inspected and tested by a competent mechanic and certified to be in good operating condition. Records of tests and inspections shall be maintained as part of the active contract file at Project or Resident Office. Check list set forth herein requires the application of EM 385-1-1, Safety and Health Requirements Manual, 1 Oct 87. The appropriate EM paragraph to be applied is listed at the end of each testing requirement.

CHECK LIST	Yes	No	Not Appl
1. ARE ADEQUATE AND SERVICEABLE FIRE EXTINGUISHERS PROVIDED? (13.A.01)	X		
2. ARE ALL WIRE ROPE CABLES IN GOOD CONDITION? (17.C.01)			X
3. ARE WIRE ROPE, SOCKETS, SPLICES, THIMBLES AND CLIPS ADEQUATE AND PROPERLY APPLIED? (17.C.02)			X
4. ARE HOOKS, SAFETY NOOKS, SHACKLES, RINGS, ETC., IN GOOD CONDITION? (17.A.02, 17.A.05)	X		
5. ARE NECESSARY PLATFORMS, FOOTWALKS, ETC., PROVIDED? (18.B.08)	X		
6. ARE ACCESS STEPS, PLATFORMS, ETC., PROVIDED WITH NON-SLIP SURFACES? (18.B.08, 18.A.14, 26.B.03)	X		
7. IS OPERATOR PROTECTED AGAINST THE ELEMENTS, FALLING OR FLYING OBJECTS, SWINGING LOADS, AND SIMILAR HAZARDS? (18.B.19, 19.A.13, 18.B.17, 18.B.19, 18.B.21)	X		
8. ARE ALL GLASSES IN OPERATOR'S COMPARTMENT SAFETY GLASS AND IN GOOD REPAIR? (19.A.16, 19.A.16, 18.B.18)	X		
9. IS SUITABLE ACCESS PROVIDED TO LUBRICATION POINTS? (18.A.18)	X		
10. DO ALL MODIFICATIONS, EXTENSIONS, REPLACEMENT PARTS, AND/OR REPAIRS TO EQUIPMENT MAINTAIN THE SAME FACTOR OF SAFETY AS ORIGINAL DESIGNED EQUIPMENT? (18.A.33, 18.C.04)	X		
11. ARE DRUMS FOR LOAD LINES EQUIPPED WITH AT LEAST ONE POSITIVE HOLDING DEVICE, APPLIED DIRECTLY TO THE MOTOR SHAFT OR SOME PART OF THE TRAIN GEAR? (18.C.05)			X
12. IS THERE SUFFICIENT CABLE TO ALLOW TWO FULL WRAPS OF CABLE ON DRUMS AT ALL WORKING POSITIONS? (18.C.07)			X
13. ARE ADEQUATE HEADLIGHTS, TAIL-LIGHTS AND TURN SIGNALS PROVIDED AND ARE THEY IN PROPER OPERATING CONDITION? (19.A.06, 18.A.15)	X		
14. ARE ALL APPROVED BRAKES ON WHEELED EQUIPMENT AND IN GOOD OPERATING CONDITION? (18.A.21, 18.A.22, 19.A.07, 19.A.08)			X
15. DO WINDSHIELDS HAVE WIPERS IN PROPER OPERATING CONDITION? (19.A.10, 18.A.28)	X		
16. ARE REAR VIEW MIRRORS PROVIDED? (19.A.12)	X		
17. ARE OPERATING LEVERS EQUIPPED WITH LATCH OR OTHER DEVICES TO PREVENT ACCIDENTAL STARTING? (19.A.21)	X		

CHECK LIST	Yes	No	Not Appl
18. IS ENGINE EQUIPPED WITH POWER-OPERATED STARTING DEVICE IN OPERATIVE CONDITION? (19.A.24)	X		
19. DO ALL PRESSURE VESSELS HAVE VALID INSPECTION CERTIFICATES? (21.A.01, 21.B.01, 21.C.01, 21.D.01)			X
20. ARE REVERSE SIGNAL ALARMS ON EQUIPMENT? (18.B.01)	X		
21. ARE BELTS, GEARS, SHAFTS, ELECTRICAL CONTACTS, ETC., ADEQUATELY GUARDED? (18.B.03, 15.A.04)	X		
22. ARE ALL HOT PIPES AND SURFACES SUITABLY GUARDED? (18.B.04)	X		
23. ARE FUEL TANKS LOCATED SO THAT SPILLS OR OVERFLOWS WILL NOT COME IN CONTACT WITH ENGINE OR EXHAUST? (18.B.05)	X		
24. ARE EXHAUSTS AND DISCHARGES SO DIRECTED AS NOT TO ENDANGER WORKMEN OR OBSTRUCT VIEW OF OPERATOR? (18.B.06)	X		
25. ARE GUARDS IN PLACE ON EQUIPMENT WITH DROP TYPE SKIP PANS? (18.B.07)	X		
26. ARE ADEQUATE SEATS PROVIDED FOR ALL RIDERS? (18.A.07, 19.C.01, 19.C.02)	X		
27. ARE TIRES IN SERVICEABLE CONDITION? ARE TESTING/INSPECTIONS DOCUMENTED? (18.A.01, 19.A.03)			X
28. ARE STEERING LINKAGE AND TIE ROD IN GOOD OPERATING CONDITION? ARE TESTING/INSPECTIONS DOCUMENTED? (18.A.01)	X		X
29. ARE DUMP BODIES PROVIDED WITH HOLDING DEVICE OR OTHER SUITABLE DEVICE FOR LOCKING BODY IN RAISED POSITION? (19.A.20)			X
30. ARE TAILGATE DUMPING DEVICES SO ARRANGED THAT OPERATOR WILL BE IN THE CLEAR WHILE DUMPING LOADS? (19.A.22)			X
31. ARE TRIP-HANDLES PROVIDED ON TAILGATES TO FACILITATE HANDLING? (19.A.22)			X
32. IS AIR HOSE FREE FROM LEAKS OR DEFECTS? (16.A.07)			X
33. ARE SAFETY LASHINGS FOR QUICK MAKE-UP TYPE CONNECTIONS PROVIDED? (16.E.03, 12.A.18)			X
34. IS ACCEPTABLE SPARK ARRESTOR INSTALLED AND WORKING? (18.B.06, 12.C.03)	X		
35. DO HEATING DEVICES COMPLY WITH REFERENCES? (08.B, 12.D)			X
36. DOES WELDING EQUIPMENT COMPLY WITH CODE REQUIREMENTS? (14.A.01, 14.A.02, 14.A.03, 15.A.04)			X
37. IS EQUIPMENT ADEQUATELY GROUNDED? (14.C.02, 14.C.03, 15.A.08)			X
38. DO ELECTRICAL COMPONENTS COMPLY WITH CODE? (15.A.01)			X
39. ARE REQUIRED PRESSURE, TEMPERATURE OR RELIEF GAGES AND VALVES INSTALLED AND OPERABLE? (21.A.10, 21.A.11, 08.B.05)	X		
40. ARE APPROVED SEAT BELTS AND ROLL-OVER PROTECTION PROVIDED? (18.B.16, 18.B.20)	X		
41. IS RECOMMENDED PREVENTIVE MAINTENANCE BEING FOLLOWED? (18.A.03)	X		

CHECK LIST	Yes	No	Not Appl
42. DO HELICOPTER CRANES MEET CONSTRUCTION REQUIREMENTS? (18.Q.01, 18.Q.04, 18.Q.10)			X
43. DO HYDRAULIC JACKS MEET SPECIAL SAFETY CONDITIONS? (18.R)			X
44. IS CONCRETE EQUIPMENT FITTED WITH ADEQUATE SAFETY DEVICES? (18.O.02, 18.O.03, 18.O.05, 18.O.07, 18.O.08)			X
45. ARE ELEVATING AND ROTATING WORK PLATFORMS IN CONFORMANCE WITH ANSI A92.2? (18.N.01)			X
46. DO CONVEYORS, CABLEWAYS, AND RELATED EQUIPMENT CONFORM TO ANSI B20.01? (18.K.01)			X
47. ARE PILE DRIVERS EQUIPPED WITH ALL APPROPRIATE SAFETY DEVICES? (18.J)			X
48. DO MATERIAL HOISTS CONFORM TO ANSI A10.5? (18.I)			X
49. DO PASSENGER ELEVATORS CONFORM TO ANSI A10.4? DO TEMPORARY HOISTS IN ACCORDANCE TO ANSI A10.22? (18.H.01)			X
50. DO HAND AND POWER TOOLS COMPLY WITH APPLICABLE ANSI STANDARDS? (SEC 18)			X
<i>The following six questions apply to Cranes and Hoisting Equipment only and need not be answered for other construction equipment.</i>			X
51. IS HIGH VOLTAGE SIGN POSTED? (15.E.08, 18.C.02)			X
52. IS EQUIPMENT FITTED WITH POSITIVE STOPS FOR ROTATION WHEN NEAR POWER LINES? (15.E.09)			X
53. IS THERE ANY VISIBLE EVIDENCE OF DAMAGE TO BOOM? (18.A.01, 18.C.01)			X
54. IS THE BOOM POSITION INDICATOR OPERATING AND VISIBLE TO OPERATOR? (18.D.04, 18.C.13, 18.E.08, 18.F.03, 18.G.04)			X
55. HAVE ALL OPERATORS HAD A CURRENT PHYSICAL EXAMINATION? (05.A.01, 05.B.03)	X		
56. IS BRAKING EQUIPMENT CAPABLE OF EFFECTIVELY BRAKING, LOWERING AND SAFELY HOLDING A LOAD OF AT LEAST THE FULL RATED LOAD AS REQUIRED? (18.C.06)			X
REMARKS:			
CERTIFICATION: I hereby certify that this item of equipment is in good operating condition and that it meets all above requirements except as noted under remarks.			
 SIGNATURE OF COMPETENT MECHANIC		 DATE	
_____ SIGNATURE OF SUPERINTENDENT/QUALITY CONTROL ENGINEER		_____ DATE	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/16/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Brush clearing with heavy equipment; TAZ and Brushhog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 200 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND,	<i>Jeff Steinwand</i>
Tim Mathisen	<i>Tim Mathisen</i>
Terry Northcutt	<i>Terry Northcutt</i>
JEFF WORTH	<i>Jeff Worth</i>
Chris Scoville	<i>Chris Scoville</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Vol Vander	<i>Vol Vander</i>
Tom Ghiglio Ho	<i>Tom Ghiglio</i>
Steven Bennett	<i>Steven Bennett</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

Date: _____
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetaive material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness Safety vest, hearing protection, 200 ft throw radius around TAZ Barrier cream and cotton coveralls Use proper lifting techniques		
Keep away from all sources of ignition, wear porper PPE Hard hat with hearing protection		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date:
Job#: 783751
Permit#:
Issued By: B. Tinckne

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/16/2007
 Job#: 846075
 Permit#: _____
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Tim Mathisen						
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">New:</td> <td style="width: 15%;"></td> <td style="width: 70%;"></td> </tr> <tr> <td>Revised:</td> <td style="text-align: center;">X</td> <td></td> </tr> </table>	New:			Revised:	X	
	New:							
Revised:	X							
Assembly Point: Main gate MRS-16								
Job Task (What are You Doing)		Audit the Job Audit Time:						
GEO Fill-in and reacquire								
Potential Hazards		Supervisor's Comments						
Lifting								
Slip, Trip, and Falls								
Cuts and abrasions								
Poison oak								
UXO								
Dust								
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials						
Recommended Action or Procedure								
Observe walking areas								
Proper lifting technique, weight limit of 60 lbs								
Wear work gloves								
Mod "D" PPE, Clean PPE/Work boots with alcohol								
Do not pick up any objects YOU DID NOT DROP								
Use of Dust Mask								
Water intake, stay hydrated								
Crew Name Signatures:								

JOB SAFETY ANALYSIS

Date: 4/16/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/16/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: Exclusion zones between work teams 200 ft

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
John Suters	
Tim [unclear]	
JEFF STEINWAND	
Joshi Kong	
James Drake	
MARK ISABELL	
TARA VOLPE	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 04/16/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED	SIGNATURE
Cotra Chang	Cotra Chang



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/16/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	<i>James Clark</i> <i>Mark Ball</i> <i>Tof EVJ</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 4/16/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: April 17, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	60	Lo	46	
WIND	Still	Moderate	High	NW@20mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	10
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	10
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16; GEO acquiring and reacquiring targets at MRS-16; Brush clearing MRA for 2007 burn

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Preparatory Inspection – Vegetative clearance 2007 Burn Unit, Figures 1-1 and 1-2
Initial Phase Inspection - Vegetative clearance 2007 Burn Unit, Figures 1-1 and 1-2

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

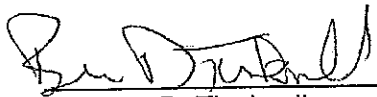
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/17/07, UXOSO FADL 4/17/07, Brush escort FADL dtd 4/17/07, Tailgate safety Meeting dated 04/17/07, JSAs dated 04/17/07 GEO, UXO, and Brush clearance, Equipment inspections for Brush clearing equipment, Vegetative Burn Prep and Initial Inspection checklist

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/17/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Anomaly Reacquire and Investigation/UXO Safety Escort for 2007 Burn Area.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:

0630 - Attended morning meetings.
 0700 - Two UXO Team investigating targets in MRS -16 and one UXO Tech supporting the 2007 Burn Area work crew.
 0730 - 1600 - Provided one UXO Tech to BLM.

Summary: The UXO Teams investigated and cleared 110 target locations. One blue seed item was recovered and one M1A1 Practice Mine with suspect live fuze was located and removed to a safe holding area. The two 2.36 inch Rockets identified and left in place yesterday were x-rayed and determined to be MEC scrap.

1630 - The entire UXO crew attended a MEC explosive venting operation brief conducted the SUXOS and Demolition Team Leading. The brief was given in preparation for tomorrow's scheduled MEC venting operation.

1700 - Secured.
 1730 - 1800 - Completed daily's.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Cloudy and in the 40's. Afternoon very windy and in the 50's.

None

SIGNATURE: Tim Mathisen

4/17/2007

page 1 of 1



L6

DAILY LOG	DATE	04	17	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; discussed two digs teams and 2 Geo teams in the field, exclusion zone 200 ft between teams 0650 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out 0715: TM starting anomaly excavation MRS 16 0900 MRS 16 observing QC of digs, 2 of EM 61's not working properly, will not hold zero or null 1100 MRA Brush clearing operation, delivered sanitation facilities 1300 X-rayed two 2.36' Rkts, MRS 16, both determined to be MEC scrap 1545: TM secured MRS gate 1600 Demo brief meeting for tomorrow's operation 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE
WEATHER CONDITIONS: Partly cloudy, 40 - 0 degree, very windy	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 04/17/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA	Project Number: 846075
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:	
0700 - TAILGATE MEETING WITH TIMBERLINE	
0715 - DEPART FOR WORKSITE	
0740 - ARRIVED WORKSITE, COMPLETED JSA, EQUIPMENT CHECKOUT, AND EQUIPMENT MAINTENANCE WAS PERFORMED ON TAZ AND THE BOBCAT	
0810 - TAZ AND BOBCAT BEGIN CUTTING	
1130 - 1215 BREAK FOR LUNCH	
1500 - 1515 AFTERNOON BREAK	
1615 - ENDED WORK FOR THE DAY, PERFORMED MAINTENANCE ON TAZ, AND FUELED EQUIPMENT	
1630 - LEFT WORKSITE FOR THE DAY	
BOBCAT CUT APPROXIMATELY 400 FT	
TAZ CUT APPROXIMATELY 300 FT	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
1330 - CHIEF 2 FIRE DEPARTMENT PERSONNEL ESCORTED BY CORP USACE SAFETY ON SITE, LEFT AT 1345	
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE:	
SIGNATURE: <i>JM Steward</i>	DATE: 4/17/07

Form QC-4

INITIAL PHASE INSPECTION CHECK LIST

TERC II - K.3

Contract No.: DACW 05-96-D-0011
Task Order No. 016
Fort Ord, California

Date: 4/16/07

Title and No. of Technical Section: Statement of Work-Veg Clear-2007 Burn Unit
Former Fort Ord, California

Description and Location of Work Inspected: Vegetation Clearance-2007 Burn Unit

Reference Contract Drawings: Figures 1-1 and 1-2

A. Key Personnel Present:

	<u>Name</u>	<u>Position</u>	<u>Company</u>
1)	Terry Northcutt	Owner	Timberline
2)	Kevin Siemann	Task Manager	Shaw
3)	Tom Ghigliotto	CQCSM	PAM

B. Materials being used are in strict compliance with the contract plans and specifications: Yes No

If not, explain: _____

C. Procedures and/or work methods witnessed are in strict compliance with the contract specifications: Yes No

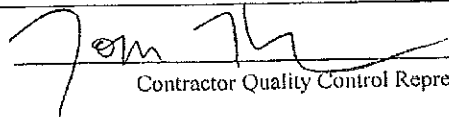
If not, explain: _____

D. Workmanship is acceptable: Yes No

State where improvement is needed: _____

E. Workmanship is free of safety violations: Yes No

If no, corrective action taken: _____


Contractor Quality Control Representative

**PREPARATORY INSPECTION OUTLINE
(PART I)**



Shaw Environmental, Inc.

TERC II - K.2

Contract No.: DACW 05-96-D-0016
Task Order No. 0016
Fort Ord, California

Date: 4/16/07

Title and No. of Technical Section: Statement of Work-Veg Clear-2007 Burn Unit
Former Fort Ord, California

Reference Contract Drawings: Figures 1-1 and 1-2

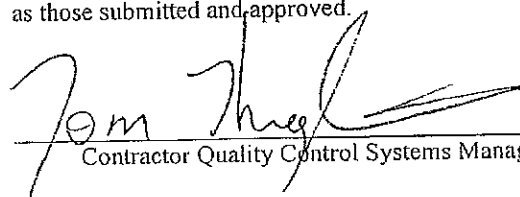
A. Planned Attendants:

	<u>Name</u>	<u>Position</u>	<u>Company</u>
1)	Tom Ghigliotto	CQCSM	PAM
2)	Val Valdez	HSO	Shaw
3)	Tim Mathisen	Lead UXO	Shaw
4)	Clinton Huckins	QA	USACE
5)	Kevin Siemann	Task Manager	Shaw
6)	Lyle Shurtleff	MMRP Manager	U.S. Army
7)	Chris Duymich	Prescribed Burn Manager	POMFD
8)	Dan Nohrden	Site Superintendent	Shaw
9)	Terry Northcutt	Owner	Timberline
10)			

B. Submittals required to begin work:

	<u>Item</u>	<u>Submittal No.</u>	<u>Action Code</u>
1)	SOW-Veg Clear-2007 Burn Unit		NA
2)			
3)	SSHP	Rev. 9	A
4)			
5)			
6)			
7)			
8)			

I hereby certify, that to the best of my knowledge and belief, that the above required materials delivered to the job site are the same as those submitted and approved.


Contractor Quality Control Systems Manager

(continued):



Shaw Environmental, Inc.

PREPARATORY INSPECTION OUTLINE
(PART I)

TERC II - K.2

Contract No.: DACW 05-96-D-0016
Task Order No. 0016
Fort Ord, California

Date: 4/16/07

C. Equipment to be used in executing work:

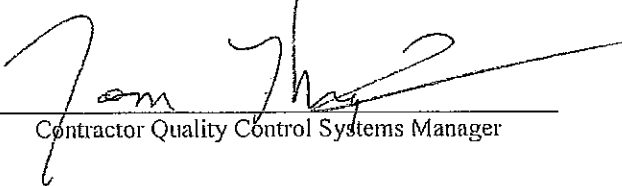
- 1) Taz, Bobcat, vehicles _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

D. Work areas examined to ascertain that all preliminary work has been completed: Yes

E. Methods and procedures for performing Quality Control, including specific testing requirements:
Three-phase inspections, as required.

Yes

The above methods and procedures have been identified from the project plans and will be performed as specified for the Definable Feature of Work.



Contractor Quality Control Systems Manager

STATEMENT OF WORK
VEGETATION CLEARANCE
2007 BURN UNIT
FORMER FORT ORD, MONTEREY, CALIFORNIA
JANUARY 29, 2007

TOTAL ENVIRONMENTAL RESTORATION CONTRACT
DACW05-96-D-0011
WORK AUTHORIZATION DIRECTIVE 6

1.0 Introduction

This Statement of Work (SOW) is issued to identify upcoming vegetation clearance services at the former Fort Ord, Monterey County, California (Figure 1). The work will be conducted in support of the Shaw Environmental, Inc. (Shaw) Total Environmental Restoration Contract (TERC) with the U. S. Department of the Army Corps of Engineers (USACE). The Subcontractor (the company awarded a purchase order to perform the work identified herein) is expected to supply all equipment and labor to clear vegetation to establish a fuel break from an area located near the intersection of General Jim Moore Blvd and South Boundary Road at the former Fort Ord Army Base (Figure 2).

The Subcontractor shall use suitable equipment for vegetation clearance in munitions response sites. **Based on previous work in the immediate area of the 2007 Burn Unit, munitions and explosives of concern (MEC), including unexploded ordnance (UXO), are anticipated to be encountered. The Subcontractor is alerted to the risk of encountering such items. Use of armored or otherwise reinforced equipment is mandatory at the site for any vegetation clearance occurring east of the blue line (Figure 2). Equipment shall be armored to at least minimum standards included in Attachment 1 (in inches) for a 75 mm Mk1 High Explosive Round. The following bullets are intended for informational purposes regarding armored equipment:**

- The armoring should be at least the thickness and of the material given in the specification.
- Any surfaces that are exposed to or potentially exposed to a direct blast should be hardened to protect the operator.
- The intent of the armoring is to protect the operator not necessarily the equipment
- Particular attention should be given to any exposed corners, door openings, windows or undercarriages.
- The thickness of the skin or components of the equipment in it's original configuration can and should be counted in the overall thickness of the armoring. An exception to this rule would be breakable glass windows.
- Only surfaces that will be directly exposed to the potential explosive hazard need to be armored.

Shaw will provide UXO technicians trained to avoid and recognize MEC hazards to support the Subcontractor's activities.

1.1 Pre-Bid Meeting

A pre-bid meeting at the site is mandatory in order that bidders can inspect field conditions. Bidders will be notified of arrangements at least 2 working days in advance.

2.0 Scope of Work

Following are the various sections describing the scope of the work.

2.1 Location

The project site is located at the former Fort Ord Army Base, Monterey County, California. Fort Ord served as a training and staging facility for infantry troops from its opening in 1917 until its closure in 1993.

2.2 Description of Work

Phase 1 of vegetation clearance is expected to be implemented. Phase 1 of vegetation clearance entails cutting of fuel breaks in burn units 2007A and 2007B as shown on attached Figure 2. The purpose of the work in Phase 1 is to create a fuel break around the 2007A and 2007B Burn units. The fuel break will serve as a containment boundary for prescribed burns currently scheduled for late summer or early fall, 2007. Phase 2 of vegetation clearance is an optional item and may or may not be implemented. Phase 2 of vegetation clearance entails cutting of fuel breaks in burn units 2007C, 2007D and 2007E as shown on attached Figure 2. The purpose of the work in Phase 2 is to create a fuel break around the 2007D and 2007E Burn units. The fuel break shall serve as a containment boundary for prescribed burns currently scheduled for late summer or early fall, 2007. Phase 3 of vegetation clearance is an optional item and may or may not be implemented. Phase 3 of vegetation clearance will be conducted after the prescribed burn to remove skeletons of brush remaining within the prescribed burn area, and to allow access into areas that may not have burned completely or at all within the prescribed burn area. Acreages of proposed burn areas are included in Figure 2.

The Subcontractor shall conduct vegetation clearance using armored mechanical equipment. Accessible oak trees shall be removed by the POM Fire Department (POMFD) prior to start of work. Inaccessible oak trees will be removed by POMFD following mechanical vegetation clearance. Manual tools such as brush hogs and trimmers shall be used in areas where the mechanical cutter cannot gain access. Trimming of tree branches extending into the project area will be allowed to facilitate access.

For vegetation clearance, the vegetation will be cut as close to ground surface as possible, but no higher than 6 inches above ground. Chipped vegetation from mechanical clearance may be left

where it falls, but equipment used to conduct mechanical clearance should minimize chipped vegetation size to the maximum extent possible, so as not to impede the MEC clearance action. Any oak trees cut manually by POMFD (either before or after mechanical clearance) or bushes cut manually by the Subcontractor shall be removed from the site. Transport of trees and bushes to a location, to be determined by Shaw, (no more than 10 miles) shall be the responsibility of the Subcontractor. A UXO team provided by Shaw will provide UXO construction support during all vegetation clearance activities.

The Subcontractor will provide, as part of the proposal, the following:

- A written description of the methods to be employed, including specifications for the equipment and qualifications of field personnel.
- A detailed drawing regarding planned armoring of mechanical vegetation clearance equipment. This detailed drawing shall be submitted to the Department of Defense Explosive Safety Board for approval prior to beginning work.
- An estimate of the time required to complete each phase of the work.
- A fixed-price for each phase of work.

2.3 Work Not Included (Shaw Work)

Shaw, or other Shaw-designated subcontractors, will perform the following tasks:

- Provide access to site
- Industrial hygiene support
- MEC avoidance
- Survey project boundaries
- Payment for Marina Municipal Landfill Dumping Fees (if required)

2.4 Schedule

Subcontractor shall start work no later than two weeks after notice to proceed. Finish work no later than eight weeks after notice to proceed. A subcontract award and notice to proceed may be made in late winter or early spring 2007. Bidders will include their schedule with their proposal. The normal work-week at the job site is four ten-hour days, usually Monday through Thursday, starting at 6:30 a.m. Subcontractors are required to be at the Shaw offices located at Bldg. 4522 Joe Lloyd Way at 6:30 a.m. for a daily safety meeting. The Subcontractor shall mobilize to the work site following the safety meeting, usually by 7:00 a.m. After arrival at the work site, an additional daily tailgate safety meeting, discussed below, shall be conducted regarding specific safety requirements for the work to be performed, usually a duration of less than 15 minutes. The Subcontractor is expected to complete work for the day to allow enough time for Shaw

personnel providing UXO escort to return to the Shaw offices before 5:00 p.m. This generally means leaving the work site by 4:45 p.m.

2.5 *Vegetation Disposal*

The Subcontractor shall dispose of manually cut trees and brush at a location to be determined by Shaw. Transport of cut vegetation shall entail no more than 10 miles and may require disposal at Marina Municipal Landfill. Dumping fees will be direct billed to Shaw and will not be the responsibility of the Subcontractor.

3.0 *Quality Control*

Shaw will provide overall quality control on behalf of the USACE. The work will be conducted in compliance with Section 01440, Subcontractor Quality Control specifications (Attachment 2). The Subcontractor is alerted specifically to the requirements of Section 3.4, "Control" and Section 3.6 "Completion Inspection." The Subcontractor is not required to submit a Quality Control Plan. Quality control inspections will be conducted by the Shaw Representative daily to ensure compliance with the Subcontractor quality control requirements.

At the beginning of the work, an initial inspection will be conducted by the CQCSM and USACE to ensure that all operations are in compliance with appropriate regulations and requirements.

Once the work is complete, the quality control representative and USACE will conduct final inspections to ensure that the work is completed as required by the project plans, the site safety plan, and appropriate regulations and requirements.

4.0 *Health and Safety Requirements*

Onsite Subcontractor personnel must comply with all appropriate Occupational Safety and Health Administration (OSHA) regulations as defined in Title 29 Code of Federal Regulations, Part 1910 (29 CFR 1910), Shaw's Site Safety and Health Plan, USACE's Safety and Health Requirements EM-385-1-1 (USACE 1996), and industry standard requirements.

Before beginning activities, the Shaw Field Representative will conduct a safety orientation meeting to review relevant portions of Shaw's Health and Safety Plan. The safety orientation that will be conducted prior to starting field work (may be the beginning of the first day) and will last approximately 30 minutes. This meeting must be attended by all Subcontractor field staff.

Shaw has the right to suspend work or prohibit personnel from working on this project if they do not conform to these requirements.

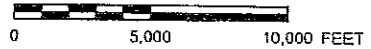
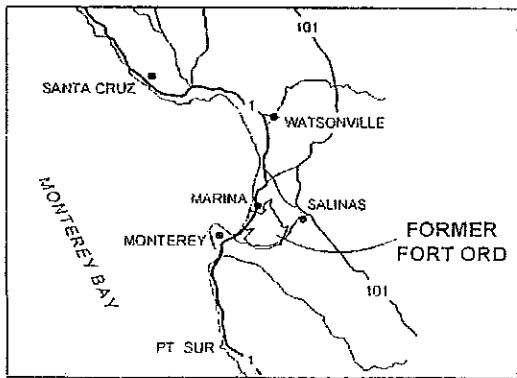
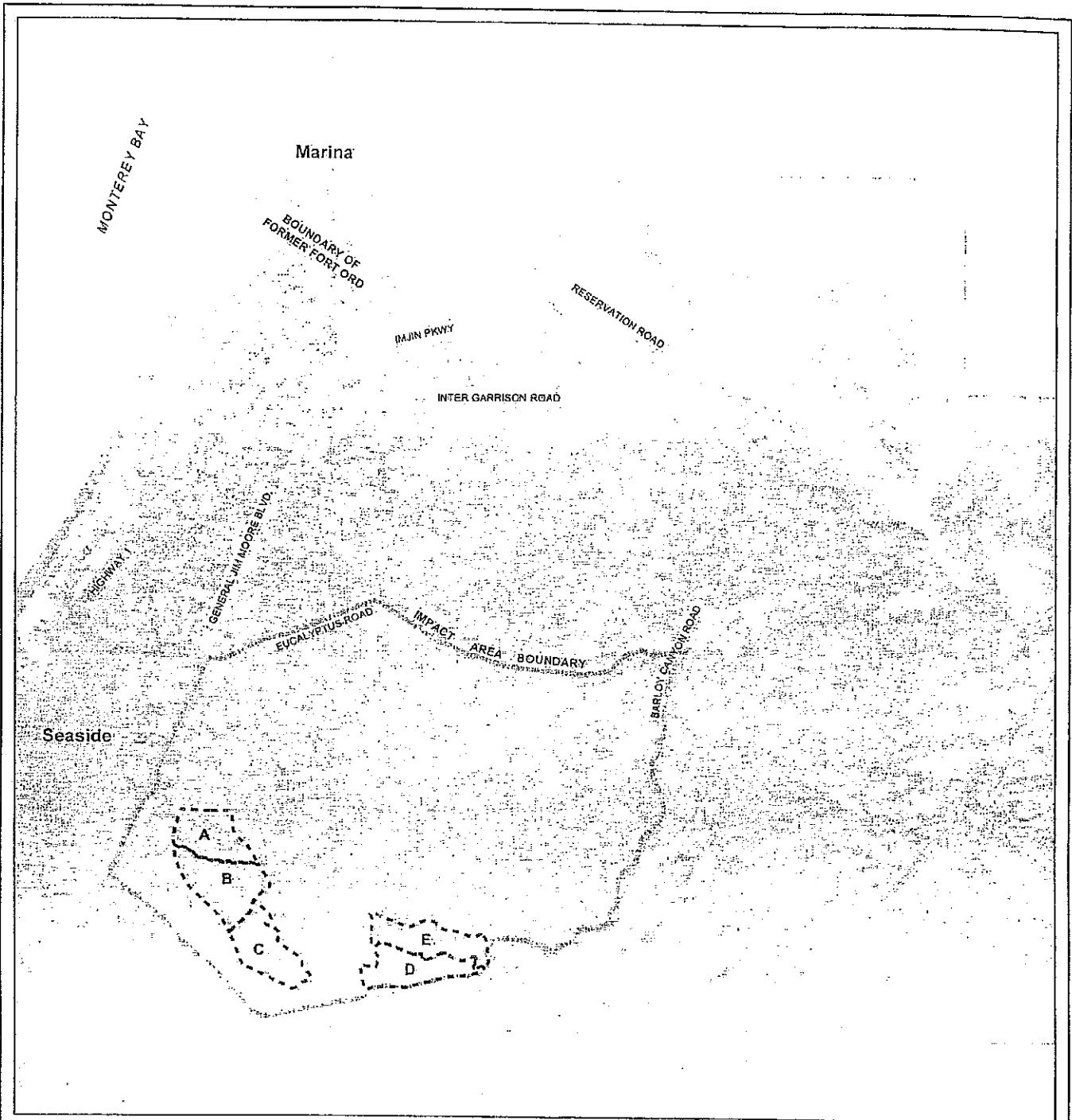
The Subcontractor shall be aware of the possibility of encountering MEC, and of other site hazards, especially poison oak. All work will be conducted in accordance with the site-specific Safety and Health Plan, and will require a UXO escort, provided by Shaw.

As part of Shaw's Health and Safety program, a daily tailgate safety meeting (duration generally less than 1/4 hour) will be conducted before onsite activities begin. This meeting will be conducted by the Shaw Field Representative. All onsite personnel are required to attend these daily meetings and sign a tailgate safety form indicating participation in and comprehension of the meeting. If the Subcontractor anticipates being on-site for less than a full day, the Subcontractor shall notify the field representative at least one full business day prior to the field activity to schedule a special Tailgate Safety Meeting.

Attachments:

1. Figure 1
2. Figure 2
3. Attachment 1: Armoring Requirements
4. Attachment 2: Section 01440

END STATEMENT OF WORK



REVISION	DATE	DESCRIPTION	CHKD	APPR
		Department of the Army Sacramento District, Corps of Engineers Sacramento, California		
DESIGNED		FIGURE 1-1 2007 BURN AREA LOCATION MAP Former Fort Ord, California		
DRAWN				
CHECKED				
SUBMITTED		DATE	SCALE	SPEC 11a
			SHEET	FILE No
				2007_Burn_Units_loc.mxd



Legend

Blue Line

150-ft Fuelbreak
(2,370 ft or 8 acres)

200-ft Fuelbreak
(49,775 ft or 226.3 acres)

Former Fort Old Boundary

DATE	12/18	REVISED	1/25/07
BY	CS/MS	BY	CS/MS
Shelby State, Elizabethton, TN Department of the Army Savannah District Corps of Engineers Lenoir County District Office			
FIGURE 1-2 CONTAINMENT CUTTING FOR 2007 BURN AREAS			
Prepared by: CS/MS, MS/MS, MS/MS, MS/MS Checked by: CS/MS, MS/MS, MS/MS, MS/MS Approved by: CS/MS, MS/MS, MS/MS, MS/MS			



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/17/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		
<i>Mark J. Good</i>	<i>[Signature]</i>	
<i>James Drake</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> <u>GEO Teams</u></p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> <u>200 FT BETWEEN TEAMS</u></p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/17/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline, sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: Exclusion zones between work teams 200 ft

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark Duell</i>
JAMES DRAKE	<i>James Drake</i>
JOHN SPARKS	<i>John Sparks</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
JOE TORTOLANO	<i>Joe Tortolano</i>
JOSH KING	<i>Josh King</i>
TARA VOLPE	<i>Tara Volpe</i>
JOHN JERKINS	<i>John Jerkins</i>

Meeting Conducted by: *Barbara*

Supervisor:

Manager:

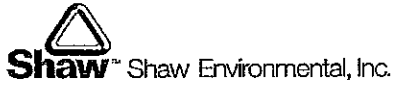
TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 04/17/2007

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED	SIGNATURE
Tim Mathisen	<i>Tim Mathisen</i>
Mike Lightner	<i>Mike Lightner</i>
Colin Chene	<i>Colin Chene</i>



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/17/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/17/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/17/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

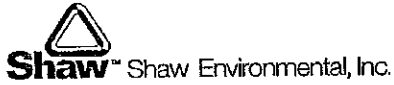
Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
Chris Scoville	<i>Chris Scoville</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 4/17/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

Equipment Nos: _____



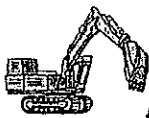
Date: 4/17/07

Equipment Type: Bobcat T-300

Location: Fert Ord

Equipment Hrs: 40 Hrs

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: CAT EXCAVATOR

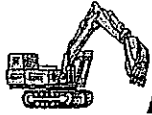
Equipment Hrs: 2017.3



Date: 4/17/07

Location: AUSTIN RD.

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGCI

Current time: April 17, 2007 - 16:36 PDT

Most Recent Observations at April 17, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	55.0° F	55.0 at 12:51	47.0 at 8:51	58.0 at 16:51	47.0 at 8:51
Dew Point	45.8° F	48.2 at 7:51	43.1 at 13:51	48.2 at 7:51	43.1 at 13:51
Relative Humidity	71%	97 at 4:51	66 at 14:51	97 at 4:51	66 at 16:51
Wind Speed	23 mph from W	23 at 15:51	10 at 6:51	23 at 15:51	10 at 6:51
Wind Gust	35 mph	35 at 15:51	18 at 10:51	35 at 15:51	18 at 10:51
Pressure	29.18 in	29.20 at 10:51	29.12 at 1:51	29.20 at 10:51	29.03 at 17:51
Sea Level Pressure	29.70 in	29.72 at 10:51	29.65 at 3:51	29.72 at 10:51	29.55 at 17:51
Altimeter	29.70 in	29.72 at 10:51	29.64 at 1:51	29.72 at 10:51	29.55 at 17:51
Solar Radiation	1165.0 W/m*m	1331.0 at 13:51	6.0 at 0:51	1331.0 at 13:51	3.0 at 20:51
Fuel Temperature	61.0° F	61.0 at 12:51	48.0 at 2:51	64.0 at 16:51	47.0 at 21:51
10 hr Fuel Moisture	12 gm	19 at 10:51	0 at 8:51	19 at 10:51	0 at 8:51
Battery voltage	12.90 volt	13.00 at 10:51	12.30 at 6:51	13.00 at 10:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: April 18, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	---	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	60	Lo	46	
Still	Moderate	High	NW@20mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	10
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	6
Pickup	2	Timberline	10
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Explosive venting operation to include MD cleanup from operation; Brush clearing MRA for 2007 burn

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).
None

6. Material Received: (Note inspection results and storage provided).
NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
<u>NONE</u>			

8. Off-site Surveillance Activities, Including Action Taken:
NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).
See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).
NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/18/07, UXOSO FADL 4/18/07, Brush escort FADL dtd 4/18/07, Tailgate safety Meeting dated 04/18/07, JSAs dated 04/18/07 GEO, UXO, and Brush clearance, Equipment inspections for Brush clearing equipment, Motor Vehicle Inspection (Explosive Movement) dated 04/18/07, Explosive Demolition Operation notification checklist dated 04/18/07, Explosive usage form dated 04/18/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



John H. Tortolano
SHAW-UXOQC Specialist

04/18/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: MEC Explosive Venting Operations.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:

0630 - Attended morning meetings.

0700 - UXO Disposal Team commenced setting up MEC for explosive venting operations.

0700 - One UXO Tech II supporting the 2007 Burn Area vegetation removal crew.

0730 - 1600 - Provided one UXO Tech to BLM.

0800 - 0845 - Received explosive materials needed for the venting operation from USACE Safety Rep.

1000 - Fire Department on site - MRS-16.

1215 - MEC explosive venting operation complete.

1215 - Secured Fire Department.

1300 - 1615 - Following lunch the MEC scrap resulting from the MEC venting operation was picked up, certified and placed in MEC scrap bins.

1615 - Field crew cleaned up all trucks and other field equipment.

1700 - Done for the day.

1730 - 1800 - Performed daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 40's. Afternoon very windy and in the 50's.	None



DAILY LOG	DATE	04	18	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate, Discussed today's Explosive Venting Operation and MD cleanup after operation. 0715: TM starting setup for demo operation MRS 16 0730: UXO Tech Supporting BLM. 0830: Explosives arrive at MRS 16 1215: Explosive Operation Complete. Begin MD cleanup 1555: TM secured MRS gate 1610: TM clean all vehicles and equipment 1700: COB <p style="text-align: center;">-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: NONE	
WEATHER CONDITIONS: Partly cloudy, 40 - 57 degree, very windy		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE:		DATE: 04/18/07	

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA		Project Number: 846075
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURW AREA		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 - TAILGATE SAFETY MEETING		
0645 - LEFT FOR WORKSITE		
0710 - ARRIVED WORKSITE, COMPLETED JSA, EQUIPMENT CHECKOUT, AND EQUIPMENT MAINTENANCE		
0725 - TAZ AND BOBCAT BEGIN CUTTING		
1130-1215 BREAK FOR LUNCH		
1500-1515 AFTERNOON BREAK		
1605 - SHUT DOWN FOR THE DAY, FUELED BOBCAT, AND MAINTAINED EQUIPMENT		
1630 - DEPARTED WORKSITE		
BOBCAT CUT APPROX. 800 FT		
TAZ CUT APPROX. 600 FT		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE:		
SIGNATURE: <i>[Signature]</i>		DATE: 4/18/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other: DEMO OP, SCHEDULED FOR 1000HRS

ATTENDEES

NAME PRINTED	SIGNATURE
John Sparakis	<i>[Signature]</i>
Josh King	<i>[Signature]</i>
Jim Mathison	<i>[Signature]</i>
James Drake	<i>[Signature]</i>
Joshua Salinas	<i>[Signature]</i>
John Tortolero	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
Colin Chung	<i>[Signature]</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND	
BOB SCOVILLE	
Chris Scoville	

Meeting Conducted by: JEFF STEINWAND



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/18/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		
John SPARKS	TJ Evg	
Josh King		
Tim Mathisen		
James Drake		

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

DEMOLITION OPERATIONS

Date: 4/18/2007
 Job#: 846475
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16; Former Fort Ord		
Required PPE: Mod "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw Field Office	JSA Prepared by: B. Tincknell Are other crews in area?
	Wind Direction: n/a Eucalyptus to Parker	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: Flats to 8th St to Joe	
	Assembly Point: Main Gate MRS-16	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Demolition Operations		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Fire		
MSD		
Traffic/Non-essential personnel		
Demolition shot misfire		Supervisor's Initials
Accidental detonation		
Recommended Action or Procedure		
Observe walking area/conditions		
No Demo operations in electrical storms or winds > 15 MPH		
2 ea 10 BC Fire extinguishers on and NO Smoking material within 100 ft		
Establish a Frag/Blast radius around each UXO to be disposed of		
Road blocks established, non-essential personnel kept out of Area		
Follow misfire procedures in SOP OE-005 Wait time 60 min		
Initiators and HE kept a minimum of 50 ft apart until needed. With proper storage and transport.		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/18/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/18/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/18/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEQ Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/18/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/18/2007
 Job#: 783751
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall ptential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
--	---	---

Equipment Nos: _____

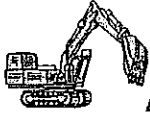
Date: 4/18/07

Equipment Type: 325CL EXCAVATOR

Location: AUSTIN RD

Equipment Hrs: 2024.6

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

MOTOR VEHICLE INSPECTION
(TRANSPORTING HAZARDOUS MATERIAL)

GBL. NO.	ORIGIN	DESTINATION
NAME OF CARRIER <i>Shaw</i>		
NAME OF DRIVER <i>Kirk Busse</i>		
DATE AND HOUR	<i>0730 ASP</i>	<i>0830 R-16</i>
INSTALLATION/ACTIVITY	FORT ORD, CALIFORNIA	
DIVER'S STATE PER MIT NO.	<i>KD 937841</i>	
MEDICAL EXAMINER'S CERTIFICATE AND DATE	<i>1/14/08</i>	

TYPE OF VEHICLE <input checked="" type="checkbox"/> TRUCK AND FULL TRAILER <input type="checkbox"/> TRACTOR AND DOUBLE TRAILERS <input type="checkbox"/> TRACTOR AND CLOSED SEMI-TRAILER <input type="checkbox"/> TRACTOR AND FLAT-BED TRAILER	TRUCK NUMBER <i>G623584A</i>	TRAILER(S) NUMBER	SLEEPER CAB YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	ORIGIN <i>Joe Lloyd</i>	ORIGIN	VALID LEASE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	DESTINATION <i>R-16</i>	DESTINATION	I.C.C. NUMBER

NOTE: All of the following items shall be checked on empty equipment prior to loading.
Items with an asterisk (*) shall be checked on incoming loaded equipment.

ITEM NO.	CHECK APPROPRIATE COLUMN (See reverse side for explanatory notes)	ORIGIN		DESTINATION		REMARKS (Explain unsatisfactory items; use reverse side if necessary)
		SAT	UNSAT	SAT	UNSAT	
1.	ENGINE, BODY, CAB AND CHASSIS CLEAN	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
2.	STEERING MECHANISM	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
3.	HORN OPERATIVE	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
4.	WINDSHIELD AND WIPERS	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
5.	SPARE ELECTRIC FUSES AVAILABLE	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
6.	REAR VIEW MIRRORS INSTALLED	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
7.	HIGHWAY WARNING EQUIPMENT	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
* 8.	FULL FIRE EXTINGUISHER INSTALLED (2)	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
9.	LIGHTS AND REFLECTORS OPERATIVE	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
10.	EXHAUST SYSTEM	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
* 12.	FUEL TANK, LINE AND INLET	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
* 14.	ALL BRAKES OPERATIVE	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
16.	SPRINGS AND ASSOCIATED PARTS	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
* 17.	TIRES	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
18.	CARGO SPACE	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
* 19.	ELECTRIC WIRING	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
* 20.	TAIL GATE AND DOORS SECURED	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
22.	ANY OTHER DEFECTS (Specify)					

APPROVED	(If rejected give reasons on reverse under Remarks. Equipment shall be approved if deficiencies are corrected prior to loading.)	SIGNATURE (of Inspector) ORIGIN	SIGNATURE (of Inspector) DESTINATION
REJECTED		<i>KLR</i>	

ITEMS TO BE CHECKED PRIOR TO RELEASE OF LOADED VEHICLE		ORIGIN	DESTINATION
23.	MIXTURES OF MATERIAL PROHIBITED BY DOT REGS. ARE NOT LOADED ONTO THIS VEHICLE	<input checked="" type="checkbox"/>	
* 24.	LOAD IS SECURED TO PREVENT MOVEMENT	<input checked="" type="checkbox"/>	
25.	WEIGHT IS PROPERLY DISTRIBUTED AND VEHICLE IS NOT OVERWEIGHT	<input checked="" type="checkbox"/>	
* 27.	SPECIAL INSTRUCTIONS (DD Form 836) FURNISHED DRIVER	<input checked="" type="checkbox"/>	
* 28.	COPY OF VEHICLE INSPECTION (DD Form 626) FURNISHED DRIVER	<input checked="" type="checkbox"/>	
* 29.	PROPER PLACARDS APPLIED	<input checked="" type="checkbox"/>	
* 30.	SHIPMENT MADE UNDER DOT EXCEPTION 868	<input checked="" type="checkbox"/>	

SIGNATURE (of Inspector) ORIGIN	SIGNATURE (of Driver) ORIGIN
SIGNATURE (of Inspector) DESTINATION	SIGNATURE (of Driver) DESTINATION

KLR *KLR*

Form M-2

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 6

SIZE AND WEIGHT: < 15 NEW EACH

TIME OF SHOT: 1000-1600

LOCATION: MRS-16

DATE: 4-18-07

HOW MANY SHOTS: _____

SIZE AND WEIGHT: _____

TIME OF SHOT: _____

LOCATION: _____

DATE: _____

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:
 LOCATION FOR FIRE TRUCK: _____

CALLED:

TIME

CALLER	PHONE NUMBER	TIME
FIRE DEPARTMENT:	242-7701	
FEDERAL POLICE:	242-7851	
CSU POLICE: (Non-Emergency)	655-0268	
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188	
BRAC	242-7909	
SAFETY OFFICE	242-6509	
BLM	394-8314 FORT ORD FAX / 394-8346	
U.S. ARMY CORPS OF ENGINEERS	884-9925 / FAX 884-9030	
PUBLIC AFFAIRS OFFICE	242-6430 / FAX 242-5464	
PARK RANGER HEADQUARTERS →	758-3604	0718
LAGUNA SECA RACEWAY	648-5117	
MONTEREY COMMUNICATIONS → (non-emergency)	373-1259 Left Message	0719
CSU PRESS RELATIONS	582-3653	
UNIFIED AIR POLLUTION CONTROL OF → MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210 Left Message	0720
EMERGENCY OPERATIONS CENTER → ATTN: RICH SAVKO	242-5784 / FAX 242-7028	0722
SHAW ENVIRONMENTAL, INC.	883-0103 / FAX 883-0152	

Mathisen, Tim

From: Siemann, Kevin **Sent:** Mon 4/2/2007 11:06 AM
To: Mathisen, Tim
Cc: Tortolano, John; Tincknell, Bruce
Subject: FW: Form -2 Explosive Demolition Operations (notice)
Attachments:

Tim:

A reduction in the number of calls we have to make for demo.

Kevin

-----Original Message-----

From: Shurtleff, Lyle [mailto:Lyle.Shurtleff@monterey.army.mil]
Sent: Monday, April 02, 2007 8:47 AM
To: Huckins, Clinton J SPK
Cc: Siemann, Kevin; Fisbeck, Karen M.
Subject: Form -2 Explosive Demolition Operations (notice)

Huck: Reference the form you gave me. The Shaw "CALLED" list for notice of detonations can be reduced to:

- 1 Park Ranger Headquarters: I can't get anyone at the phone, so I don't know what they need.
- 2 Monterey Communications: I can't get anyone at the phone (ironic eh?), so I don't know what they need.
- 3 MBUAPCD: They say they don't have anyone who can check email well enough.
- 4 Monterey County EOC ~~Emergency Operation Center~~

Unified Air Pollution Control District

All others can be sufficiently alerted by my email that I send out the day prior.

Lyle Shurtleff
 Manager, MMRP
 Fort Ord, BRAC
 (831) 242-7919

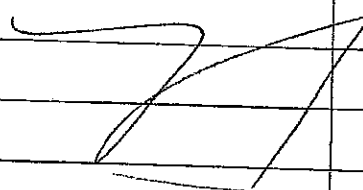
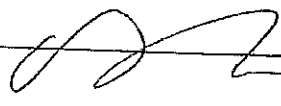

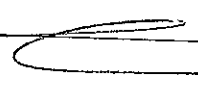
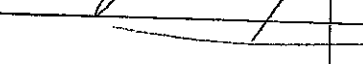
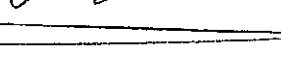

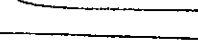
EXPLOSIVES USAGE RECORD

Team Number: 1 Date: 4-18-07

Team Leader: Jim Mathisen Project: FT. Rde MRS-16

EXPLOSIVES ISSUED			
Signature of Team Leader:			
Item	Quantity	Lot Number	Checker's Initials
Lead Live	2500 FT	23 FE04W1	JM
Lead Live	5000 FT	08JA07W1	JM
Det Cord	25 FT	101-01	JM
Charge Demo 186	150 FT	0V-1-15	JM
Set Perforators	10	31 AUG 04 C1	JM
NONEL CAPS	8	BBC GAI	JM

EXPLOSIVES EXPENDED			
Signature of Team Leader: <u>Jim Mathisen</u>			
Item	Quantity	Lot Number	Checker's Initials
Lead Live	2500 FT	23 FE04W1	JM
Lead Live	2500 5000 FT	08JA07W1	JM
Det Cord	25 FT	101-01	JM
Charge Demo 186	150 FT	0V-1-15	JM
Set Perforators	10	31 AUG 04 C1	JM
NONEL CAPS	8	BBC GAI	JM

EXPLOSIVES RETURNED			
Signature of SUXOS: <u>Jim Mathisen</u>			
Item	Quantity	Lot Number	Checker's Initials
			
			

Jim Mathisen
UXO Supervisor

4-18-07
Date

DAILY QUALITY CONTROL REPORT

DATE: April 19, 2007

DAY	S	M	T	W	THUR	F	S
-----	---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	58	Lo	46	
WIND	Still	Moderate	High	NW@10mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	10
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	10
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16; GEO acquiring and reacquiring targets at MRS-16; Brush clearing MRA for 2007 burn

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

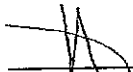
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/19/07, UXOSO FADL 4/19/07, Brush escort FADL dtd 4/19/07, Tailgate safety Meeting dated 04/19/07, JSAs dated 04/19/07 GEO, UXO, and Brush clearance, Equipment inspections for Brush clearing equipment

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



John H. Tortolano
SHAW-UXOQC Specialist

04/19/07

Date

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	0
Jack Tortolano	Acting UXO Safety/QC	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:
Note: Bruce Tincknell on leave. Jack Tortolano acting UXO Safety and QC.
0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Team conducting target investigations. One UXO Tech supporting Timberline vegetation removal crew.
0730 - 1300 - One UXO Tech supporting BLM activities.

Summary: UXO Teams investigated and cleared 131 target sites. One 2.36 inch Rocket and one M9 Rifle Grenade left in place and will be x-rayed to determine contents. Two orange QA seed items located and removed: One a 2.36 inch Rocket and one a 37mm projectile.

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS	
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS:	
Cloudy all day. Morning in the low 40's. Afternoon and in the mid 50's.		None	



L6

DAILY LOG	DATE	04	19	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed two digs teams and 2 Geo teams in the field, exclusion zone 200 ft between teams</p> <p>0650 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out</p> <p>0715: TM starting anomaly excavation MRS 16</p> <p>0900 Checked on teams. EM-61 seem to be working better.</p> <p>1100 MRA Brush clearing operation going well.</p> <p>1630: TM secured MRS gate</p> <p>1700: COB</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
<p>VISITORS ON SITE:</p> <p>NONE</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>NONE</p>
<p>WEATHER CONDITIONS:</p> <p>Partly cloudy, 40 - 58 degree</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 04/19/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE MEETING

0645 - DEPARTED FOR WORKSITE

0715 - ARRIVED WORKSITE, COMPLETED JSA, FUELED TAZ, AND CHANGED FUEL FILTER ON BOBCAT. EQUIPMENT INSPECTION SHEETS FILLED OUT AND CHECKS COMPLETED.

0750 - TAZ AND BOBCAT BEGIN CUTTING

1020 - BOBCAT SHUTDOWN TO CHANGE OIL

1055 - BOBCAT FINISHED OIL CHANGE AND BEGAN CUTTING AGAIN

1130 - 1215 BREAK FOR LUNCH

1500 - 1515 AFTERNOON BREAK

1615 - SHUT DOWN FOR THE DAY, PERFORMED EQUIPMENT MAINTENANCE

1630 - DEPARTED WORKSITE

BOBCAT CUT APPROX. 500 FT

TAZ CUT APPROX. 450 FT

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:	
-------------------------	--

SIGNATURE: *[Signature]* DATE: 4/19/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/19/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
John Testalano	
JAMES DRAKE	
JOHN SPARRIS	
Ism MATHISEW	
Joshua Jenkins	
Joshua King	
MARK ISABELL	
TARA VOLPE	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/19/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Chris Scoville	<i>Chris Scoville</i>
Ed Worth	<i>Ed Worth</i>
BOB SCOVILLE	<i>Bob Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/19/2007
 Job#: 846075
 Permit#:
 Issued By: J.Tortolano

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

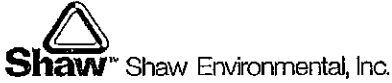
Date: 4/19/2007
 Job#: 846075
 Permit#:
 Issued By: J. Totolano

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/19/2007
 Job#: 846075
 Permit#:
 Issued By: J. Tortolano

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/19/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 4/19/2007

Job#: 846075

Permit#:

Issued By: J.Tortolano

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA						
Required PPE: : Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand				
	Safe Haven: Main Office	JSA Prepared by: B. Tincknell Are other crews in area? No				
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: N/A Evacuation Route: See Map	<table border="1"> <tr> <td>New:</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Revised:</td> <td><input type="checkbox"/></td> </tr> </table>	New:	<input checked="" type="checkbox"/>	Revised:	<input type="checkbox"/>
	New:		<input checked="" type="checkbox"/>			
Revised:	<input type="checkbox"/>					
Assembly Point:						
Job Task (What are You Doing)		Audit the Job Audit Time:				
Clearing and Grubbing of vegetative material including poison oak						
Potential Hazards		Supervisor's Comments				
UXO						
Slip, Trips, and Falls						
Possible hand or eye injury and overhead hazards						
Operation of heavy equipped mowers						
Poison oak						
Lifting						
Fueling of powered equipment						
Noise						
Recommended Action or Procedure		Supervisor's Initials				
Stay with UXO escort, do not touch any items on ground						
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting						
Safety vest, hearing protection, 400 ft throw radius around TAZ						
Barrier cream and cotton coveralls						
Use proper lifting techniques						
Proper lifting technique, 60 lb limit						
Keep away from all sources of ignition, wear proper PPE						
Hard hat with hearing protection						
Crew Name Signatures:						

JOB SAFETY ANALYSIS

Date: 4/19/2007
 Job#: 783751
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: BOBCAT T300

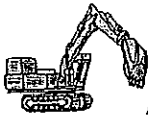
Equipment Hrs: 54.1



Date: 4/19/07

Location: AUSTIN RD

Supervisor: ED



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

- | ITEM | OK | Add | N/A | Comments |
|------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 19 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325 CL EXCAVATOR

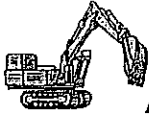
Equipment Hrs: 2033.1



Date: 4/19/07

Location: AUSTIN RD

Supervisor: ED



DAILY EQUIPMENT INSPECTION

ITEM *List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet*

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

DAILY QUALITY CONTROL REPORT

DATE: April 202007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	55	Lo	44	
WIND	Still	Moderate	High	NW@12mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	0
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	0
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	0
Bobcat with Brush hog attachment	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	10	N	4

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

No field work performed due to inclement weather

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

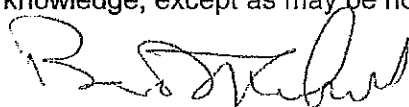
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/20/07, UXOSO FADL 4/20/07, Tailgate safety Meeting dated 04/20/07, JSAs dated 04/20/07 UXO,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/20/07

DATE

JOB SAFETY ANALYSIS

Date: 4/20/2007
 Job#: 846075
 Permit#:
 Issued By: J. Totolano

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/20/2007

Job#: 846075

Permit#:

Issued By: J. Tortolano

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		Supervisor's Initials
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	James Drake	
	Adrian Hernandez	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/20/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array

Other:

ATTENDEES

TARA NAME PRINTED	SIGNATURE
TARA VOLPE	
John Jenkins	
MARK L ISABELL	
John Totolano	
Jim MATHISEN	
John SPARKS	
JAMES DRAKE	
JEFF STEINWAND	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



L6

DAILY LOG	DATE	04	20	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; discussed weather 0650 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out 0830: COB work called due weather – heavy rain and winf -----Nothing Follows-----			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: SUXOS Called wok due to heavy rain	
WEATHER CONDITIONS: Cloudy, windy, and heavy rain		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE:		DATE: 04/20/07	

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	2
Bruce Tincknell	QC/Safety	0
Jack Tortolano	Acting UXO Safety/QC	2
Jimmy Drake	Team Leader	2
Mark Isabell	Team Leader	2
John Sparks	UXO Tech I	2
Jeff Steinwand	UXO Tech II	2
Tara Volpe	UXO Tech II	2
Josh Jenkins	UXO tech I	2
Josh King	UXO Tech II	2

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Area receiving heavy rain. UXO safety keeping track of weather conditions on the computer.
 0830 - Called off work today due to the area still receiving rain and the weather forecast indicates the rain will continue off and on for the rest of the day. The USACE Rep (Huck) agreed with our call.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Rain scheduled for most of the day. Morning in the low 40's. Afternoon and in the mid 60's.	None

DAILY QUALITY CONTROL REPORTDATE: April 23, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	59	Lo	42	
WIND	Still	Moderate	High	NW@19mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	0
PICK-UP	5	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush clearance 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/23/07, UXOSO FADL 4/23/07, Timberland escort FADL, Tailgate safety Meeting dated 04/23/07, JSAs dated 04/23/07 UXO, GEO and Brush clearance

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/23/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Two UXO Team conducting target investigations. One UXO Tech supporting Timberline vegetation removal crew.

Summary: UXO Teams investigated and cleared 191 target sites. Three 2.36 inch Rocket and one M9 Rifle Grenade left in place and will be x-rayed to determine contents. One orange 37mm projectile QA seed item located and removed.

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the mid 40's. Afternoon and in the low 60's. None

SIGNATURE: John Tortolano

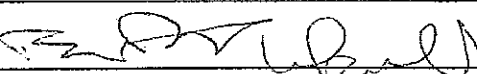
4/23/2007

page 1 of 1



DAILY LOG	DATE	04	23	07
	NO.			
	SHEET 1 OF 1			

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed 200 ft separation between work crews</p> <p>0650 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out</p> <p>0900 QC'd 128 dig records</p> <p>1100 2007 Burn area, observed operations, no problems</p> <p>1230 MRS 16, observing operations, QC'ing dig teams results</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
<p>VISITORS ON SITE:</p> <p>NONE</p>		<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>None</p>	
<p>WEATHER CONDITIONS:</p> <p>See Ft Ord weather report</p>		<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 04/23/07	

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA		Project Number: 846075
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 - TAILGATE MEETING		
0645 - DEPART FOR WORKSITE		
0720 - ARRIVE WORKSITE, MAINTENANCE PERFORMED ON EQUIPMENT, SAFETY CHECKOUTS STARTED, JSA COMPLETED		
0800 - MAINTENANCE COMPLETED, EQUIPMENT SAFETY CHECKOUTS COMPLETED, TAZ AND BOBCAT BEGIN CUTTING		
0945 - TAZ CALLED TO HAVE SOME ITEMS LOOKED AT, FOUND SMALL PILE OF OLD STYLE 60MM EXPENDED ILLUMINATION ROUNDS, MARKED WITH RED CAUTION TAPE AND LEFT IN PLACE		
1130-1215 BREAK FOR LUNCH, FUELED BOBCAT AFTER LUNCH		
1500-1515 AFTERNOON BREAK		
1615 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT, PERFORMED MAINTENANCE ON EQUIPMENT		
1630 - DEPARTED WORKSITE		
BOBCAT CUT APPROX. 600 FT		
TAZ CUT APPROX. 250 FT		
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:	
SHAW PERSONNEL ON SITE:		
SIGNATURE: <i>[Signature]</i>	DATE: 4/23/07	

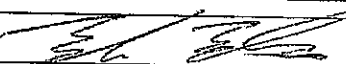

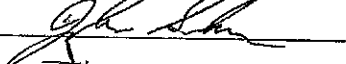
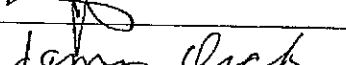
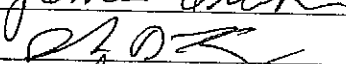
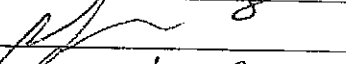


TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 04/23/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: MRS 16 Former Fort Ord, Ca.
 Type of Work: UXO Removal, and GEO Fill-in and reacquire
 Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask
 Chemical Hazards: Poison OAK, Paint, Dust, UXO,
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear, Small tractor, towed array
 Other:

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	
MARK ISABELL	
John SPARKS	
John Tortolano	
James Drake	
Josh King	
Mike Lightner	
Colin Chuang	

Meeting Conducted by: Ben Stuchman

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 4/23/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA
 Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog
 Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D
 Chemical Hazards: Poison OAK, Paint, Dust
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment
 Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Chris Scoville	<i>Chris Scoville</i>
BOB SCOVILLE	<i>Bob Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/23/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/23/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting		Supervisor's Initials
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/23/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p><input checked="" type="checkbox"/> X</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 4/23/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

Equipment Nos: _____

Equipment Type: 325CL EXCAVATOR

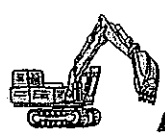
Equipment Hrs: 2,041.2



Date: 4/23/04

Location: AUSTIN RD.

Supervisor: ED



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

Equipment Nos: _____

Equipment Type: Bobcat T-300

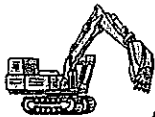
Equipment Hrs: 61.4



Date: 4/23/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Past Weather Conditions for RTGC1

Observations prior to selected time: April 24, 2007 - 00:00 PDT

Weather Conditions at April 23, 2007 - 23:51 PDT

	23:51	24 Hour Max	24 Hour Min
Temperature	48.0° F	59.0 at 12:51	42.0 at 5:51
Dew Point	46.1° F	48.5 at 14:51	40.7 at 5:51
Relative Humidity	93%	96 at 2:51	59 at 12:51
Wind Speed	9 mph from SW	15 at 14:51	4 at 12:51
Wind Gust	17 mph	22 at 14:51	8 at 8:51
Pressure	29.16 in	29.17 at 22:51	29.03 at 3:51
Sea Level Pressure	29.69 in	29.70 at 22:51	29.56 at 3:51
Altimeter	29.68 in	29.69 at 22:51	29.55 at 3:51
Solar Radiation	39.0 W/m ² m	1338.0 at 13:51	8.0 at 20:51
Fuel Temperature	46.0° F	70.0 at 12:51	41.0 at 6:51
10 hr Fuel Moisture	15 gm	25 at 6:51	10 at 18:51
Battery voltage	12.50 volt	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: April 24, 2007

DAY	S	M	<u>T</u>	W	THUR	F	S
-----	---	---	----------	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	59	Lo	42	
WIND	Still	Moderate	High	NW@10mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush clearance 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

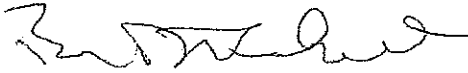
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/24/07, UXOSO FADL 4/24/07, Timberland escort FADL, Tailgate safety Meeting dated 04/24/07, JSAs dated 04/24/07 UXO, GEO and Brush clearance

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/24/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. **846075**
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Bruce Tincknell	QC/Safety	10.5
Jack Tortolano	SUXOS	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
John Sparks	UXO Tech I	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO tech I	10
Josh King	UXO Tech II	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0630-0710 - Watched Shaw E&I new Safety video
0700 - Two UXO Team conducting target investigations. One UXO Tech supporting Timberline vegetation removal crew.
1100-1200 - Attended weekly scheduling meeting with the USACE.

Summary: UXO Teams investigated and cleared 127 target sites. Three 2.36 inch Rocket and one M9 Rifle Grenade left in place 4/23/07 were x-rayed turned out to be practice. One orange MK-2 grenade QA seed item located and removed.

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the mid 40's. Afternoon and in the high 50's.	None



L6

DAILY LOG	DATE	04	24	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; crew watched mandatory Shaw safety video 0725 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out 0900 QC'd 275 dig records 1100 2007 Burn area, observed operations, no problems 1230 MRS 16, observing operations, QC'ing dig teams results 1635 MRS 16 secured 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE:		DATE: 04/24/07	

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA	Project Number: 846075
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:	
0630 - TAILGATE MEETING, WATCHED SHAW SAFETY VIDEO	
0720 - DEPARTED FOR WORKSITE	
0745 - ARRIVED WORKSITE, COMPLETED JSA, FUELED TAZ, PERFORMED MAINTENANCE ON EQUIPMENT, STARTED SAFETY CHECKOUT SHEETS, TAZ FIXED HYDRAULIC LEAK	
0800 - BOBCAT SAFETY CHECKOUT SHEET COMPLETE AND BEGAN CUTTING	
0830 - TAZ SAFETY CHECKOUT SHEET COMPLETE AND BEGAN CUTTING	
1130-1215 LUNCH BREAK	
1500-1515 AFTERNOON BREAK	
1615 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT, PERFORMED MAINTENANCE	
1630 - DEPARTED SITE	
BOBCAT CUT APPROX. 500 FT	
TAZ CUT APPROX. 250 FT	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE:	
SIGNATURE: <i>[Signature]</i>	DATE: 4/24/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/24/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: **SHAW Safety Video**

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	
Joshua Jenkins	
Joshua D King	
Mike Lightner	
James DRAKE	
Colin Chang	
TARA VOLPE	

Meeting Conducted by:

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/24/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

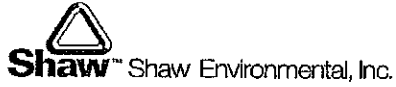
ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Chris Scoville	<i>Chris Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 4/24/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA						
Required PPE: Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand				
	Safe Haven: Main Office	JSA Prepared by: B. Tincknell Are other crews in area? No				
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: N/A Evacuation Route: See Map	<table border="1"> <tr> <td>New:</td> <td>X</td> </tr> <tr> <td>Revised:</td> <td></td> </tr> </table>	New:	X	Revised:	
	New:		X			
Revised:						
Assembly Point:						
Job Task (What are You Doing)		Audit the Job Audit Time:				
Clearing and Grubbing of vegetative material including poison oak						
Potential Hazards		Supervisor's Comments				
UXO						
Slip, Trips, and Falls						
Possible hand or eye injury and overhead hazards						
Operation of heavy equipped mowers						
Poison oak						
Lifting						
Fueling of powered equipment						
Noise						
Recommended Action or Procedure		Supervisor's Initials				
Stay with UXO escort, do not touch any items on ground						
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting						
Safety vest, hearing protection, 400 ft throw radius around TAZ						
Barrier cream and cotton coveralls						
Use proper lifting techniques						
Proper lifting technique, 60 lb limit						
Keep away from all sources of ignition, wear proper PPE						
Hard hat with hearing protection						
Crew Name Signatures:						



JOB SAFETY ANALYSIS

Date: 4/24/2007

Job#: 783751

Permit#:

Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: Bobcat T-300

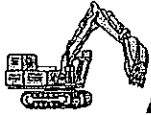
Equipment Hrs: 69



Date: 4/24/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Seaville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Date: 4/24/07

Equipment Type: 325cl EXCAVATOR

Location: AUSTIN RD

Equipment Hrs: 2049.1

Supervisor: ED



DAILY EQUIPMENT INSPECTION



List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

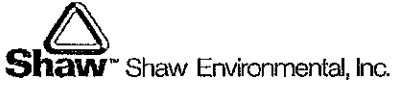
USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

LOOSE HYD. FITTING - TIGHTEND - OK -

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/24/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures: John Sparrows [Signature] [Signature] James Drake	[Signature] [Signature] [Signature]	

JOB SAFETY ANALYSIS

Date: 4/24/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented- non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>Reflective vest and hard hats near heavy equipment</p> <p><input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input checked="" type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p> <hr/>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/24/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/23/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliet _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p><input checked="" type="checkbox"/> Flammable</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p><input checked="" type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO Intrusive 200 ft</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: April 25, 2007 - 7:28 PDT

Most Recent Observations at April 25, 2007 - 6:51 PDT

	6:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	49.0° F	50.0 at 2:51	48.0 at 1:51	58.0 at 13:51	47.0 at 7:51
Dew Point	47.9° F	48.9 at 4:51	46.6 at 1:51	49.0 at 13:51	44.7 at 20:51
Relative Humidity	96%	96 at 4:51	95 at 0:51	97 at 7:51	72 at 11:51
Wind Speed	10 mph from WSW	137 at 0:51	9 at 5:51	137 at 0:51	3 at 7:51
Wind Gust	15 mph	22 at 3:51	15 at 6:51	25 at 16:51	6 at 7:51
Pressure	29.09 in	29.13 at 0:51	29.09 at 5:51	29.21 at 9:51	29.09 at 5:51
Sea Level Pressure	29.62 in	29.66 at 1:51	29.62 at 6:51	29.74 at 9:51	29.62 at 6:51
Altimeter	29.61 in	29.65 at 0:51	29.61 at 5:51	29.73 at 9:51	29.61 at 5:51
Solar Radiation	65.0 W/m*m	65.0 at 6:51	50.0 at 0:51	1331.0 at 13:51	2.0 at 21:51
Fuel Temperature	49.0° F	50.0 at 2:51	48.0 at 5:51	65.0 at 11:51	46.0 at 7:51
10 hr Fuel Moisture	18 gm	18 at 6:51	16 at 0:51	25 at 7:51	11 at 17:51
Battery voltage	12.30 volt	12.50 at 0:51	12.30 at 6:51	13.00 at 9:51	12.30 at 7:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: April 25, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	55	Lo	43	
WIND	Still	Moderate	High	NW@9mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif./Geophysics
2	Equip operator		Timberline	Ft Ord, Calif./Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush clearance 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

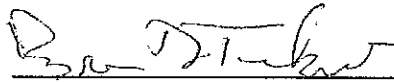
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/25/07, UXOSO FADL 4/25/07, Timberland escort FADL, Tailgate safety Meeting dated 04/25/07, JSAs dated 04/25/07 UXO, GEO and Brush clearance

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/25/07

DATE

DATE	4/25/2007
NO.	84
SHEET	1 of 1

F1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Team conducting target investigations. One UXO Tech supporting Timberline vegetation removal crew.

Summary: UXO Teams investigated and cleared 147 target sites. Sixteen 2.36 inch Rocket left in place to be xrayed
One blue M-19 rifle grenade QC seed item located and removed.

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the high 40's. Afternoon and in the low 50's.

None

SIGNATURE: John Tortolano

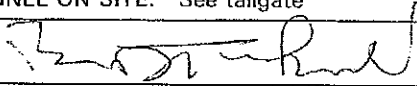
4/25/2007

page 1 of 1



DAILY LOG	DATE	04	25	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report		
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed foggy conditions</p> <p>0725 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out</p> <p>0900 QC'd 150 dig records</p> <p>1100 2007 Burn area, observed operations, no problems</p> <p>1330 MRS 16, observing operations, QC'ing dig teams results</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>		
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 	DATE: 04/25/07	

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	OF		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAIGATE MEETING

0645 - DEPART FOR WORKSITE

0715 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT SHEETS

0730 - SAFETY CHECKOUT SHEETS COMPLETED, TAZ AND BOBCAT BEGIN CUTTING

0900 - TASK MANAGER, PROJECT QC MANAGER, AND SHAW SAFETY CAME ONSITE TO RE-SURVEY CUT BOUNDARY, UXO SUXDS MADE SITE VISIT.

1130 - 1215 LUNCHBREAK

1500 - 1515 AFTERNOON BREAK

1615 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT

1630 - DEPARTED WORKSITE

BOBCAT CUT APPROX. 900FT

TAZ CUT APPROX. 400FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]*

DATE: 4/25/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/25/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	
Chris Scoville	

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 4/25/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/25/2007
 Job#: 783751
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL EXCAVATOR

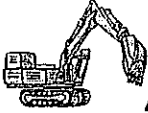
Equipment Hrs: 2055.9



Date: 4/25/07

Location: AUSTIN RD

Supervisor: Ed



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

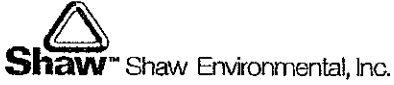
Weather Conditions for RTGC1

Current time: April 26, 2007 - 6:15 PDT

Most Recent Observations at April 26, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	43.0° F	48.0 at 1:51	43.0 at 5:51	55.0 at 14:51	43.0 at 5:51
Dew Point	41.4° F	45.5 at 1:51	41.4 at 5:51	48.9 at 14:51	41.4 at 5:51
Relative Humidity	94%	94 at 5:51	91 at 1:51	97 at 7:51	76 at 17:51
Wind Speed	9 mph from SSW	28 at 1:51	9 at 4:51	28 at 1:51	9 at 4:51
Wind Gust	12 mph	22 at 1:51	12 at 5:51	28 at 14:51	12 at 5:51
Pressure	28.95 in	29.01 at 0:51	28.95 at 5:51	29.13 at 9:51	28.95 at 5:51
Sea Level Pressure	29.48 in	29.54 at 0:51	29.48 at 5:51	29.66 at 10:51	29.48 at 5:51
Altimeter	29.47 in	29.53 at 0:51	29.47 at 5:51	29.65 at 9:51	29.47 at 5:51
Solar Radiation	58.0 W/m ² m	58.0 at 5:51	39.0 at 1:51	1062.0 at 14:51	22.0 at 22:51
Fuel Temperature	42.0° F	47.0 at 1:51	42.0 at 5:51	61.0 at 15:51	42.0 at 5:51
10 hr Fuel Moisture	18 gm	18 at 5:51	16 at 0:51	22 at 7:51	12 at 18:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 2:51	13.00 at 9:51	12.30 at 6:51

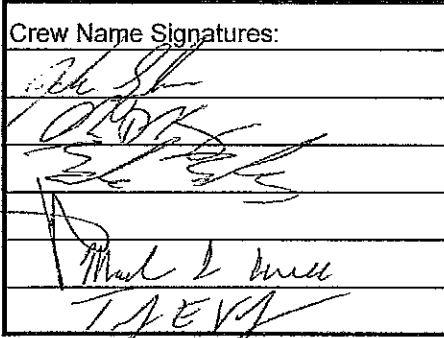
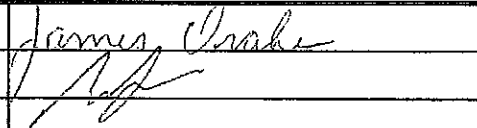
Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/25/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures: 		

JOB SAFETY ANALYSIS

Date: 4/25/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>X Coveralls _____</p> <p>Reflective vest and hard hats near heavy equipment _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>x Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>x Heat Stress _____</p> <p>x Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>x Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>X UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>x Flammable -Fuels _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>X <u>GEO Teams</u> _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>X <u>200 FT BETWEEN TEAMS</u> _____</p>
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Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/25/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
John SPARKS	
Joshua King	
Joshua Seck...	
Mark ISABELL	
John Tortolano	
TARA VOLPE	
James Drake	
Mike Lightner	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/25/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/25/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: April 26, 2007

DAY	S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	61	Lo	44	
WIND	Still	Moderate	High	NW@6mph	
HUMIDITY	Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush clearance 2007 Burn area, BLM escort

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Quality assurance memo (dtd 4/24/07) issued by USACE Safety Specialist Huckins

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/26/07, UXOSO FADL 4/26/07, Timberland escort FADL, Tailgate safety Meeting dated 04/26/07, JSAs dated 04/26/07 UXO, GEO and Brush clearance, QA Memo dtd 4/24/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/26/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. **846075**
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	7
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations. One UXO Tech supporting Timberline vegetation removal crew.
0730 - 1530 One UXO Tech supporting BLM
0730 - 0930 Josh King completed Defensive driving course
1100 - 1330 Mark Isabell completed defensive driving course
0730 - 1030 James Drake had a doctor appointment

Summary: UXO Team investigated and cleared 133 target sites. Five 2.36 inch Rocket moved to ESL awaiting explosive venting operation. All 2.36 rockets from report 84 moved to ESL awaiting venting operation. Movement approved by USACE.
Seeds found: One orange 2.36 rocket QA seed located and removed.

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon and in the low 60's.	None

SIGNATURE: John Tortolano

4/26/2007

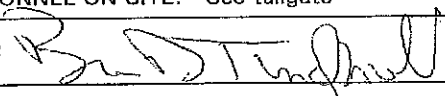
page 1 of 1



L6

DAILY LOG	DATE	04	26	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:			
0600: Prep for tailgate			
0630: Tailgate; warm sunny weather			
0725 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out			
0745 2 new personnel taking SHAW on-line driver's training course			
0900 QC'd 131 dig records			
1030 2007 Burn area, observed operations, no problems			
1330 MRS 16, observing operations, QC'ing dig teams results, took smoking receptacles to dig teams			
1635 MRS 16 secured			
1700: COB, no incidents or accidents			
-----Nothing Follows-----			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 04/26/07	

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA		Project Number: 846075
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.		
0630 - TAILGATE MEETING		
0650 - DEPART FOR WORKSITE		
0710 - ARRIVE WORKSITE, COMPLETE JSA, PERFORM MAINTENANCE ON EQUIPMENT		
0745 - SAFETY CHECKS COMPLETE, BOBCAT REPLACED BROKEN PIN RETAINING BOLT, BOBCAT AND TAZ BEGIN CUTTING		
1045 - BLM AND ESCORT PASSED THROUGH ON AUSTIN RD		
1130 - 1215 BREAK FOR LUNCH		
1245 - MEASURED CUT ON AUSTIN RD TO MAKE SURE IT DOES NOT EXCEED THE 200FT REQUIREMENT		
1500 - 1515 AFTERNOON BREAK		
1615 - STOPPED CUTTING FOR THE DAY, FUELED AND PERFORMED MAINTENANCE ON EQUIPMENT		
1630 - DEPARTED WORKSITE		
BOBCAT CUT APPROX. 600 FT.		
TAZ CUT APPROX. 400 FT.		
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:	
SHAW PERSONNEL ON SITE:		
SIGNATURE: <i>[Signature]</i>	DATE: 4/26/07	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/26/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Ensure Gate is Secured during working hours

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	<i>[Signature]</i>
MARK ISABELL	<i>[Signature]</i>
John SPARKS	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
John Tortolano	<i>[Signature]</i>
James DRAKE	<i>[Signature]</i>
Joshua King	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>

Meeting Conducted by: *[Signature]*

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/26/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Chris Scoville	<i>Chris Scoville</i>
Ed Worth	<i>Ed Worth</i>
BED SCOVILLE	<i>BE</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 4/26/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: : Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/26/2007
 Job#: 783751
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/26/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations		Supervisor's Comments
Potential Hazards		
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:	<i>[Signature]</i> <i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/26/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/26/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325cl Excavator

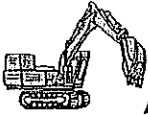
Equipment Hrs: 2064.1



Date: 4/26/07

Location: AUSTIN

Supervisor: Ed



DAILY EQUIPMENT INSPECTION

ITEM *List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet*

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts , Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Bob Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: Bobcat T-300

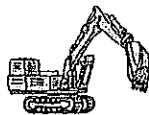
Equipment Hrs: 82.2



Date: 4/26/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

Broken Pin Retaining Bolt

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: April 27, 2007 - 6:59 PDT

Most Recent Observations at April 27, 2007 - 6:51 PDT

	6:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	47.0° F	48.0 at 4:51	44.0 at 3:51	61.0 at 12:51	44.0 at 3:51
Dew Point	43.6° F	46.9 at 4:51	42.9 at 3:51	48.7 at 12:51	42.6 at 7:51
Relative Humidity	88%	96 at 1:51	88 at 5:51	96 at 1:51	64 at 12:51
Wind Speed	3 mph from ESE	7 at 1:51	3 at 2:51	17 at 15:51	3 at 9:51
Wind Gust	8 mph	13 at 0:51	6 at 3:51	26 at 17:51	6 at 3:51
Pressure	28.91 in	28.93 at 0:51	28.90 at 5:51	28.97 at 8:51	28.90 at 5:51
Sea Level Pressure	29.44 in	29.46 at 0:51	29.43 at 5:51	29.50 at 8:51	29.43 at 5:51
Altimeter	29.43 in	29.45 at 0:51	29.42 at 5:51	29.49 at 8:51	29.42 at 5:51
Solar Radiation	45.0 W/m ²	66.0 at 0:51	44.0 at 4:51	1297.0 at 13:51	25.0 at 20:51
Fuel Temperature	47.0° F	48.0 at 0:51	43.0 at 3:51	71.0 at 11:51	43.0 at 3:51
10 hr Fuel Moisture	17 gm	19 at 3:51	16 at 0:51	19 at 3:51	10 at 16:51
Battery voltage	12.30 volt	12.50 at 0:51	12.30 at 5:51	13.00 at 8:51	12.30 at 7:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: April 27, 2007

DAY	S	M	T	W	THUR	E	S
-----	---	---	---	---	------	----------	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
HI	74	Lo	44	
Still	Moderate	High	NW@11mph	
Dry	Moderate	High		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	0
Bobcat with Brush hog attachment	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	6	N	40

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

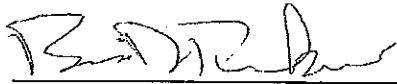
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/27/07, UXOSO FADL 4/27/07, Tailgate safety Meeting dated 04/27/07, JSAs dated 04/27/07 UXO and GEO

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/27/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	9
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Teams conducting target investigations.

Summary: UXO Teams investigated and cleared 213 target sites. No MEC encountered

Seeds found: None.

1700 - Field crew secured for the day.

1730 - 1800 - Daily/weekly admin duties were completed.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the low 40's. Afternoon in the low 70's.

None

SIGNATURE: John Tortolano

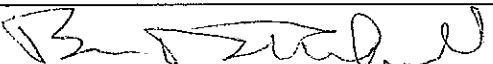
4/27/2007

page 1 of 1



DAILY LOG	DATE	04	27	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; port-a-potties move with team, no driving in grids, smoking in designated areas only</p> <p>0725 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out</p> <p>0900 QC'd 147 dig records</p> <p>1030 2007 Burn area, observed operations, no problems</p> <p>1300 QC'd 96 dig records</p> <p>1430 MRS 16, observing operations, QC'ing dig teams results,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 04/27/07	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/27/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: **Smoke only in Designated areas; NO OFF ROAD DRIVING – STAY OUT OF GRIDS**

ATTENDEES

NAME PRINTED	SIGNATURE
MARK L ISABELL	<i>Mark L Isbell</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
John SPARKS	<i>John Sparks</i>
Joshua King	<i>Joshua King</i>
John Tortolano	<i>John Tortolano</i>
JAMES DRAKE	<i>James Drake</i>
TARA VOLPE	<i>Tara Volpe</i>

Meeting Conducted by: *Ben D. [Signature]*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/27/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? No
	Wind Direction: Evacuation Route: Follow route maps	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/27/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 4/27/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/27/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: April 27, 2007 - 16:30 PDT

Most Recent Observations at April 27, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	65.0° F	74.0 at 11:51	44.0 at 3:51	74.0 at 11:51	44.0 at 3:51
Dew Point	49.9° F	54.3 at 12:51	42.9 at 3:51	54.3 at 12:51	42.9 at 3:51
Relative Humidity	58%	96 at 1:51	39 at 11:51	96 at 1:51	39 at 11:51
Wind Speed	11 mph from W	11 at 15:51	3 at 2:51	17 at 16:51	3 at 2:51
Wind Gust	17 mph	17 at 15:51	6 at 3:51	26 at 17:51	6 at 3:51
Pressure	28.92 in	28.93 at 0:51	28.90 at 5:51	28.94 at 21:51	28.90 at 5:51
Sea Level Pressure	29.43 in	29.46 at 0:51	29.42 at 13:51	29.47 at 22:51	29.42 at 13:51
Altimeter	29.44 in	29.45 at 0:51	29.42 at 5:51	29.46 at 21:51	29.42 at 5:51
Solar Radiation	1174.0 W/m ² m	1327.0 at 13:51	44.0 at 4:51	1327.0 at 13:51	25.0 at 20:51
Fuel Temperature	73.0° F	84.0 at 12:51	43.0 at 3:51	84.0 at 12:51	43.0 at 3:51
10 hr Fuel Moisture	8 gm	19 at 3:51	8 at 13:51	19 at 3:51	8 at 13:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 5:51	13.00 at 8:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00

DAILY QUALITY CONTROL REPORTDATE: April 30, 2007

DAY	S	<u>M</u>	T	W	THUR	F	S
-----	---	-----------------	---	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>64</u>	Lo	<u>43</u>	
Still	<u>Moderate</u>	High	<u>NW@12mph</u>	
Dry	Moderate	<u>High</u>		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	6	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush cutting 2007 Fire Break

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

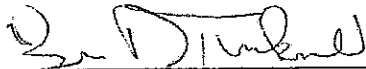
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

All digs to be measured to depth, especially seed digs

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 4/30/07, UXOSO FADL 4/30/07, UXO Escort for Brush crew FADL dtd 4/30/07 Tailgate safety Meeting dated 04/30/07, JSAs dated 04/30/07 UXO, GEO, and Brush Crew EQUIPMENT SCHEDULE

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

04/30/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valery Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0630-0930 Val Langstaff received all briefing associated with new site personnel.

0700 - Two UXO Teams conducting target investigations.

1000-1130 Attended meeting with USACE discussed filling in backhoe digs and finding edges of pits for mapping then moving out 5 ft past outer edge for GEO picks. Also discussed filling in the main trench to allow for anomaly investigation under spoils pile. Discussed a problem with depth differences in QA seed holes. We will now use rulers to measure all holes dug. Final discussion was the tree area which was put on hold until later date.

Summary: UXO Teams investigated and cleared 175 target sites. One MEC item encountered and moved to ESL.

Seeds found: One blue QC 37 mm projo recovered.

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the mid 40's. Afternoon in the mid 60's.	None

SIGNATURE: John Tortolano

4/30/2007

page 1 of 1



L6

DAILY LOG	DATE	04	30	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; 0725 Watched the team check their instruments at the test pit, Set on level 4, All the units checked out; In-process and safety brief for Valerie Langstaff 0900 QC'd 209 dig records 1030 2007 Burn are observing operations, no problems 1100 MRS-16 QC'ing dig teams results, observed operations, no problems, 1130 Picked up PDA's, took them to office for Lieng to fix 1300 PDA's returned to Dig teams 1400 QC'd 90 dig records 1500 MRS 16, observing operations, QC'ing dig teams results, 1635 MRS 16 secured 1700: COB, no incidents or accidents -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 04/30/07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630-TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE

0725 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED EQUIPMENT MAINTENANCE

0745 - SAFETY CHECKOUTS COMPLETE, TAZ AND BOBCAT BEGIN CUTTING

1130-1215 LUNCH BREAK

1200 - FIRE DEPARTMENT ON SITE SURVEYING THE VEG CUT

1315 - FIRE DEPARTMENT DEPARTED SITE, TOOK MEASUREMENT OF CUT TO ENSURE PROPER DISTANCE OF 200FT IS NOT EXCEEDED

1500-1515 AFTERNOON BREAK

1615 - STOPPED CUTTING, FUELED EQUIPMENT

1630-DEPARTED WORKSITE

TAZ CUT APPROX. 500FT BOBCAT CUT APPROX. 500FT

VISITORS ON SITE: FIRE DEPARTMENT	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]* DATE: 4/30/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/30/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	[Signature]
John STRAS	[Signature]
MATT TRABELLI	Matt Trabelli
JEFF STEINWAND	Jeff Steinwand
BOB SCOVILLE	[Signature]
Chris Scoville	Chris Scoville

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 04/30/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: **Smoke only in Designated areas; NO OFF ROAD DRIVING – STAY OUT OF GRIDS**

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	
John SPARKS	
John Tortalano	
VALERIE LANGSTAFF	
Joshua King	
MARK ISABELL	
JAMES DIKAKI	
TARA VOLPE	

Meeting Conducted by:

Supervisor:

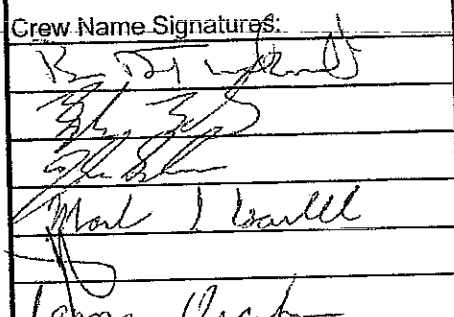
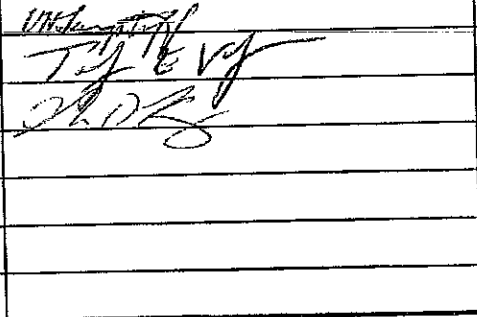
Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 4/30/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures: 		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 4/30/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 4/30/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects <input checked="" type="checkbox"/></p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable <input checked="" type="checkbox"/></p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination Poison Oak <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input checked="" type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other <input checked="" type="checkbox"/></p> <p>UXO Intrusive 200 ft <input checked="" type="checkbox"/></p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there 	

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 4/30/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA						
Required PPE: Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand				
	Safe Haven: Main Office	JSA Prepared by: B. Tincknell Are other crews in area? No				
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: N/A Evacuation Route: See Map	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>New:</td> <td style="text-align: center;">X</td> </tr> <tr> <td>Revised:</td> <td></td> </tr> </table>	New:	X	Revised:	
	New:		X			
Revised:						
Assembly Point:						
Job Task (What are You Doing)		Audit the Job Audit Time:				
Clearing and Grubbing of vegetative material including poison oak						
Potential Hazards		Supervisor's Comments				
UXO						
Slip, Trips, and Falls						
Possible hand or eye injury and overhead hazards						
Operation of heavy equipped mowers						
Poison oak						
Lifting						
Fueling of powered equipment						
Noise						
Recommended Action or Procedure		Supervisor's Initials				
Stay with UXO escort, do not touch any items on ground						
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting						
Safety vest, hearing protection, 400 ft throw radius around TAZ						
Barrier cream and cotton coveralls						
Use proper lifting techniques						
Proper lifting technique, 60 lb limit						
Keep away from all sources of ignition, wear proper PPE						
Hard hat with hearing protection						
Crew Name Signatures:						

JOB SAFETY ANALYSIS

Date: 4/30/2007
 Job#: 783751
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: Robcat T-300

Equipment Hrs: 59.8



Date: 4/30/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Seville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325 CL EXCAVATOR

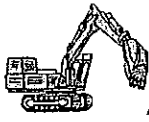
Equipment Hrs: 2071



Date: 4/30/07

Location: AUSTIN RD

Supervisor: Ed
NOT ON SITE



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOUILLÉ

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 1, 2007 - 7:42 PDT

Most Recent Observations at May 1, 2007 - 6:51 PDT

	6:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	43.0° F	48.0 at 0:51	43.0 at 6:51	64.0 at 11:51	43.0 at 6:51
Dew Point	40.3° F	42.1 at 3:51	39.5 at 1:51	50.1 at 10:51	39.5 at 1:51
Relative Humidity	90%	90 at 6:51	76 at 0:51	98 at 7:51	56 at 15:51
Wind Speed	11 mph from SW	12 at 0:51	10 at 3:51	16 at 16:51	2 at 11:51
Wind Gust	17 mph	20 at 0:51	15 at 4:51	23 at 20:51	6 at 7:51
Pressure	28.91 in	28.92 at 0:51	28.90 at 2:51	28.99 at 8:51	28.88 at 17:51
Sea Level Pressure	29.44 in	29.45 at 0:51	29.43 at 2:51	29.52 at 8:51	29.40 at 17:51
Altimeter	29.43 in	29.44 at 0:51	29.42 at 2:51	29.51 at 8:51	29.40 at 17:51
Solar Radiation	0.0 W/m*m	0.0 at 0:51	0.0 at 0:51	1416.0 at 13:51	0.0 at 21:51
Fuel Temperature	42.0° F	47.0 at 0:51	42.0 at 6:51	76.0 at 11:51	42.0 at 6:51
10 hr Fuel Moisture	15 gm	15 at 6:51	10 at 0:51	23 at 7:51	9 at 17:51
Battery voltage	12.30 volt	12.50 at 0:51	12.30 at 5:51	13.00 at 9:51	12.30 at 7:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 1, 2007

DAY	S	M	<u>T</u>	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif.
 DELIVERY ORDER NO. 0016
 CONTRACT NO. DACW05-96-D-0011
 PROJECT NO. 846075

WEATHER	Sunny	<u>Clear</u>	Overcast	Rain	Fog
TEMP: H/L	Hi	<u>61</u>	Lo	<u>43</u>	
WIND	Still	<u>Moderate</u>	High	<u>NW@5mph</u>	
HUMIDITY	Dry	Moderate	<u>High</u>	<u>90%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
3	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	6	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	3	Timberline	30
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush cutting 2007 Fire Break

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

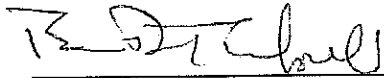
NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).
11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)
FADL SUXOS, dtd 5/1/07, UXOSO FADL 5/1/07,UXO Escort for Brush crew FADL dtd 5/1/07 Tailgate safety Meeting dated 05/01/07, JSAs dated 05/01/07 UXO, GEO, and Brush Crew

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/01/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Two UXO Teams conducting target investigations. One UXO Tech supporting Timberline.
 1100-1145 Attended weekly scheduling meeting

Summary: UXO Teams investigated and cleared 147 target sites. Four MEC item encountered and moved to ESL.

Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

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VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: Morning in the mid 40's. Afternoon in the low 60's.	IMPORTANT TELEPHONE CALLS: None

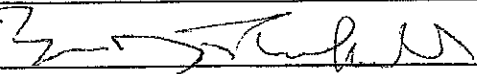
SIGNATURE: John Tortolano	5/1/2007	page 1 of 1
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L6

DAILY LOG	DATE	05	01	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed measuring seeds and digs accurately.</p> <p>0715 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0900 QC'd 151 dig records</p> <p>1030 2007 Burn are observing operations, no problems</p> <p>1100 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1500 MRS 16, observing operations, QC'ing dig teams results,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 5/01/07	

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG. BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE

0725 - ARRIVE WORKSITE, START EQUIPMENT SAFETY CHECKOUTS, PERFORMED MAINTENANCE, COMPLETED JSA

0800 - COMPLETED SAFETY CHECKOUT, TAZ AND BOBCAT STARTED CUTTING

1130-1215 LUNCHBREAK

1315 - MEASURED CUT TO ENSURE THAT IT DOESN'T EXCEED THE 200FT REQUIREMENT

1415 - TASK MANAGER, PROJECT QC MANAGER, ON SITE TO SURVEY CUT AREA

1500-1515 AFTERNOON BREAK

1605 - STOPPED CUTTING, FUELED EQUIPMENT

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 250 FT.

BOBCAT CUT APPROX. 600 FT.

VISITORS ON SITE: PROJECT TASK MANAGER, PROJECT QC MANAGER	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]*

DATE: 5/1/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/1/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 ft debris throw around heavy cutting machinery

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Chris Scavillo	<i>Chris Scavillo</i>
EID WORTH	<i>Eid Worth</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/1/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear.

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark Isabell</i>
Joshua Jenkins	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
John Tortolow	<i>[Signature]</i>
JAMES DRAKE	<i>James Drake</i>
Mike Lightner	<i>[Signature]</i>
TARA VAPE	<i>TARA VAPE</i>
Chuck Nicum	<i>Chuck</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/1/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand
	Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
		Audit the Job Audit Time:
Job Task (What are You Doing)		Supervisor's Comments
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Initials
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/1/2007
 Job#: 783751
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/1/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No						
	Wind Direction: Evacuation Route: Follow route maps							
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">New:</td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> <tr> <td>Revised:</td> <td style="text-align: center;">X</td> <td></td> </tr> </table>	New:			Revised:	X	
New:								
Revised:	X							

Job Task (What are You Doing)	Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line	
Potential Hazards	Supervisor's Comments
Lifting	
Slip, Trip, and Falls	
Cuts and abrasions	
Poison oak	
UXO	
Dust	
Heavy equipment operations	
Driving on/off range. Off range as posted. On range 5 - 10 MPH	
Recommended Action or Procedure	Supervisor's Initials
Observe walking areas	
Proper lifting technique, weight limit of 60 lbs	
Wear work gloves	
Mod "D" PPE, Clean PPE/Work boots with alcohol	
Use of Dust Mask	
Water intake, stay hydrated	
Hard hats and reflective vest when spotting for heavy equipment	
Eye contact with equipment operator	

Crew Name Signatures:		
<i>Mark Decker</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>James Orbach</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 5/1/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space
 Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 5/1/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/1/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <hr/> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input checked="" type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO Intrusive 200 ft</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325CL EXCAVATOR

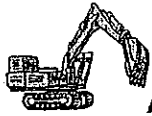
Equipment Hrs: 2079.8



Date: 5/1/07

Location: AUSTIN Rd

Supervisor: Ed



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: Bobcat T-300

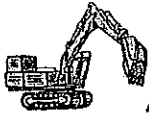
Equipment Hrs: 96.9



Date: 5/1/07

Location: Fort Ord

Supervisor: Ed



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 2, 2007 - 6:10 PDT

Most Recent Observations at May 2, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	52.0° F	53.0 at 4:51	51.0 at 1:51	61.0 at 14:51	43.0 at 6:51
Dew Point	49.2° F	51.3 at 4:51	49.2 at 5:51	51.3 at 4:51	40.3 at 6:51
Relative Humidity	90%	96 at 1:51	90 at 5:51	96 at 1:51	50 at 14:51
Wind Speed	6 mph from S	8 at 0:51	4 at 4:51	24 at 15:51	4 at 4:51
Wind Gust	9 mph	13 at 1:51	7 at 4:51	32 at 15:51	7 at 4:51
Pressure	28.93 in	28.96 at 3:51	28.93 at 5:51	28.96 at 22:51	28.90 at 7:51
Sea Level Pressure	29.45 in	29.48 at 3:51	29.45 at 5:51	29.48 at 3:51	29.41 at 14:51
Altimeter	29.45 in	29.48 at 3:51	29.45 at 5:51	29.48 at 22:51	29.42 at 7:51
Solar Radiation	3.0 W/m ² m	16.0 at 1:51	3.0 at 0:51	1354.0 at 13:51	0.0 at 6:51
Fuel Temperature	53.0° F	53.0 at 5:51	51.0 at 1:51	68.0 at 13:51	42.0 at 6:51
10 hr Fuel Moisture	16 gm	16 at 1:51	15 at 0:51	16 at 1:51	8 at 15:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 3:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 2, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER

	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	HI 61		Lo	43	
WIND	Still	Moderate	High	NW@17mph	
HUMIDITY	Dry	Moderate	High	75%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
8	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	6	Y	60
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	30
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush cutting 2007 Fire Break

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

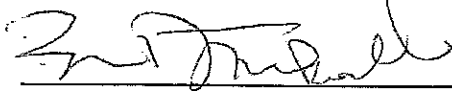
See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/1/07, UXOSO FADL 5/2/07, UXO Escort for Brush crew FADL dtd 5/2/07 Tailgate safety Meeting dated 05/02/07, JSAs dated 05/02/07 UXO, GEO, and Brush Crew

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/02/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Two UXO Teams conducting target investigations. One UXO Tech supporting Timberline. One Tech supporting GEO

Summary: UXO Teams investigated and cleared 98 target sites. Two MEC item encountered and moved to ESL.
 One 37 mm LE, MK II, UXO found and left in place awaiting venting operation.

Seeds found: One orange QA seed, MK 2 grenade

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the mid 40's. Afternoon in the low 60's.	None



DAILY LOG	DATE	05	02	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA PROJECT NO: 846075

FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

0600: Prep for tailgate
 0630: Tailgate; wet weather possible
 0715 Watched the team check their instruments at the test pit, Set on level 4,
 0900 QC'd 152 dig records
 1030 2007 Burn are observing operations, no problems
 1100 MRS-16 QC'ing dig teams results, observed operations, no problems,
 1330 QC'd 32 dig records
 1500 MRS 16, observing operations, Checked located UXO (37mm) QC'ing dig teams results,
 1635 MRS 16 secured
 1700: COB, no incidents or accidents

-----Nothing Follows-----

VISITORS ON SITE:
 Lou Hunter, USACE GEO.
 MARTY MEILE, SHAW GEO MANAGER

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
 None

WEATHER CONDITIONS:
 See Ft Ord weather report

IMPORTANT TELEPHONE CALLS:
 None

SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE:

DATE: 5/02/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA	Project Number: 846075
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,	
0630 - TAILGATE SAFETY MEETING	
0650 - DEPART FOR WORKSITE	
0715 - ARRIVE WORKSITE, START SAFETY CHECKOUTS, COMPLETED JSA, PERFORMED MAINTENANCE	
0745 - TAZ SAFETY CHECKOUTS COMPLETED, TAZ AND BOBCAT BEGIN CUTTING	
0900 - MEASURED CUT TO ENSURE THAT IT DOES NOT EXCEED THE 200FT REQUIREMENT	
1130 - BOBCAT FINISHED CUTTING UP TO WATKINS RD SOUTH OF BLUE LINE, MOVED BOBCAT OVER TO AUSTIN RD TO CUT PRE-EXISTING FIREBREAK ON EITHER SIDE OF AUSTIN RD, TAZ GREASED BEARINGS IN CUTTING HEAD AND TIGHTENED UP LOOSE PARTS, LUNCH BREAK.	
1240 - TAZ AND BOBCAT START CUTTING AGAIN	
1445 - USACE GEO AND SHAW GEO ON SITE PASSING THROUGH LOOKING AT CUT AREA	
1500 - MEASURED CUT TO MAKE SURE THAT IT DOES NOT EXCEED THE 200FT REQUIREMENT	
1500-1515 AFTERNOON BREAK	
1615 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT	
1630 - DEPARTED WORKSITE	
TAZ CUT APPROX. 250FT	
BOBCAT CUT APPROX. 200FT	
VISITORS ON SITE: USACE GEO - LOU SHAW GEO - MARTY	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE:	
SIGNATURE: <i>[Signature]</i>	DATE: 5/2/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/2/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: POSSIBLE WET - RAINY WEATHER

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Chris Scoville	<i>Chris Scoville</i>
BOB SCOVILLE	<i>Bob Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

LI

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/2/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: **POSSIBLE WET – RAINY WEATHER TODAY**

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	<i>[Signature]</i>
Joshua Jenkins	<i>[Signature]</i>
John SPARKS	<i>[Signature]</i>
VALERIE LANGSTAFF	<i>[Signature]</i>
John Tortolano	<i>[Signature]</i>
CHUCK MYCUM	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
Jeremy Blum	<i>[Signature]</i>

Meeting Conducted by: *[Signature]*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:	<i>James Drake</i> <i>[Signature]</i> <i>[Signature]</i> <i>[Signature]</i> <i>[Signature]</i>	

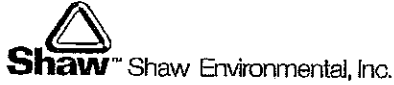


JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/2/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/2/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input checked="" type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input type="checkbox"/> Flammable -Fuels</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> <u>GEO Teams</u></p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input checked="" type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL EXCAVATOR

Equipment Hrs: 2088.1

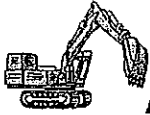


Date: 5/2/07

Location: AUSTIN RD

Supervisor: Ed

NOT ON SITE



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

- 1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.
- 2 Check Hydraulic Oil Level, Cap And Vent.
- 3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.
- 4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).
- 5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)
- 6 Check For Oil or Coolant Leaks.
- 7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI.
- 8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.
- 9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.
- 10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.
- 11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.
- 12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.
- 13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.
- 14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.
- 15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.
- 16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.
- 17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.
- 18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.
- 19 Verify The Presence Of The Operations / Maintenance Manual.
- 20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.

OK	Add	N/A	Comments
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: Bobcat T-300

Equipment Hrs: 104.1



Date: 5/2/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 2, 2007 - 16:25 PDT

Most Recent Observations at May 2, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	59.0° F	60.0 at 13:51	51.0 at 1:51	60.0 at 16:51	51.0 at 21:51
Dew Point	50.4° F	53.8 at 10:51	48.3 at 6:51	53.8 at 10:51	47.0 at 20:51
Relative Humidity	73%	96 at 1:51	71 at 13:51	96 at 1:51	64 at 16:51
Wind Speed	17 mph from W	17 at 15:51	4 at 4:51	20 at 16:51	4 at 4:51
Wind Gust	24 mph	24 at 15:51	7 at 4:51	32 at 16:51	7 at 4:51
Pressure	29.00 in	29.00 at 15:51	28.93 at 5:51	29.00 at 15:51	28.92 at 20:51
Sea Level Pressure	29.52 in	29.52 at 15:51	29.45 at 7:51	29.52 at 15:51	29.44 at 20:51
Altimeter	29.52 in	29.52 at 15:51	29.45 at 5:51	29.52 at 15:51	29.44 at 20:51
Solar Radiation	1237.0 W/m ² m	1421.0 at 14:51	0.0 at 6:51	1421.0 at 14:51	0.0 at 21:51
Fuel Temperature	67.0° F	68.0 at 14:51	51.0 at 1:51	68.0 at 14:51	49.0 at 23:51
10 hr Fuel Moisture	15 gm	23 at 12:51	14 at 8:51	23 at 12:51	8 at 16:51
Battery voltage	12.90 volt	12.90 at 9:51	12.30 at 6:51	12.90 at 16:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.01", in 24 hours: 0.01"

FIELD ACTIVITY DAILY LOG

Daily Log	Date:	5-2-07
	No.	
	Sheet	1 of 1

PROJECT NAME: FORT ORD, CA Project Number: 846075
 FIELD ACTIVITY SUBJECT: Gen HES / MRS 16 / Fire break 787851

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630: Tailgate, TSA paperwork
 0800: Package & mail out. Radiation meter to calibration
 Prep equip for OP staking Firebreak lead line
 1000: Begin op staking Fire break in Area 'A' along Watkins gate
 w/ Steve Bennett. Could not get stake on corner of Watkins gate
 & Austin due to veg. Rain causing several delays
 1600: Return to office Paperwork.
 1700: COB

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: Rain in Am, Sun in PM IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: See Tailgate
 SIGNATURE: *[Signature]* DATE: 5-2-07

DAILY QUALITY CONTROL REPORTDATE: May 3, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.

WEATHER

DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	58		Lo	45	
Still	Moderate	High	NW@12mph		
Dry	Moderate	High	95%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	10
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	30
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Anomaly reacquire and fill-in MRS-16, Brush cutting 2007 Fire Break

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

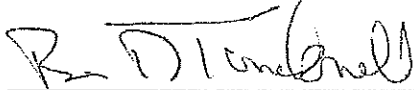
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Test/Training; EM-61 procedures in tree areas, process approved by USACE, FWV will be written by Marty Meile

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/1/07, UXOSO FADL 5/3/07, UXO Escort for Brush crew FADL dtd 5/3/07 Tailgate safety Meeting dated 05/03/07, JSAs dated 05/03/07 UXO, GEO, and Brush Crew; Equipment inspections - Timberland

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/03/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh King	UXO Tech II	0
Valerie Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One UXO Team conducting target investigations. One UXO Tech supporting Timberline. One Tech supporting BLM

Summary: UXO Team investigated and cleared 65 target sites. Seven 2.36 Rkts MEC item encountered and moved to ESL.

Seeds found: One blue QC 37 mm projo

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note: Tara called in sick, Josh call in for a personal day.

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<p>VISITORS ON SITE:</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS</p>
<p>WEATHER CONDITIONS:</p> <p>Morning in the high 40's. Afternoon in the mid 50's.</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>



DAILY LOG	DATE	05	03	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; 0715 Watched the team check their instruments at the test pit, Set on level 4, 0730 MRS-16 observing EM-61 test in tree areas with Kevin Siemann, Marty Meile, and Lou Hunter (USACE) 0930 QC'd 52 dig records 1030 2007 Burn are observing operations, no problems 1100 MRS-16 QC'ing dig teams results, observed operations, no problems, 1330 2007 Burn area, removed 190 lbs of MDE, placed in FACT bin MRS-16 1500 MRS 16, observing operations, 1635 MRS 16 secured 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----	
VISITORS ON SITE: Lou Hunter, USACE GEO. MARTY MEILE, SHAW GEO MANAGER	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/03/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE, FUELED GSA VEHICLE

0725 - ARRIVED WORKSITE, COMPLETED JSA, PERFORMED MAINTENANCE ON EQUIPMENT, STARTED EQUIPMENT SAFETY CHECKOUTS

0745 - COMPLETED SAFETY EQUIPMENT CHECKOUTS, TAZ AND BOBCAT START CUTTING

0900 - TAZ SHUT DOWN TO CHECK BEARINGS AND TEETH ON CUTTER HEAD, HAD SOME VIBRATION WHILE CUTTING, WILL NEED TO REPLACE SOME TEETH SOON

0945 - TAZ STARTS CUTTING AGAIN

0950 - BOBCAT SHUTDOWN TO FIX RIGHT SIDE TRACK THAT STARTED COMING OFF

1015 - BOBCAT TRACK BACK ON AND STARTED CUTTING AGAIN

1130 - 1215 LUNCH BREAK

1310 - BOBCAT WENT BACK TO SHOP TO PICK UP MOWING DECK, QC/SAFETY AND SUXOS CAME OUT AND REMOVED MUNITIONS DEBRIS FROM CUT AREA (190 lbs)

1345 - BOBCAT BACK ON SITE WITH MOWING DECK AND CUTTING AGAIN

1500 - 1515 AFTERNOON BREAK

1610 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT, PERFORMED MAINTENANCE ON EQUIPMENT

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 400 FT BOBCAT CUT APPROX. 2000 FT OF EXISTING FIREBREAK

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeff Steward* DATE: 5/3/07

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/3/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

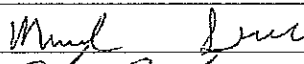
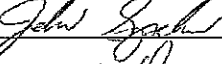
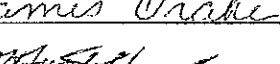
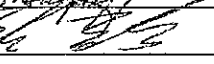
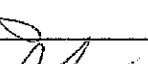
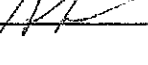

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

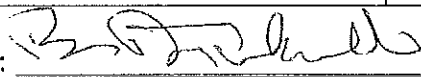
Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	
John SPARKS	
JAMES DRAKE	
ISABELLE LANGSTAFF	
Joshua Jenkins	
John Ventolano	
Mike Lightner	

Meeting Conducted by: 

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/3/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 FT safe area around equipment

ATTENDEES

NAME PRINTED	SIGNATURE
BOB SCOVILLE	<i>TR</i>
Chris Scoville	<i>Chris Scoville</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/3/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center; font-weight: bold;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		
<i>Mark Ferrer</i>		
<i>John Sp...</i>		
<i>James Drake</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 5/3/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/3/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Wind Direction: Evacuation Route: Follow route maps		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/3/2007
 Job#: 84G075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p> <p>X Reflective vest and hard hats near heavy equipment _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>x Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>x Heat Stress _____</p> <p>x Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>x Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>X UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>x Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>x Skin Contamination Poison Oak _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>x Other _____</p> <p>x UXO Intrusive 200 ft _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/3/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA						
Required PPE:: Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand				
	Safe Haven: Main Office	JSA Prepared by: B. Tincknell Are other crews in area? No				
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: N/A Evacuation Route: See Map	<table border="1"> <tr> <td>New:</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Revised:</td> <td><input type="checkbox"/></td> </tr> </table>	New:	<input checked="" type="checkbox"/>	Revised:	<input type="checkbox"/>
	New:		<input checked="" type="checkbox"/>			
Revised:	<input type="checkbox"/>					
Assembly Point:						
Job Task (What are You Doing)		Audit the Job Audit Time:				
Clearing and Grubbing of vegetative material including poison oak						
Potential Hazards		Supervisor's Comments				
UXO						
Slip, Trips, and Falls						
Possible hand or eye injury and overhead hazards						
Operation of heavy equipped mowers						
Poison oak						
Lifting						
Fueling of powered equipment						
Noise						
Recommended Action or Procedure		Supervisor's Initials				
Stay with UXO escort, do not touch any items on ground						
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting						
Safety vest, hearing protection, 400 ft throw radius around TAZ						
Barrier cream and cotton coveralls						
Use proper lifting techniques						
Proper lifting technique, 60 lb limit						
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle						
Hard hat with hearing protection						
Crew Name Signatures:						

JOB SAFETY ANALYSIS

Date: 5/3/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



Equipment Nos: _____
 Equipment Type: Bobcat T-300
 Equipment Hrs: 111.4

Date: 5/3/07
 Location: Fort Ord
 Supervisor: Ed-



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____



Equipment Nos: _____

Date: 5/3/07

Equipment Type: 325 CL EXCAVATOR

Location: AUSTIN + DOWDOME

Equipment Hrs: 2095.2

Supervisor: Ed. (NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SLOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGCI

Current time: May 4, 2007 - 6:12 PDT

Most Recent Observations at May 4, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	51.0° F	52.0 at 3:51	47.0 at 1:51	58.0 at 13:51	45.0 at 6:51
Dew Point	49.6° F	49.7 at 3:51	43.9 at 1:51	49.7 at 3:51	38.2 at 14:51
Relative Humidity	95%	95 at 5:51	83 at 0:51	95 at 5:51	52 at 13:51
Wind Speed	12 mph from WSW	15 at 4:51	3 at 1:51	18 at 16:51	3 at 1:51
Wind Gust	-	24 at 4:51	9 at 2:51	25 at 16:51	6 at 6:51
Pressure	28.87 in	28.96 at 0:51	28.85 at 4:51	29.10 at 9:51	28.85 at 4:51
Sea Level Pressure	29.39 in	29.49 at 0:51	29.37 at 4:51	29.62 at 10:51	29.37 at 4:51
Altimeter	29.39 in	29.48 at 0:51	29.37 at 4:51	29.62 at 9:51	29.37 at 4:51
Solar Radiation	33.0 W/m ² m	33.0 at 5:51	0.0 at 0:51	1314.0 at 12:51	0.0 at 21:51
Fuel Temperature	52.0° F	53.0 at 4:51	47.0 at 2:51	66.0 at 12:51	42.0 at 6:51
10 hr Fuel Moisture	19 gm	19 at 4:51	15 at 1:51	20 at 6:51	9 at 15:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 2:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

FIELD ACTIVITY DAILY LOG

Daily Log	Date:	5	3	07
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Gen H ES / MRS 16 / Fire break 788781

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630: Tailgate JSAs Paperwork (Eye wash for MRS 16.)
 0800: Out to MRS 16 site visit Deliver eye wash
 0900: Over to Range 37 site visit @ New ESL location
 0930: Depart site to Don's Lock & Key for veh. & MRA Keys.
 1100: Return to office Paperwork.
 1130: Lunch
 1200: Load Fire ext. & deliver to Pom Fire Dept. for refill
 meet w/ Chief Rizza ref. log. support. fuel veh after meeting
 1330: To DOL to Get info on Radio Frequencies
 1430: Return to office. Return fire ext. Holmes & Vince painting "keep clear" stripes on floor as per Peters office inspection. meet w/ Kevin ref. Subs driving veh. Research info on SSHP. (MRA Policy) & Veh insurance
 1700: COB

VISITORS ON SITE: Sunny - Ptlly cloudy 52-70° CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Sunny - Ptlly cloudy 52-70° IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: See Tailgate
 SIGNATURE: [Signature] DATE: 5-3-07

DAILY QUALITY CONTROL REPORTDATE: May 4, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	58		Lo	47	
Still	Moderate		High	W@15mph	
Dry	Moderate		High	81%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	20
PICK-UP	3	Y	30
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	10
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	0
Bobcat with Brush hog attachment	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	10	N	40

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

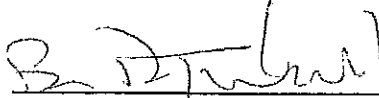
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/4/07, UXOSO FADL 5/4/07, Tailgate safety Meeting dated 05/04/07, JSAs dated 05/04/07 UXO,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/04/07

DATE



DAILY LOG	DATE	05	04	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed Holiday weekend and driving; 25 mile rule for trucks</p> <p>0715 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0830 QC'd 150 dig records</p> <p>1030 2007 Burn are observing operations, no problems</p> <p>1100 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1300 MRS 16, observing operations, QC'ing dig teams results, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/04/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Two UXO Teams conducting target investigations.

Summary: UXO Teams investigated and cleared 191 target sites. Sixteen UXO items recovered, 14 M1A1 mines, 1 M1A1 mine fuze, 1 M49 trip flare, and One DMM, 1 ea M 125 ground signal.

Seeds found: One blue QC Mk 2 grenade

1700 - Field crew secured for the day.
 1730 - 1800 - Daily/Weekly admin duties were completed.

Note: Jeff took a personal day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the mid 50's.	None



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/4/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: **HOLIDAY WEEKEND – DO NOT DRINK AND DRIVE – 25 MILE LIMIT ON SHAW VEHICLES**

ATTENDEES

NAME PRINTED	SIGNATURE
TARA VOLPE	
Joshua Jenkins	
Mark ISABELL	
John Tortolano	
JAMES DRAKE	
Valerie Langstaff	
Joshua D. King	

Meeting Conducted by:

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/4/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		<u>Supervisor's Initials</u>
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:	[Handwritten Signatures]	
[Handwritten Signature]		
[Handwritten Signature]		
[Handwritten Signature]		
[Handwritten Signature]		
[Handwritten Signature]		

JOB SAFETY ANALYSIS

Date: 5/4/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects <input checked="" type="checkbox"/></p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>LUXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <p>Reflective vest and hard hats near heavy equipment <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable -Fuels <input checked="" type="checkbox"/></p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out <input checked="" type="checkbox"/></p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test <input checked="" type="checkbox"/></p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting <input checked="" type="checkbox"/></p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing <input checked="" type="checkbox"/></p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other <input checked="" type="checkbox"/></p> <p>200 FT BETWEEN TEAMS</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: May 4, 2007 - 16:10 PDT

Most Recent Observations at May 4, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	55.0° F	58.0 at 12:51	47.0 at 1:51	58.0 at 12:51	47.0 at 1:51
Dew Point	49.3° F	51.9 at 13:51	43.9 at 1:51	51.9 at 13:51	40.9 at 16:51
Relative Humidity	81%	96 at 7:51	79 at 12:51	96 at 7:51	61 at 16:51
Wind Speed	15 mph from W	15 at 4:51	3 at 1:51	18 at 16:51	3 at 1:51
Wind Gust	26 mph	26 at 15:51	9 at 2:51	26 at 15:51	8 at 23:51
Pressure	28.95 in	28.96 at 0:51	28.85 at 4:51	29.05 at 16:51	28.85 at 4:51
Sea Level Pressure	29.47 in	29.49 at 0:51	29.37 at 4:51	29.57 at 16:51	29.37 at 4:51
Altimeter	29.47 in	29.48 at 0:51	29.37 at 4:51	29.57 at 16:51	29.37 at 4:51
Solar Radiation	904.0 W/m*m	1367.0 at 13:51	0.0 at 0:51	1367.0 at 13:51	0.0 at 21:51
Fuel Temperature	60.0° F	64.0 at 13:51	47.0 at 2:51	64.0 at 13:51	47.0 at 2:51
10 hr Fuel Moisture	16 gm	35 at 9:51	0 at 7:51	35 at 9:51	0 at 7:51
Battery voltage	12.90 volt	13.00 at 9:51	12.30 at 6:51	13.00 at 17:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.03", in 24 hours: 0.03"

DAILY QUALITY CONTROL REPORTDATE: May 7, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi 82	Lo	56		
WIND	Still Moderate	High	W@14mph		
HUMIDITY	Dry Moderate	High	26%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	10
PICK-UP	4	Y	30
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	2
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting along 2007 burn perimeter

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

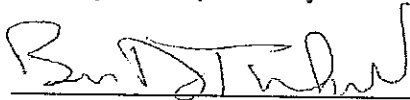
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/7/07, UXOSO FADL 5/7/07, UXO escort brush cutting 5/7/07, Tailgate safety Meeting dated 05/07/07, JSAs dated 05/07/07 UXO, GEO, and Brush cutting, equipment inspections for brush crew, FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/07/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline

Summary: UXO Teams investigated and cleared 157 target sites. Seven UXO items recovered, 5 ea M1A1 mines, 1ea M1A1 mine fuze, 1 ea M 9 Rifle grenade and 11ea MEC 2.36 " rockets.

Seeds found: None

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

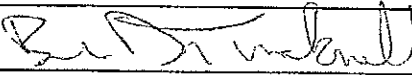
Note: Jeff took a personal day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the low 80's.	None



DAILY LOG	DATE	05	07	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed HOT, SUNNY WEATHER, stay hydrated and use sun screen</p> <p>0715 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0830 QC'd 190 dig records, GRID C3A2D1 can not be completed due to scrap bin and Torpedo</p> <p>1030 2007 Burn are observing operations, no problems</p> <p>1100 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1300 MRS 16, observing operations, QC'ing dig teams results, no problems,</p> <p>1400 TM 2 located 2 ea empty oil cans buried in grid C3A2A6-0076, soil slightly discolored, notified Kevin Siemann</p> <p>1500 Kevin, Eric Schmidt, USACESO, and BRAC environmental on site, looked at containers and hole, decided that there is no contamination. Containers will be turned-in to base environmental.</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: 	DATE: 5/07/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

- 0630 - TAILGATE SAFETY MEETING
 - 0700 - DEPART FOR WORKSITE
 - 0720 - ARRIVED WORKSITE, COMPLETED JSA, PERFORMED MAINTENANCE ON EQUIPMENT, STARTED EQUIPMENT SAFETY CHECKOUTS
 - 0745 - COMPLETE SAFETY EQUIPMENT CHECKOUTS, TAZ + BOBCAT START CUTTING
 - 0845 - BOBCAT MOVED FROM WATKINS GATE TO AUSTIN RD GATE AREA
 - 1000 - TAZ SHUTS DOWN TO GET PARTS FROM SUPERVISOR
 - 1020 - TAZ STARTS CUTTING AGAIN
 - 1130 - 1215 - LUNCH BREAK
 - 1310 - TAZ SHUTS DOWN FOR GREASING EQUIPMENT
 - 1340 - TAZ STARTS CUTTING ~~AGAIN~~ AGAIN
 - 1500 - 1515 - AFTERNOON BREAK
 - 1610 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT, PERFORMED MAINTENANCE ON EQUIPMENT
 - 1630 - DEPARTED WORKSITE
- TAZ CUT APPROX 450 FT BOBCAT CUT APPROX 400 FT OF EXISTING FIREBREAK

TJ EJ

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *TJ EJ* DATE: 7 MAY 07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/7/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 FT safe area around equipment

ATTENDEES

NAME PRINTED

SIGNATURE

<u>Chris Scoville</u>	<u>Chris Scoville</u>
<u>BOB SCOVILLE</u>	<u>[Signature]</u>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/7/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Sealans	
VALERIE LANGSTAFF	
John SPARKS	
MARK ISABELL	
CHUCK NYCOM	
Joshua King	
JAMES DRAKE	
John Totolano	

Meeting Conducted by:

Supervisor:

Manager:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/7/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/7/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
- GEO Teams**
- PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/7/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/7/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/7/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE.: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		<u>Supervisor's Comments</u>
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection		
Crew Name Signatures:	 	

JOB SAFETY ANALYSIS

Date: 5/7/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: Bobcat T-300

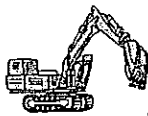
Equipment Hrs: 118.5



Date: 5/7/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325CL EXCAVATOR

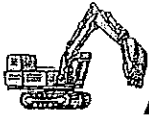
Equipment Hrs: 2102.0



Date: 5/7/07

Location: AUSTIN + NOWHERE

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

- 1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.
- 2 Check Hydraulic Oil Level, Cap And Vent.
- 3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.
- 4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).
- 5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)
- 6 Check For Oil or Coolant Leaks.
- 7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____
- 8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.
- 9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.
- 10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.
- 11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.
- 12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.
- 13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.
- 14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.
- 15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.
- 16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.
- 17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.
- 18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.
- 19 Verify The Presence Of The Operations / Maintenance Manual.
- 20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.

OK	Add	N/A	Comments
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BAR SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 7, 2007 - 16:31 PDT

Most Recent Observations at May 7, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	76.0° F	82.0 at 13:51	56.0 at 2:51	82.0 at 13:51	56.0 at 2:51
Dew Point	38.6° F	44.0 at 8:51	34.3 at 14:51	44.0 at 20:51	34.3 at 14:51
Relative Humidity	26%	63 at 2:51	18 at 14:51	63 at 2:51	18 at 14:51
Wind Speed	14 mph from W	14 at 15:51	2 at 0:51	54 at 20:51	2 at 21:51
Wind Gust	21 mph	21 at 15:51	5 at 6:51	21 at 15:51	5 at 6:51
Pressure	28.90 in	28.93 at 7:51	28.90 at 15:51	28.93 at 16:51	28.90 at 15:51
Sea Level Pressure	29.40 in	29.45 at 7:51	29.40 at 15:51	29.45 at 7:51	29.40 at 15:51
Altimeter	29.42 in	29.45 at 7:51	29.42 at 15:51	29.45 at 16:51	29.42 at 15:51
Solar Radiation	1208.0 W/m ² m	1360.0 at 13:51	2.0 at 0:51	1360.0 at 13:51	1.0 at 21:51
Fuel Temperature	83.0° F	93.0 at 12:51	53.0 at 2:51	93.0 at 12:51	53.0 at 2:51
10 hr Fuel Moisture	1 gm	4 at 2:51	1 at 13:51	4 at 2:51	1 at 13:51
Battery voltage	12.80 volt	12.90 at 8:51	12.30 at 5:51	12.90 at 8:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 8, 2007

DAY

S	M	T	W	THUR	F	S
---	----------	----------	---	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER		Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	HI	82		Lo	47	
WIND	Still	Moderate		High	WSW@7mph	
HUMIDITY	Dry	Moderate		High	26%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	10
PICK-UP	6	Y	30
PICK-UP	2	GSA	10
Polaris 4 X 4 RTV	1	N	10
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting along 2007 burn perimeter

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

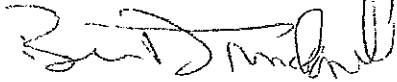
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/8/07, UXOSO FADL 5/8/07, FADL UXO escort brush cutting 5/8/07, Tailgate safety Meeting dated 05/08/07, JSAs dated 05/08/07 UXO, GEO, and Brush cutting, equipment inspections for brush crew, FT Ord Weather report, HOT Work permit 2007 burn for blade sharpening

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/08/07
DATE



L6

DAILY LOG	DATE	05	08	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed working in trees and near the road, watch for people on road; also finding buried containers and residue in the soil, contact QC or SUXOS</p> <p>0715 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0830 QC'd 157 dig records,</p> <p>1030 2007 Burn are observing operations, no problems</p> <p>1100 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1300 MRS 16, observing operations, QC'ing dig teams results, no problems, 1 QA Seed located</p> <p>1330 POM Fire Dept Risk assessment for DEMO Shot on Fri, all OK, they will send assessment to BRAC</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/08/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	0
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting real time EM-61 operations One UXO tech supporting Timberline, One supporting GEO
 0745 - 1630 One UXO tech supporting BLM
 1100 - 1200 Attended weekly scheduling meeting with USACE.

Summary: UXO Team investigated and cleared 15 tree grid polygons. No MEC found

Seeds found: One orange QA seed # 27 grid B3J4E2

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note: Jimmy took a sick day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the high 70's.	None

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPARTED FOR WORKSITE

0720 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT

0745 - BOBCAT SAFETY CHECKOUT COMPLETE AND STARTED CUTTING

0755 - TAZ SAFETY CHECKOUT COMPLETE AND STARTED CUTTING

0845 - SHAW SAFETY ONSITE WITH HOT-WORK PERMIT, BOBCAT OPERATOR BRIEFED ON PROPER PPE AND HOT-WORK OPERATION, BOBCAT CUTTING HEAD PROPERLY BLOCKED AND OPERATOR BEGAN GRINDING TEETH ON CUTTING HEAD

0930 - HOT-WORK COMPLETE, BOBCAT STARTED CUTTING AGAIN

1130-1215 LUNCHBREAK

1330 - TAZ STOPS CUTTING TO REPLACE WORE OUT TEETH ON CUTTING HEAD

1500-1515 AFTERNOON BREAK

1630 - COMPLETED REPLACEMENT OF TEETH ON CUTTING HEAD, DEPARTED WORKSITE FOR THE DAY

TAZ CUT APPROX. 200FT

BOBCAT CUT APPROX. 600FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeff Stearns*

DATE: 5/8/07



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/8/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 FT safe area around equipment, Hot Dry conditions – spark/flames

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Chris Scoville	<i>Chris Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Li

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/8/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Discolored soils, smells, and/or discarded cans, drums or other containers report to UXOSO

ATTENDEES

NAME PRINTED	SIGNATURE
Mark L ASABELL	<i>[Signature]</i>
Suzanne Spolans	<i>[Signature]</i>
John [unclear]	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
Joshua King	<i>[Signature]</i>
TARA VULPE	<i>[Signature]</i>
KAREN LANGSTAFF	<i>[Signature]</i>
John Tortolero	<i>[Signature]</i>

Meeting Conducted by: *[Signature]*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/8/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/8/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

JOB SAFETY ANALYSIS

Date: 5/8/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>X Coveralls _____</p> <p>Reflective vest and hard hats near heavy equipment _____</p> <p>X _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>x Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>x Heat Stress _____</p> <p>x Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>x Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>x UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>x Flammable -Fuels _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>X GEO Teams _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>X 200 FT BETWEEN TEAMS _____</p>
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Confined Space
Know the Following:
 * Possible hazards within the confined space
 * First signs of exposure
 * How to summons help
 * How to track personnel
 * Entering and exiting the confined space
 * Maintain contact with all entrants by voice or visual
 * Do not attempt to rescue unless you are a part of a coordinated effort
 * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/8/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point:	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/8/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:



Procedure No.
Revision No.
Date of Revision
Last Review Date
Page

HS314
0
04/25/02
04/25/02
6 of 6

**ATTACHMENT 2
HOT WORK PERMIT**

Project Name Ft Ord (Firebreak) Project No. 846 075
 Good for This Date Only 5/8/07 Time: From 0830 ~~AM/PM~~ To 1600 ~~AM/PM~~
 Hot Work Area Range 26 Pad
 Specific Work to be Done Grinding Mower Blades
 Personal Protective Equipment Required: Hard hat, steel toes, Safety Glasses, Face shield
Ear plugs, long sleeve shirt
 Emergency Equipment Required: Fire ext. Commo.

CHECKLIST	INITIAL:	
	YES	DOES NOT APPLY
Area personnel have been informed of work to be performed.	✓	
All tanks, lines, valves are disconnected, blinded, or blocked out.		
Electrical service has been locked out and tagged.		
Equipment and all attached piping has been cleaned and purged with (check blank): Water _____ Steam _____ Inert Gas _____ Air _____		✓
All grounding/bonding wire in place.		✓
Surrounding equipment and operations are safe for hot work.	✓	
No open vessels, lines, or combustible items within 35 feet of hot work area.	✓	
Fully charged and appropriate fire extinguisher easily accessible.	✓	
Fire watch has been provided.	✓	
No flammable gases greater than 10% LEL in hot work area.	✓	
Compressed gas cylinders kept upright and secured.	✓	
Air monitoring required.		✓

AIR MONITORING (If Required)						
EXACT LOCATION OF TEST	TIME	% LOWER EXPLOSIVE LIMIT	% OXYGEN	OTHER TEST	OTHER TEST	INITIAL

Special Instructions: Put positive block on equipment

Completed By: John Taitelrose Signature [Signature] Date 5/8/07
Printed Name

HOT-WORK PERMIT

For use of this form, see AR 420-90; the proponent agency is ACSIM

1. LOCATION <i>Range 26 / MRA</i>	2. DATE <i>8 May 07</i>	3. PERMIT NO. <i>07-010</i>
4. TYPE WORK <i>Cutting / Grinding</i>	5. START TIME <i>0900</i>	6. FINISH TIME <i>1700</i>
7. a. NAME OF PERSON RESPONSIBLE FOR HOT-WORK AT JOB SITE (Contractor/Government Employee) <i>Valee, Val 750-5718</i>	7. b. SIGNATURE <i>[Signature]</i>	

PRECAUTIONS BEFORE OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
8. Did Fire Department Inspector inspect site?	<input checked="" type="checkbox"/>	
9. Are there procedures for Fire Department emergency notification? (Emergency No.)	<input checked="" type="checkbox"/>	
10. Are combustibles in area noted?	<input checked="" type="checkbox"/>	
11. Should combustibles be covered? (If yes, note in remarks)		<input checked="" type="checkbox"/>
12. Are proper extinguishers on hand?	<input checked="" type="checkbox"/>	
13. Is wet-down necessary? (If yes, note in remarks)		<input checked="" type="checkbox"/>
14. Is smoking permissible at work sites?		<input checked="" type="checkbox"/>
15. Is continuous fire watch required?		<input checked="" type="checkbox"/>
16. Is Fire Department standby required?		<input checked="" type="checkbox"/>
17. Are other precautions required? (If yes, note in remarks)		<input checked="" type="checkbox"/>
18.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE <i>[Signature]</i>	18.b. DATE <i>8 May 07</i>	

PRECAUTIONS AFTER OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
19.a. Was Fire Department notified after hot-work operation was completed?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
19.b. Time:		
20.a. Did Fire Department inspector inspect work site?		<input checked="" type="checkbox"/>
20.b. Time:		
21. Are after work conditions safe? (If no, note in remarks)	<input checked="" type="checkbox"/>	
22. Are heat producing devices safe if left at work site?		<i>NA</i>
23.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE	23.b. DATE	

24. REMARKS

GRINDER WAS USED TO SHARPEN CUTTING HEAD TEETH ON BOBCAT, GRINDER BACK IN TOOLBOX OF TIMBERLINE TRUCK

NOTE: PERMIT VALID ON DAY OF OPERATION AT ONE LOCATION ONLY

Equipment Nos: _____

Equipment Type: 325 CL EXCAVATOR

Equipment Hrs: 2110.8

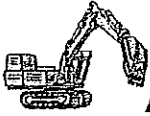


Date: ~~5/7/07~~ 5/8/07

Location: NOWHERE RE

Supervisor: Ed

(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM *List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet*

- 1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.
- 2 Check Hydraulic Oil Level, Cap And Vent.
- 3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.
- 4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).
- 5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)
- 6 Check For Oil or Coolant Leaks.
- 7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____
- 8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.
- 9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.
- 10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.
- 11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.
- 12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.
- 13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.
- 14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.
- 15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.
- 16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.
- 17 **Lube All Moving Parts**, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.
- 18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.
- 19 **Verify The Presence Of The Operations / Maintenance Manual.**
- 20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.

OK	Add	N/A	Comments
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: Bobcat T-300

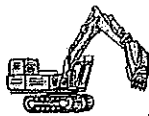
Equipment Hrs: 125.3



Date: 5/8/07

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

Need to sharpen teeth on cutting head

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 9, 2007 - 6:58 PDT

Most Recent Observations at May 9, 2007 - 6:51 PDT

	6:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	47.0° F	52.0 at 0:51	47.0 at 3:51	82.0 at 11:51	47.0 at 3:51
Dew Point	46.5° F	49.7 at 0:51	46.2 at 3:51	51.9 at 22:51	36.8 at 18:51
Relative Humidity	98%	98 at 4:51	92 at 0:51	98 at 4:51	25 at 12:51
Wind Speed	3 mph from WSW	8 at 0:51	3 at 3:51	11 at 15:51	2 at 8:51
Wind Gust	7 mph	12 at 1:51	7 at 6:51	18 at 14:51	4 at 8:51
Pressure	28.86 in	28.87 at 1:51	28.86 at 0:51	28.92 at 7:51	28.84 at 19:51
Sea Level Pressure	29.39 in	29.40 at 3:51	29.38 at 0:51	29.43 at 7:51	29.34 at 19:51
Altimeter	29.38 in	29.39 at 1:51	29.38 at 0:51	29.44 at 7:51	29.36 at 19:51
Solar Radiation	41.0 W/m*m	59.0 at 2:51	6.0 at 0:51	1373.0 at 13:51	1.0 at 21:51
Fuel Temperature	49.0° F	50.0 at 0:51	48.0 at 1:51	91.0 at 11:51	48.0 at 1:51
10 hr Fuel Moisture	27 gm	27 at 5:51	10 at 0:51	27 at 5:51	0 at 16:51
Battery voltage	12.30 volt	12.40 at 0:51	12.30 at 2:51	12.90 at 8:51	12.30 at 2:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00

DAILY QUALITY CONTROL REPORT

DATE: May 9, 2007

DAY

S	M	T	<u>W</u>	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

WEATHER

	Sunny	Clear	Overcast	Rain	Fog
Hi	55		Lo	47	
Still	Moderate		High	WNW@713mph	
Dry	Moderate		High	85%	

DELIVERY ORDER NO. 0016

TEMP: H/L

CONTRACT NO. DACW05-96-D-0011

WIND

PROJECT NO. 846075

HUMIDITY

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	10
PICK-UP	6	Y	30
PICK-UP	2	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting along 2007 burn perimeter

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Field Work Variance No TII-020 approved. Procedures for anomaly clearance around trees

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/9/07, UXOSO FADL 5/9/07, FADL UXO escort brush cutting 5/9/07, Tailgate safety Meeting dated 05/09/07, JSAs dated 05/09/07 UXO, GEO, and Brush cutting, equipment inspections for brush crew, FT Ord Weather report, Field Work Variance No TII-020, dtd 05/07/07

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/09/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	0
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	Team Leader	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline
 1130-1230 Team attended the monthly safety council meeting.

Summary: UXO Teams investigated and cleared 112 target sites. Five Suspected MEC items recovered, 4 ea 2.36 Rockets, 1 ea 76MM AP-T M62/M339

Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note: Jimmy Drake took a sick day. Valerie Langstaff was fill-in team leader.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the mid 70's.	None



DAILY LOG	DATE	05	09	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; discussed HOT, SUNNY WEATHER, stay hydrated and use sun screen 0715 Watched the team check their instruments at the test pit, Set on level 4, 0830 QC'd paperwork on tree polygons excavations 1030 2007 Burn are observing operations, no problems 1100 MRS-16 QC'ing dig teams results, observed operations, no problems, 1130 - 1245 Attended Ft Ord Safety council meeting – all personnel 1300 MRS 16, observing operations, QC'ing dig teams results, no problems, 1635 MRS 16 secured 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/09/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0720 - ARRIVE WORKSITE, COMPLETED JSA, FUELED TAZ AND PERFORMED MAINTENANCE ON EQUIPMENT

0750 - BOBCAT AND TAZ START CUTTING

0900 - TAZ SHUTDOWN, CUTTING HEAD VIBRATING BADLY, COVERS FOR BELTS WERE TAKEN OFF ALL BOLTS TIGHTEN AND EVERYTHING ^{LOOKED} ~~WAS~~ OVER THOROUGHLY

1000 - TAZ CUTTING AGAIN, TOOK MEASUREMENT FROM NOWHERE RD TOWARDS BURN AREA B TO ENSURE PROPER 200FT DISTANCE FOR FIRE BREAK

1130-1215 LUNCHBREAK

1500-1515 AFTERNOON BREAK

1520 - TAZ SHUTDOWN TO WORK ON CUTTING HEAD, PULLED BELTS OFF, CHECKED BEARINGS

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 250 FT.

BOBCAT CUT APPROX. 600 FT.

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: _____ IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeffery Starnes* DATE: 5/9/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 5/9/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA
 Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog
 Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D
 Chemical Hazards: Poison OAK, Paint, Dust
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment
 Other: 400 FT safe area around equipment, Hot Dry conditions – spark/flames

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
Chris Scoville	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 5/9/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: MRS 16 Former Fort Ord, Ca.
 Type of Work: UXO Removal, and GEO Fill-in and reacquire of anomalies
 Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask
 Chemical Hazards: Poison OAK, Paint, Dust, UXO,
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,
 Other: Heavy FOG – Drive with caution

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	<i>Mark Isbell</i>
Joshua Senkas	<i>Joshua Senkas</i>
John SPARKS	<i>John Sparks</i>
CHUCK NULUM	<i>Chuck Nulum</i>
Joshua King	<i>Joshua King</i>
TARA VOLPE	<i>Tara Volpe</i>
Valerie LANGSTAFF	<i>Valerie Langstaff</i>
Mike Lightner	<i>Mike Lightner</i>
Shirley Tudor	<i>Shirley Tudor</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

JOB SAFETY ANALYSIS

Date: 5/9/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>X Coveralls _____</p> <p>Reflective vest and hard hats near heavy equipment _____</p> <p>X _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>x Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>x Heat Stress _____</p> <p>x Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>x Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>X UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>x Flammable -Fuels _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>X <u>GEO Teams</u> _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>X <u>200 FT BETWEEN TEAMS</u> _____</p>
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Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/9/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

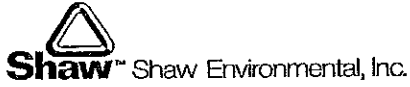
Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		<u>Supervisor's Comments</u>
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		<u>Supervisor's Initials</u>
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p>_____ Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p style="text-align: center;">GEO Teams</p> <p>_____ PPE Due to Other Work</p> <p><input checked="" type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO Intrusive 200 ft</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/9/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand
	Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
		Audit the Job Audit Time:
Job Task (What are You Doing)		Supervisor's Comments
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Initials
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/9/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>		<p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: Anicat T-300

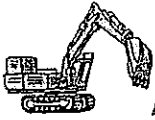
Equipment Hrs: 132.5



Date: 5/9/00

Location: Fort Ord

Supervisor: _____



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Seville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325CL EXCAVATOR

Equipment Hrs: 2116.1

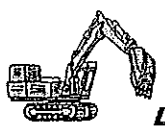


Date: 5/9/07

Location: NOWHERE RD

Supervisor: Ed.

(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOUILLIE (YES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 9, 2007 - 16:35 PDT

Most Recent Observations at May 9, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	57.0° F	58.0 at 13:51	47.0 at 3:51	77.0 at 16:51	47.0 at 3:51
Dew Point	51.2° F	51.5 at 13:51	46.2 at 3:51	51.9 at 22:51	36.8 at 18:51
Relative Humidity	81%	98 at 4:51	77 at 14:51	98 at 4:51	25 at 18:51
Wind Speed	14 mph from WNW	14 at 15:51	0 at 7:51	14 at 15:51	0 at 7:51
Wind Gust	23 mph	23 at 15:51	5 at 7:51	23 at 15:51	5 at 7:51
Pressure	28.93 in	28.95 at 12:51	28.86 at 0:51	28.95 at 12:51	28.84 at 19:51
Sea Level Pressure	29.45 in	29.47 at 12:51	29.38 at 0:51	29.47 at 12:51	29.34 at 19:51
Altimeter	29.45 in	29.47 at 12:51	29.38 at 0:51	29.47 at 12:51	29.36 at 19:51
Solar Radiation	848.0 W/m*m	1373.0 at 13:51	6.0 at 0:51	1373.0 at 13:51	1.0 at 21:51
Fuel Temperature	65.0° F	67.0 at 14:51	48.0 at 1:51	87.0 at 16:51	48.0 at 1:51
10 hr Fuel Moisture	10 gm	29 at 7:51	10 at 0:51	29 at 7:51	0 at 16:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 2:51	13.00 at 8:51	12.30 at 2:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

FIELD WORK VARIANCE

Project Name/Number Fort Ord / 846075 CTO/WAD CTO 16 / WAD 06
 Applicable Document: Draft Final Work Plan, MRS-16 Date: 05/07/07
 Munitions and Explosives of Concern Removal, Former
 Fort Ord, California, August 2006, Revision 1

Problem Description:
 Tree canopies at MRS-16 preclude Digital Geophysical Mapping because GPS signal is lost when EM-61 array enters canopy areas.

Recommended solution:
 Implement recommended revisions to the plan outlined below. This FWV supersedes FWV 017.

Impact on present and completed work:
 Will allow completion of areas where GPS signal loss precludes use of EM-61 towed array and man portable unit for DGM mapping.

Requested by: Marty Miele

Recommended revisions to the plan:
 In order to conduct clearance under the tree canopy at MRS 16 the following approach will be utilized. Site personnel will mark the boundary where the RTK GPS starts to falter around the tree canopy. This can be done by using field PDAs loaded with a gridded map of the entire site geophysical coverage or a shape file approximation of the coverage. The PDAs, connected to the RTK GPS, will allow the GPS operator to observe his location on the PDA map. The GPS operator will then walk a minimum of 5 feet within the known geophysical coverage and record his path around the outside of the tree canopy (within the DGM). Pin flags will be inserted at the appropriate intervals outline the boundary for coverage under tree canopy for the field teams. Once a given tree canopy area is marked and delineated trained UXO personnel will use the EM61 MK2 in real time to locate and excavate anomalies under the tree canopy. This will all be documented on the field excavation forms. The procedure for this operation is outlined below along with the general and pertinent DQOs that apply.

Procedures and Metrics for Clearance of Tree Canopy Areas at MRS 16 Using the EM61 MK2 in Real Time.

- 1.) Delineate the edge and mark the boundary of area to be surveyed as per above. The marked location should be just inside (approximately 5 feet) good DGM GPS coverage to ensure overlap of coverage.
- 2.) The clearance will be conducted on a grid by grid basis (or partial grid basis).
- 3.) Straight ropes will be used for guidance of each "lane of detection". The ropes will be positioned such that the lanes will be parallel and will not exceed 3 feet between lanes (3 foot centers).
- 4.) The EM61 MK2 operator will use the instrument in real time at the maximum frequency (10 hertz or greater) and will use the data logger to monitor anomaly magnitude. Complete coverage beneath the trees will be conducted (excluding any surface objects or tree trunks which preclude coverage). The operator will walk along each lane and will progress along the lanes in a sequential manner (from one parallel lane to the next).
- 5.) The operator will monitor the data logger and each anomaly that is detected at 14 mV (Sum of 4 channels) or 4 mV (Channel 3) will be flagged in the field.
- 6.) When an anomaly is located the operator will precisely locate the position by running short, orthogonal transects and place a pinflag over the anomaly peak. Once the pin is located, the operator will relocate the EM61 over the line marking the lane and resume the transect.
- 7.) After all of the flags are located in a given grid (after conducting the lane detections) each anomaly will be excavated and all pertinent information for MEC will be recorded as per the "normal excavations" from reacquisition anomalies. Local coordinates that will later be converted to California Coordinates may be used to record MEC item locations. Number of digs and MD pounds will be recorded per grid.



Shaw Environmental, Inc.

Field Work Variance No. TII-020
Page 2 of 2

Clarification Minor Change Major Change

Affects Budget Yes No X
Affects Schedule Yes No X

Signature [Signature] Date 5/7/07
Technical Reviewer

Shaw Approvals:

Signature [Signature] Date 5/7/07 Signature [Signature] Date 5/7/07
SUXOS Project Manager
Signature [Signature] Date 5/7/07
UXOQCS

USACE Approval: If Major Change:

Signature [Signature] Date 5/8/07 Signature [Signature] Date 5/9/07
OE Safety Specialist USACE COR or TM

DAILY QUALITY CONTROL REPORT

DATE: May 10, 2007

S	M	T	W	THUR	F	S
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DAY

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	55		Lo	47	
Still	Moderate	High	WNW@15mph		
Dry	Moderate	High	75%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	10
PICK-UP	6	Y	30
PICK-UP	2	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting along 2007 burn perimeter

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

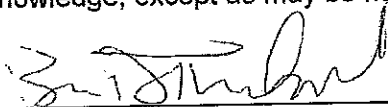
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/10/07, UXOSO FADL 5/10/07, FADL UXO escort brush cutting 5/10/07, Tailgate safety Meeting dated 05/10/07, JSAs dated 05/10/07 UXO, GEO, and Brush cutting, equipment inspections for brush crew, FT Ord Weather report,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/10/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	0
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Valerie Langstaff	Team Leader	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline
1645 Conducted predemo operation team brief.

Summary: UXO Teams investigated and cleared 197 target sites. Four MEC items recovered, 4 ea 2.36 Rockets.

Seeds found: One blue QC seed 37 mm projo #37-27

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note: Jimmy Drake took a sick day. Valerie Langstaff was fill-in team leader.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the high 40's. Afternoon in the high 50's.

None

SIGNATURE: John Tortolano

5/10/2007

page 1 of 1



L6

DAILY LOG	DATE	05	10	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; discussed Ticks – use spray, check yourself at breaks and at night 0715 Watched the team check their instruments at the test pit, Set on level 4, 0830 2007 Burn are observing operations, no problems 1000 MRS-16 QC'ing dig teams results, observed operations, no problems, 1300 MRS 16, observing operations, QC'ing dig teams results, no problems, 1400 2007 Burn- removed 3 ammo cans containing 550 rds of 30 cal blank, items taken to MRS-16, placed in SA Containers. 1635 MRS 16 secured 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: <i>See tailgate</i>	
SIGNATURE:	DATE: 5/10/07

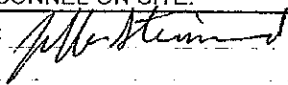


Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

K1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA	Project Number: 783751
FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,	
0630 - TAILGATE SAFETY MEETING	
0700 - DEPARTED FOR WORKSITE	
0730 - ARRIVED WORKSITE, COMPLETED JSA, PERFORMED MAINTENANCE ON EQUIPMENT, STARTED SAFETY CHECKOUT	
0800 - SAFETY CHECKOUTS COMPLETE, TAZ AND BOBCAT START CUTTING	
1130-1215 LUNCHBREAK	
1450 - FOUND 550 CAL 30CARTRIDGE TRACER M25, TURNED OVER TO UXO QC	
1500-1515 - AFTERNOON BREAK	
1600 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT, PERFORMED MAINTENANCE ON EQUIPMENT	
1615 - DEPARTED WORKSITE TAZ CUT APPROX. 400 FT. BOBCAT CUT APPROX. 500 FT.	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE:	
SIGNATURE: 	DATE: 5/10/07



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/10/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	<i>Mark S. Isabel</i>
Joshua Jenkins	<i>[Signature]</i>
CHUCK VECUM	<i>CV</i>
VALERIE LANGSTAFF	<i>[Signature]</i>
John Sparks	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
John Tortolano	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>

Meeting Conducted by: Shirley Tudor

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/10/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 FT safe area around equipment, Barricades in place prior to cutting

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Chris Scoville	<i>Chris Scoville</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/10/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA						
Required PPE: Mod D with Steel Toe boots	Safety Access / Location	Supervisor of Work: Jeff Steinwand				
	Safe Haven: Main Office	JSA Prepared by: B. Tincknell Are other crews in area? No				
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: N/A Evacuation Route: See Map	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>New:</td> <td style="text-align: center;">X</td> </tr> <tr> <td>Revised:</td> <td></td> </tr> </table>	New:	X	Revised:	
	New:		X			
Revised:						
Assembly Point:						
Job Task (What are You Doing)		Audit the Job Audit Time:				
Clearing and Grubbing of vegetative material including poison oak						
Potential Hazards		Supervisor's Comments				
UXO						
Slip, Trips, and Falls						
Possible hand or eye injury and overhead hazards						
Operation of heavy equipped mowers						
Poison oak						
Lifting						
Fueling of powered equipment						
Noise						
Recommended Action or Procedure		Supervisor's Initials				
Stay with UXO escort, do not touch any items on ground						
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting						
Safety vest, hearing protection, 400 ft throw radius around TAZ						
Barrier cream and cotton coveralls						
Use proper lifting techniques						
Proper lifting technique, 60 lb limit						
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle						
Hard hat with hearing protection						
Crew Name Signatures:						

JOB SAFETY ANALYSIS

Date: 5/10/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/10/2007

Job#: 856075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		Supervisor's Initials
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrate, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/10/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>X Type of Gloves _____</p> <p>X Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>X Coveralls _____</p> <p>X Reflective vest and hard hats near heavy equipment _____</p> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>X Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p>X Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>x Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>x Heat Stress _____</p> <p>x Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>x Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>X UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>x Flammable -Fuels _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>X Fall potential _____</p> <p>Pinch Points _____</p> <p>X Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>X <u>GEO Teams</u> _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>X <u>200 FT BETWEEN TEAMS</u> _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/10/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/10/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Date: 5/10/07

Equipment Type: Subcat F-300

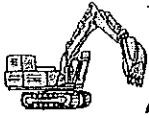
Location: Fort Ord

Equipment Hrs: 136.5

Supervisor: _____



DAILY EQUIPMENT INSPECTION



List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325cc EXCAVATOR

Equipment Hrs: 2122.2



Date: 5/10/07

Location: NOWHERE RD

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 10, 2007 - 16:11 PDT

Most Recent Observations at May 10, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	55.0° F	59.0 at 13:51	48.0 at 5:51	59.0 at 13:51	48.0 at 5:51
Dew Point	46.9° F	50.0 at 13:51	45.2 at 7:51	51.5 at 16:51	45.2 at 7:51
Relative Humidity	74%	94 at 0:51	69 at 12:51	95 at 20:51	69 at 12:51
Wind Speed	15 mph from WNW	15 at 15:51	1 at 8:51	15 at 15:51	1 at 8:51
Wind Gust	24 mph	24 at 15:51	5 at 7:51	24 at 15:51	5 at 7:51
Pressure	28.97 in	29.03 at 8:51	28.97 at 15:51	29.03 at 8:51	28.90 at 17:51
Sea Level Pressure	29.49 in	29.56 at 9:51	29.49 at 15:51	29.56 at 9:51	29.42 at 17:51
Altimeter	29.49 in	29.55 at 8:51	29.49 at 15:51	29.55 at 8:51	29.42 at 17:51
Solar Radiation	1265.0 W/m ²	1459.0 at 14:51	3.0 at 0:51	1459.0 at 14:51	2.0 at 22:51
Fuel Temperature	63.0° F	69.0 at 12:51	49.0 at 3:51	69.0 at 16:51	49.0 at 3:51
10 hr Fuel Moisture	9 gm	15 at 1:51	9 at 13:51	15 at 1:51	9 at 16:51
Battery voltage	12.90 volt	13.00 at 9:51	12.30 at 6:51	13.00 at 9:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: May 10, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	------	----------	---

USAGE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	55	Lo	47	
WIND	Still	Moderate	High	WNW@7mph	
HUMIDITY	Dry	Moderate	High	51%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	10
PICK-UP	6	Y	30
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	5
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	0
Bobcat with Brush hog attachment	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	6	N	40

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Explosive Venting of suspected munitions MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

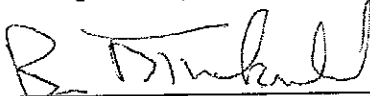
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/11/07, UXOSO FADL 5/11/07, Tailgate safety Meeting dated 05/11/07, JSAs dated 05/11/07 UXO, GEO, and Demo Ops, Explosive usage report, vehicle inspection for explosive transport

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tinknell
SHAW-UXOQC Specialist

05/11/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Jimmy Drake	Team Leader	0
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	5
Tara Volpe	UXO Tech II	5
Josh King	UXO Tech II	0
Valerie Langstaff	Team Leader	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting Demolition operations and then conducting target investigations.
0630 1130 Conducted demolition operation.

Summary: UXO Teams investigated and cleared 38 target sites. Seven UXO items recovered, All were M1A1 mines,

Seeds found: none

1700 - Field crew secured for the day.
1730 - 1800 - Daily/weekly admin duties were completed.

Note: Jimmy Drake and Josh King took a sick day.
Jeff & Tara left after helping with demo ops. (they had asked earlier in the week)

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the mid 50's.	None

SIGNATURE: John Tortolano 5/11/2007 page 1 of 1



L6

DAILY LOG	DATE	05	10	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; Demo Safety operations 0715 Watched the team check their instruments at the test pit, Set on level 4, 0830 MRS-16 observing Demo Operations 1130 Demo completed – No problems or observations 1300 MRS-16 QC'ing dig teams results, observed operations, no problems, 1400 QC'd 184 grid packages and completed 84 files from demo operations 1635 MRS 16 secured 1700: COB, no incidents or accidents -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/10/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, DEMO OPERATIONS, & GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear.

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John Sparus John Sparus	
John Jenkins	
Valerie Lambstaff	Valerie Lambstaff
Mark Isabella	Mark Isabella
John Tortolano	
TARA VOLPE	
JEFF STEINWAND	
Nick Busse	

Meeting Conducted by:

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

DEMOLITION OPERATIONS

Date: 5/11/2007
 Job#: 846475
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16; Former Fort Ord		
Required PPE: Mod "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw Field Office Wind Direction: n/a Eucalyptus to Parker Evacuation Route: Flats to 8th St to Joe	JSA Prepared by: B. Tincknell Are other crews in area?
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main Gate MRS-16	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Demolition Operations		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Fire		
MSD		
Traffic/Non-essential personnel		
Demolition shot misfire		
Accidental detonation		
Recommended Action or Procedure		Supervisor's Initials
Observe walking area/conditions		
No Demo operations in electrical storms or winds > 15 MPH		
2 ea 10 BC Fire extinguishers on and NO Smoking material within 100 ft		
Establish a Frag/Blast radius around each UXO to be disposed of		
Road blocks established, non-essential personnel kept out of Area		
Follow misfire procedures in SOP OE-005 Wait time 60 min		
Initiators and HE kept a minimum of 50 ft apart until needed. With proper storage and transport.		
Crew Name Signatures:	 Mark J. Smith T.J. Eddy	 Jack Tortolano

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> BRAC Authorization _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> UXO _____</p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves _____</p> <p><input checked="" type="checkbox"/> Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p><input checked="" type="checkbox"/> Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential _____</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential _____</p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route _____</p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/11/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrate, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name, Signatures:		



JOB SAFETY ANALYSIS

Date: 5/11/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 5/11/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		
<i>CU h</i>		

JOB SAFETY ANALYSIS

Date: 5/11/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Form M-11

EXPLOSIVES USAGE RECORD

Team Number: 2 Date: 5/11/07

Team Leader: Mark Isabell Project: MRS 16

EXPLOSIVES ISSUED			
			Signature of Team Leader: <u>Mark D Isabell</u>
Item	Quantity	Lot Number	Checker's Initials
Nonel Caps	3 EA	12 DE 05 W1	JAT
Perforators	3 EA	3-02	JAT
Det Cord	10 FT	101/01	JAT
Nonel Leadline	2500 FT	08JA07W1	JAT
MISG Data Sheet	25 FT	DV 1-15	JAT
EXPLOSIVES EXPENDED			
			Signature of Team Leader: <u>Mark D Isabell</u>
Item	Quantity	Lot Number	Checker's Initials
Nonel Caps	1 EA	12 DE 05 W1	JAT
Perforators	3 EA	3-02	JAT
Det Cord	10 FT	101/01	JAT
Nonel Leadline	2500 FT	08JA07W1	JAT
MISG Data Sheet	25 FT	DV 1-15	JAT
EXPLOSIVES RETURNED			
			Signature of SUXOS: <u>[Signature]</u>
Item	Quantity	Lot Number	Checker's Initials
Nonel Caps	2 EA	12 DE 05 W1	JAT

[Signature]
 UXO Supervisor

5/11/07
 Date

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 2

SIZE AND WEIGHT: < 15 lbs New

TIME OF SHOT: 0900-1100

LOCATION: MRS 16

DATE: 5/11/07

HOW MANY SHOTS: 2

SIZE AND WEIGHT: _____

TIME OF SHOT: _____

LOCATION: _____

DATE: _____

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:
 LOCATION FOR FIRE TRUCK: MRS 16 MAIN gate

CALLER:	CONTACT INFO:	TIME
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188 <i>MSG</i>	0650
PARK RANGER HEADQUARTERS	758-3604 <i>MSG</i>	0651
MONTEREY COMMUNICATIONS (non-emergency)	373-1259 <i>MSG</i>	0652
UNIFIED AIR POLLUTION CONTROL OF MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210 <i>NO CONTACT</i>	0654
EMERGENCY OPERATIONS CENTER ATTN: RICH SAVKO	242-5784 / FAX 242-7028	0655

MOTOR VEHICLE INSPECTION (TRANSPORTING HAZARDOUS MATERIALS)

(Read Instructions before completing this form.)

This form applies to all vehicles which must be marked or placarded in accordance with Title 49 CFR. **1. GOVERNMENT BILL OF LADING/TRANSPORTATION CONTROL NUMBER**

SECTION 1 - DOCUMENTATION		ORIGIN a.	DESTINATION b.	
2. CARRIER/GOVERNMENT ORGANIZATION		ESL	Range 16	
3. DATE/TIME OF INSPECTION		0700 5/11/07		
4. LOCATION OF INSPECTION		Joe Lloyd Way	ESL	
5. OPERATOR(S) NAME(S)		Kirk Busse		
6. OPERATOR(S) LICENSE NUMBER(S)		K0937841		
7. MEDICAL EXAMINER'S CERTIFICATE*		1/19/08		
8. <i>(X if satisfactory at origin)</i>			9. CVSA DECAL DISPLAYED ON COMMERCIAL EQUIPMENT* YES NO	
a. MILITARY HAZMAT ENDORSEMENT		d. ERG OR EQUIVALENT COMMERCIAL:		YES NO
b. VALID LEASE*		e. DRIVER'S VEHICLE INSPECTION REPORT*		YES NO
c. ROUTE PLAN		f. COPY OF 49 CFR PART 397		YES NO
				a. TRUCK/TRACTOR
				b. TRAILER

SECTION II - MECHANICAL INSPECTION

All items shall be checked on an empty equipment prior to loading. Items with an asterisk shall be checked on all incoming loaded equipment.

10. TYPE OF VEHICLE(S)				11. VEHICLE NUMBER(S)					
12. PART INSPECTED <i>(X as applicable)</i>	ORIGIN (1)		DESTINATION (2)		ORIGIN (1)		DESTINATION (2)		COMMENTS (3)
	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	
a. SPARE ELECTRICAL FUSES	✓				k. EXHAUST SYSTEM	✓			
b. HORN OPERATIVE	✓				l. BRAKE SYSTEM*	✓			
c. STEERING SYSTEM	✓				m. SUSPENSION	✓			
d. WINDSHIELD/WIPERS	✓				n. COUPLING DEVICES	✓			
e. MIRRORS	✓				o. CARGO SPACE	✓			
f. WARNING EQUIPMENT	✓				p. LANDING GEAR*	✓			
g. FIRE EXTINGUISHER*	✓				q. TIRES, WHEELS, RIMS	✓			
h. ELECTRICAL WIRING	✓				r. TAILGATE/DOORS*	✓			
i. LIGHTS AND REFLECTORS	✓				s. TARPULIN*	✓			
j. FUEL SYSTEM*	✓				t. OTHER <i>(Specify)</i>				

13. INSPECTION RESULTS *(X one)* ACCEPTED REJECTED
(If rejected give reason under "Remarks". Equipment will be approved if deficiencies are corrected prior to loading.)

14. SATELLITE MOTOR SURVEILLANCE SYSTEM: *(X one)* ACCEPTED REJECTED

15. REMARKS


16. INSPECTOR SIGNATURE *(Origin)*

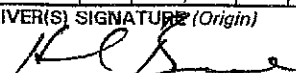

17. INSPECTOR SIGNATURE *(Destination)*

SECTION III - POST LOADING INSPECTION

This section applies to Commercial and Government/Military vehicles. All items will be checked prior to release of loaded equipment and shall be checked on all incoming loaded equipment.

	ORIGIN (1)		DESTINATION (2)		COMMENTS (3)
	SAT	UNSAT	SAT	UNSAT	
18. LOADED IAW APPLICABLE SEGREGATION/COMPATIBILITY TABLE OF 49 CFR	✓				
19. LOAD PROPERLY SECURED TO PREVENT MOVEMENT	✓				
20. SEALS APPLIED TO CLOSED VEHICLE; TARPULIN APPLIED ON OPEN EQUIPMENT	✓				
21. PROPER PLACARDS APPLIED	✓				
22. SHIPPING PAPERS/DD FORM 836 FOR GOVERNMENT VEHICLE SHIPMENTS	✓				
23. COPY OF DD FORM 626 FOR DRIVER	✓				
24. SHIPPED UNDER DOT EXEMPTION 868	✓				

25. INSPECTOR SIGNATURE *(Origin)*


26. DRIVER(S) SIGNATURE *(Origin)*


27. INSPECTOR SIGNATURE *(Destination)*

28. DRIVER(S) SIGNATURE *(Destination)*

INSTRUCTIONS

SECTION II (Continued)

i. Lights/Reflectors. (Head, tail, turn signal, brake, clearance, marker and identification lights, Emergency Flashers). Inspect to see that all lighting devices and reflectors required are operable, of proper color and properly mounted. Ensure that lights and reflectors are not obscured by dirt or grease or have broken lenses. High/Low beam switch must be operative. Emergency Flashers must be operative on both the front and rear of vehicle. (49 CFR 393)

j. Fuel System. Inspect fuel tank and lines to ensure that they are in serviceable condition, free from leaks, or evidence of leakage and securely mounted. Ensure that fuel tank filler cap is not missing. Examine cap for defective gasket or plugged vent. Inspect filler necks to see that they are in completely serviceable condition and not leaking at joints. (49 CFR 393.83 and 396 Appendix G)

k. Exhaust System. Exhaust system shall discharge to the atmosphere at a location to the rear of the cab or if the exhaust projects above the cab, at a location near the rear of the cab. Exhaust system shall not be leaking at a point forward of or directly below the driver compartment. No part of the exhaust system shall be located where it will burn, char or damage electrical wiring, fuel system or any other part of the vehicle. No part of the exhaust system shall be temporarily repaired with wrap or patches. (49 CFR 393.83 and 396 Appendix G)

l. Brake System (to include hand brakes, parking brakes and Low Air Warning devices). Check to ensure that brakes are operational and properly adjusted. Check for audible air leaks around air brake components and air lines. Check for fluid leaks, cracked or damaged lines in hydraulic brake systems. Ensure that parking brake is operational and properly adjusted. Low Air Warning devices must be operative. (49 CFR 396 Appendix G)

m. Suspension. Inspect for indications of misaligned, shifted or cracked springs, loosened shackles, missing bolts, spring hangers unsecured at frame and cracked or loose U-bolts. Inspect for any unsecured axle positioning parts, and sign of axle misalignment, broken torsion bar springs (if so equipped). (49 CFR 396 Appendix G)

n. Coupling Devices (Inspect without uncoupling). Fifth Wheels: Inspect for unsecured mounting to frame or any missing or damaged parts. Inspect for any visible space between upper and lower fifth wheel plates. Ensure that the locking jaws are around the shank and not the head of the kingpin. Ensure that the release lever is seated properly and safety latch is engaged. Pintle Hook, Drawbar, Towbar Eye and Tongue and Safety Devices: Inspect for unsecured mounting, cracks, missing or ineffective fasteners (welded repairs to pintle hook is prohibited). Ensure safety devices (chains, hooks, cables) are in serviceable condition and properly attached. (49 CFT 396 Appendix G)

o. Cargo Space. Inspect to ensure that cargo space is clean and free from exposed bolts, nuts, screws, nails or inwardly projecting parts that could damage the lading. Check floor to ensure it is tight and free from holes. Floor shall not be permeated with oil or other substances. (49 CFR 177.815(e)(1) and 398.94)

p. Landing Gear. Inspect to ensure that landing gear and assembly are in serviceable condition, correctly assembled, adequately lubricated and properly mounted.

SECTION II (Continued)

q. Tires, Wheels and Rims: Inspect to ensure that tires are properly inflated. Flat or leaking tires are unacceptable. Inspect tires for cuts, bruises, breaks and blisters. Tires with cuts that extend into the cord body are unacceptable. Thread depth shall not be less than: 4/32 inches for tires on a steering axle of a power unit, and 2/32 inches for all other tires. Mixing bias and radial on the steering axle is prohibited. Inspect wheels and rims for cracks, unseated locking rings, broken, loose, damaged or missing lug nuts or elongated stud holes. (49 CFR 396 Appendix G)

r. Tailgate/Doors. Inspect to see that all hinges are tight in body. Check for broken latches and safety chains. Doors must close securely. (49 CFR 177.835(h))

s. Tarpaulin. If shipment is made on open equipment, ensure that lading is properly covered with fire and water resistant tarpaulin. (49 CFR 177.835(h))

t. Other Unsatisfactory Condition. Note any other condition which would prohibit the vehicle from being loaded with hazardous materials.

Item 14. For AA&E and other shipments requiring satellite surveillance, ensure that the Satellite Motor Surveillance System is operable. Shipper will instruct the driver to send a "test" emergency message to DTTS by having the driver activate the "emergency (panic) button". Shipper will contact DTTS at 1-800-826-0794 to verify that test message was received. Message must be received by DTTS for system to be considered operational.

SECTION III - POST LOADING INSPECTION

General Instructions.

All items will be checked prior to the release of loaded equipment. Shipment will not be released until deficiencies are corrected. All items will be checked on incoming loaded equipment. Deficiencies will be reported in accordance with applicable service regulations.

Item 18. Check to ensure shipment is loaded in accordance with 49 CFR Part 177.848 and the applicable Segregation or Compatibility Table of 49 CFR 177.848.

Item 19. Check to ensure the load is secured from movement in accordance with applicable service outload drawings.

Item 20. Check to ensure seal(s) have been applied to closed equipment; fire and water resistant tarpaulin applied on open equipment.

Item 21. Check to ensure each transport vehicle has been properly placarded in accordance with 49 CFR Part 172 Subpart F.

Item 22. Check to ensure operator has been provided shipping papers that comply with 49 CFR Part 172 Subpart C. For shipments transported by Government vehicle, shipping paper will be DD Form 836.

Item 23. Ensure operator(s) sign DD Form 626, are given a copy and understand the hazards associated with the shipment.

Item 24. Applies to Commercial Shipments Only. If shipment is made under DOT Exemption 868, ensure that shipping papers are properly annotated and copy of Exemption 868 is with shipping papers.

DAILY QUALITY CONTROL REPORTDATE: May 14, 2007

DAY

S	M	T	W	THUR	F	S
---	----------	---	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

WEATHER		Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi	55	Lo	47		
WIND	Still	Moderate	High	WNW@7mph		
HUMIDITY	Dry	Moderate	High	51%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
3	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	10
PICK-UP	6	Y	30
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	5
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	3	Timberline	0
Bobcat with Brush hog attachment	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	6	N	40

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

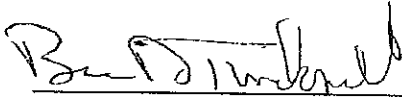
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/14/07, UXOSO FADL 5/14/07, UXO Escort 2007 Burn FADL 5/14/2007, Tailgate safety Meeting dated 05/14/07, JSAs dated 05/14/07 UXO, GEO, and 2007 Burn area, equipment inspections (Timberland), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/14/07

DATE



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/14/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 2px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time: _____
DGM Anomaly removal OE Sub-surface Clearance Operations in Tree line		Supervisor's Comments Supervisor's Initials
Potential Hazards		
Lifting Slip, Trip, and Falls Cuts and abrasions/ overhanging tree branches Poison oak UXO Dust Heavy equipment operations Hot dry working conditions Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves, observe working/walking conditions Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Stay hydrated, drink plenty of fluids, wear sunscreen Eye contact with equipment operator		Supervisor's Initials
Crew Name Signatures:	<div style="font-size: 2em; margin-bottom: 10px;">TJ EVJ</div> <div style="font-family: cursive; font-size: 1.5em;"> [Signature 1] [Signature 2] [Signature 3] [Signature 4] </div>	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/14/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Discussed Corporate Policies on Attendance, Discipline, Show-up Pay. Presented By SUXOS, John Tortolano

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
Joshua Jenkins	
John Sporko	
MARK ISABELL	
Josh King	
VALERIE LANGSTAFF	
TARA VOLPE	
Mike Lightner	

Meeting Conducted by:

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/14/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: 400 FT safe area around equipment, Barricades in place prior to cutting

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Chris Scoville	<i>Chris Scoville</i>
Ed Worth	<i>Ed Worth</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____ Manager: _____

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - TAZ OPERATOR LEAVES TO GET SHOT FOR POISON OAK, DEPART FOR WORKSITE

0715 - ARRIVE WORKSITE, COMPLETED JSA, STARTED SAFETY CHECKOUT

0730 - SAFETY CHECKOUT SHEET COMPLETE, BOBCAT STARTS CUTTING

0930 - TAZ OPERATOR ON SITE, STARTED EQUIPMENT SAFETY CHECKOUT, FUELED TAZ, PERFORMED MAINTENANCE

1000 - TAZ SAFETY CHECKOUT SHEET COMPLETED, TAZ STARTS CUTTING

1130 - 1215 TAZ REPORTS SMOKE IS COMING OUT OF THE DRIVE BELT COVER ON THE CUTTING HEAD, NO FIRE PRESENT, COVER WAS REMOVED AND A BELT WAS FOUND OUT OF ITS TRACK, THE BELT WAS REMOVED, CUTTING HEAD WILL STILL WORK AS PER THE OPERATOR

1500 - 1515 AFTERNOON BREAK

1615 - STOPPED CUTTING, PERFORMED MAINTENANCE, FUELED BOBCAT

1630 - DEPARTED WORKSITE

TAZ CNT APPROX. 200 FT.

BOBCAT CUT APPROX. 400 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeff Stearns*

DATE: 5/14/07



DAILY LOG	DATE	05	14	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; UXOSO Discussed Shaw policy on time off</p> <p>0700 Notified by Timberland that one employee; Bobby, has contacted poison oak and wants to receive medical care. Talked with Ed (the foreman) and Terry of Timberland, they will conduct an investigation and relay the results. They are trying to determine how and where individual contacted poison oak.</p> <p>0715 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0830 Informed by Ed of Timberland that Bobby does not want medical care at this time</p> <p>0900 QC 38 Grid packages</p> <p>1030 2007 Burn area, observing operations</p> <p>1300 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
<p>VISITORS ON SITE:</p> <p>NONE</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:</p> <p>None</p>
<p>WEATHER CONDITIONS:</p> <p>See Ft Ord weather report</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>
<p>SHAW PERSONNEL ON SITE: See tailgate</p>	
<p>SIGNATURE: <i>B. D. [Signature]</i></p>	<p>DATE: 5/14/07</p>

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline

Summary: UXO Teams investigated and cleared 189 target sites. Six MEC items recovered, All were 2.36" rockets

Seeds found: 2 ea blue QC seeds recovered, 1 ea 37mm projo and 1 ea M11 rifle grenade

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the high 40's. Afternoon in the mid 50's.

None

SIGNATURE: John Tortolano

5/14/2007

page 1 of 1

JOB SAFETY ANALYSIS

Date: 5/14/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

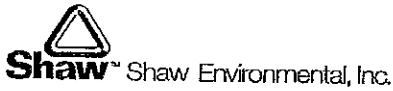
- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

JSA # _____

L19



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/14/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/14/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/14/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots Hard Hats and Safety vests	Safety Access / Location Gate Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area: NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/14/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

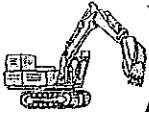
Date: 5/7/07

Equipment Type: Babcock T-300

Location: Fort Ord

Equipment Hrs: 147.5

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM *List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet*

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325CL EXCAVATOR

Equipment Hrs: 2129.7



Date: 5/14/07

Location: NOWHERE RD

Supervisor: Ed
(ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 14, 2007 - 15:56 PDT

Most Recent Observations at May 14, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	55.0° F	56.0 at 14:51	45.0 at 1:51	59.0 at 17:51	45.0 at 1:51
Dew Point	47.2° F	48.5 at 14:51	43.1 at 1:51	48.5 at 14:51	43.1 at 1:51
Relative Humidity	75%	95 at 7:51	74 at 13:51	95 at 7:51	64 at 17:51
Wind Speed	15 mph from W	15 at 2:51	6 at 8:51	17 at 18:51	6 at 8:51
Wind Gust	19 mph	21 at 3:51	13 at 7:51	26 at 16:51	13 at 7:51
Pressure	28.95 in	28.99 at 11:51	28.93 at 5:51	28.99 at 16:51	28.93 at 5:51
Sea Level Pressure	29.47 in	29.52 at 11:51	29.46 at 5:51	29.52 at 11:51	29.46 at 5:51
Altimeter	29.47 in	29.51 at 11:51	29.45 at 5:51	29.51 at 16:51	29.45 at 5:51
Solar Radiation	1397.0 W/m ²	1397.0 at 15:51	3.0 at 0:51	1397.0 at 15:51	2.0 at 21:51
Fuel Temperature	63.0° F	63.0 at 15:51	44.0 at 1:51	66.0 at 16:51	44.0 at 1:51
10 hr Fuel Moisture	10 gm	16 at 7:51	10 at 15:51	16 at 7:51	8 at 16:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 6:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: May 15, 2007

DAY

S	M	<u>T</u>	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.

WEATHER

	Sunny	Clear	<u>Overcast</u>	Rain	Fog
TEMP: H/L	Hi	<u>54</u>	Lo	<u>47</u>	
WIND	Still	<u>Moderate</u>	High	<u>W@14mph</u>	
HUMIDITY	Dry	Moderate	<u>High</u>	<u>80%</u>	

DELIVERY ORDER NO. 0016

TEMP: H/L

CONTRACT NO. DACW05-96-D-0011

WIND

PROJECT NO. 846075

HUMIDITY

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
4	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	3	N	30
PICK-UP	6	Y	60
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	9	N	90

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

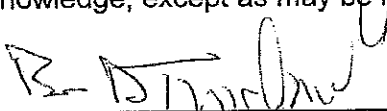
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/15/07, UXOSO FADL 5/15/07, UXO Escort 2007 Burn FADL 5/15/2007, Tailgate safety Meeting dated 05/15/07, JSAs dated 05/15/07 UXO, GEO, and 2007 Burn area, equipment inspections (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/15/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline

Summary: UXO Teams investigated and cleared 162 target sites. Four MEC items recovered, 3 ea 2.36" rockets, 1ea M9 Rifle grenade

Seeds found: 1 ea blue QC seeds recovered, M11 rifle grenade

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

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VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the mid 50's.	None

SIGNATURE: John Tortolano	5/15/2007	page 1 of 1
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DAILY LOG	DATE	05	15	07
	NO.			
	SHEET 1 OF 1			

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; bugs, flowers, plants, ticks</p> <p>0715 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0900 QC'd 189 Grid packages</p> <p>1030 2007 Burn area, observing operations</p> <p>1300 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate)	
SIGNATURE:	DATE: 5/15/07

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPARTED FOR WORKSITE

0715 - ARRIVED WORKSITE, COMPLETED JSA, PERFORMED MAINTENANCE, STARTED EQUIPMENT SAFETY CHECKOUTS, CONSTRUCTION SUPPORT CREW ON SITE TO REMOVE A CABLE IN THE CUT AREA SOUTH OF THE BLUE LINE OF AREA C.

0730 - BOBCAT SAFETY CHECKOUT SHEET COMPLETE, STARTED CUTTING, CONSTRUCTION SUPPORT CREW DEPARTS SITE

0745 - BOBCAT REQUESTS SUPPORT TO REMOVE SOME BARBED WIRE AND AMMO CANS, MORE TARGET PARTS WERE ENCOUNTERED, CONTACTED SITE SAFETY AND WAS ADVISED TO HAVE BOBCAT STOP CUTTING FIRE BREAK OUT TO 200FT AND TO CONTINUE CUTTING EXISTING FIRE BREAK ONLY, NOT POSITIVE THAT NEW CUT AREA IS CLEAR FOR UNARMORED BOBCAT TO CUT IN

0800 - TAZ SAFETY CHECKOUT SHEET COMPLETED, STARTED CUTTING

1130-1215 LUNCH/BREAK

1430 - TAZ SHUTSDOWN TO TROUBLESHOOT EXCESSIVE VIBRATION IN THE CUTTING HEAD, TEETH KEEP STICKING CAUSING VIBRATION, OPERATOR LEAVING SITE TO GET DRY GREASE, DONE CUTTING FOR THE DAY

1500-1515 AFTERNOON BREAK

1545 - BOBCAT STOPPED CUTTING FOR THE DAY, PERFORMED MAINTENANCE, FUELED BOBCAT

1615 - DEPARTED WORKSITE TAZ CUT APPROX. 350 FT BOBCAT CUT APPROX. 1000 FT @ 45 FT WIDE (ORIGINAL) FIRE BRE

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: 

DATE: 5/15/07



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 5/15/2007 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA
 Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog
 Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D
 Chemical Hazards: Poison OAK, Paint, Dust
 Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress
 Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately
 Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700
 Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment
 Other: Poison oak - Spry equipment with diluted beach prior to working on them

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Chris Scoville	<i>Chris Scoville</i>
BOB SCOVILLE	<i>Bob Scoville</i>
Doy Holmes	<i>Doy Holmes</i>
Tom A Kandler	<i>Tom A Kandler</i>
Asalet Rice	<i>Asalet Rice</i>
Vincent Chubb	<i>Vincent Chubb</i>
Steven Bennet	<i>Steven Bennet</i>
Kirk Lasse	<i>Kirk Lasse</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/15/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear.

Other: Break for Safety: Avoid Bee and Wasp Stings

ATTENDEES

NAME PRINTED	SIGNATURE
Mark Isabel	<i>Mark A Isabel</i>
John Tortolano	<i>[Signature]</i>
Valerie Langstaff	<i>[Signature]</i>
Josh King	<i>[Signature]</i>
Joshua Sealus	<i>[Signature]</i>
John Sparks	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
Shirley Tindor	<i>[Signature]</i>

Meeting Conducted by: [Signature]

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/15/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center; font-weight: bold;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrate, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing **GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/15/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/15/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/15/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/15/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p style="text-align: center;">TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <hr/> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <hr/> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Date: 5/15/07

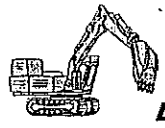
Equipment Type: 325CL EXCAVATOR

Location: NOWHERE RD



Equipment Hrs: 2135.8

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	DESCRIPTION	OK	Add	N/A	Comments
1	Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6	Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19	Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 15, 2007 - 16:08 PDT

Most Recent Observations at May 15, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	54.0° F	54.0 at 15:51	47.0 at 3:51	54.0 at 16:51	47.0 at 3:51
Dew Point	48.0° F	48.6 at 10:51	45.9 at 3:51	48.9 at 17:51	45.9 at 3:51
Relative Humidity	80%	96 at 3:51	80 at 15:51	96 at 3:51	80 at 15:51
Wind Speed	14 mph from W	16 at 13:51	9 at 9:51	30 at 20:51	6 at 23:51
Wind Gust	23 mph	24 at 13:51	14 at 10:51	24 at 20:51	14 at 10:51
Pressure	29.02 in	29.04 at 12:51	28.94 at 5:51	29.04 at 12:51	28.93 at 17:51
Sea Level Pressure	29.54 in	29.56 at 13:51	29.47 at 5:51	29.56 at 13:51	29.45 at 17:51
Altimeter	29.54 in	29.56 at 12:51	29.46 at 5:51	29.56 at 12:51	29.45 at 17:51
Solar Radiation	489.0 W/m ²	613.0 at 14:51	14.0 at 0:51	613.0 at 14:51	9.0 at 21:51
Fuel Temperature	59.0° F	59.0 at 15:51	47.0 at 0:51	59.0 at 16:51	47.0 at 0:51
10 hr Fuel Moisture	13 gm	23 at 10:51	13 at 15:51	23 at 10:51	10 at 16:51
Battery voltage	12.90 volt	13.00 at 10:51	12.30 at 6:51	13.00 at 17:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: May 16, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016 TEMP: H/LCONTRACT NO. DACW05-96-D-0011 WINDPROJECT NO. 846075 HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	57		Lo	46	
Still	Moderate	High	W@17mph		
Dry	Moderate	High	70%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	40
PICK-UP	6	Y	60
PICK-UP	3	GSA	30
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	9	N	90

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

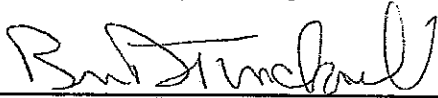
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/16/07, UXOSO FADL 5/16/07, UXO Escort 2007 Burn FADL 5/16/2007, Tailgate safety Meeting dated 05/16/07, JSAs dated 05/16/07 UXO, GEO, and 2007 Burn area, equipment inspections (Timberline), FT Ord Weather report, Hot work permits

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/16/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Vaerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline

Summary: UXO Teams investigated and cleared 162 target sites.

MEC recovered: None
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the high 40's. Afternoon in the high 50's.

None

SIGNATURE: John Tortolano

5/16/2007

page 1 of 1



L6

DAILY LOG	DATE	05	16	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; Wind and blowing dust 0645 Issued Shaw Hot Work permit to Jeff for Timberline's blade sharpening in the 2007 burn area 0715 Watched the team check their instruments at the test pit, Set on level 4, 0900 QC'd 138 Grid packages 1030 2007 Burn area, observing operations 1300 MRS-16 QC'ing dig teams results, observed operations, no problems, 1635 MRS 16 secured 1700: COB, no incidents or accidents -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/16/07

FIELD ACTIVITY DAILY LOG

K1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0715 - ARRIVED WORKSITE, COMPLETED JSA, TAZ STARTED EQUIPMENT SAFETY CHECKOUT, BOBCAT BEGINS GRINDING TEETH ON CUTTING HEAD, FIRE EXTINGUISHER AND HOTWORK PERMIT ON HAND

0745 - TAZ SAFETY CHECKOUT SHEET COMPLETE, STARTED CUTTING

0810 - BOBCAT OPERATOR STOPS GRINDING DUE TO COMPRESSOR RUNNING OUT OF FUEL, OPERATOR DEPARTS SITE TO GET FUEL

0930 - BOBCAT OPERATOR BACK ON SITE, HOTWORK CONTINUES

1010 - HOTWORK COMPLETE, BOBCAT SAFETY CHECKOUT SHEET COMPLETED, PERFORMED MAINTENANCE, INFORMED SITE SAFETY THAT HOTWORK IS FINISHED

1025 - BOBCAT STARTED CUTTING

1130-1215 LUNCHBREAK

1500 - 1515 AFTERNOON BREAK

1615 - STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT, PERFORMED MAINTENANCE

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 250 FT.

BOBCAT CUT APPROX. 1000 FT @ 45 FT WIDE OF OLD FIREBREAK ON FOUL BORE RD

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]* DATE: 5/16/07



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/16/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
MARK ISABELL	Mark Isbell
Joshua Jenkins	
John SPARKS	
VALERIE LANGSTAFF	
Josh King	
Mike Lightner	
CHUCK MURPHY	
Shirley Teader	S-Teader
Meeting Conducted by:	

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/16/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: Poison oak - Spry equipment with diluted beach prior to working on them

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND

Chris Scoville

BOB SCOVILLE

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/16/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/16/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/16/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: _____ Revised: <input checked="" type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/16/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/16/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
	Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	
Pre-Job Preparation	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/16/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

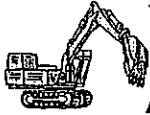
Date: 5/16/07

Equipment Type: Dubcat - T-300

Location: Fort Ord

Equipment Hrs: 161.7

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

Sharpened cutting teeth in AM

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325 CL EXCAVATOR

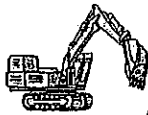
Equipment Hrs: 2140



Date: 5/16/07

Location: NOWHERE Rd

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

LINE 1 ADD 1/2 GAL (15W40) MOTOR OIL

EMPLOYEE NAME: _____

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

HOT-WORK PERMIT

For use of this form, see AR 420-90; the proponent agency is ACSIM

1. LOCATION <i>Range 27</i>	2. DATE <i>16 May 07</i>	3. PERMIT NO. <i>07-05</i>
4. TYPE OF WORK <i>Grinding</i>	5. START TIME <i>0600</i>	6. FINISH TIME <i>1500</i>
7.a. NAME OF PERSON RESPONSIBLE FOR HOT-WORK AT JOB SITE (Contractor/Government Employee) <i>Val Valdez 750-5718</i>	7.b. SIGNATURE <i>[Signature]</i>	

PRECAUTIONS BEFORE OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
8. Did Fire Department Inspector inspect site?	<input checked="" type="checkbox"/>	
9. Are there procedures for Fire Department emergency notification? (Emergency No.)	<input checked="" type="checkbox"/>	
10. Are combustibles in area noted?	<input checked="" type="checkbox"/>	
11. Should combustibles be covered? (If yes, note in remarks)		<input checked="" type="checkbox"/>
12. Are proper extinguishers on hand?	<input checked="" type="checkbox"/>	
13. Is wet-down necessary? (If yes, note in remarks)		<input checked="" type="checkbox"/>
14. Is smoking permissible at work sites?		<input checked="" type="checkbox"/>
15. Is continuous fire watch required?		<input checked="" type="checkbox"/>
16. Is Fire Department standby required?		<input checked="" type="checkbox"/>
17. Are other precautions required? (If yes, note in remarks)		<input checked="" type="checkbox"/>

18.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE <i>[Signature]</i>	18.b. DATE <i>16 May 07</i>
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PRECAUTIONS AFTER OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
19.a. Was Fire Department notified after hot-work operation was completed?	<input checked="" type="checkbox"/>	
19.b. Time: <i>COMPLETED HOTWORK AT 10:00 A.M.</i>	<input checked="" type="checkbox"/>	
20.a. Did Fire Department inspector inspect work site?		<input checked="" type="checkbox"/>
20.b. Time:		<input checked="" type="checkbox"/>
21. Are after work conditions safe? (If no, note in remarks)	<input checked="" type="checkbox"/>	
22. Are heat producing devices safe if left at work site?		<i>NA</i>

23.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE	23.b. DATE <i>5/16/07</i>
---	------------------------------

24. REMARKS

When completed Call the FIRE DEPARTMENT at
242-7701/7702/7544/7545

NOTE: PERMIT VALID ON DAY OF OPERATION AT ONE LOCATION ONLY



Procedure No.
 Revision No.
 Date of Revision
 Last Review Date
 Page

HS314
 0
 04/25/02
 04/25/02
 6 of 6

ATTACHMENT 2

HOT WORK PERMIT

Project Name: 2007 BURN AREA - FIRE BREAK Project No. 846075

Good for This Date Only 05/16/07 Time: From 0800 AM/PM To 1600 AM/PM

Hot Work Area FOUL BORE

Specific Work to be Done GRINDING ON SHARPENING BLADE

Personal Protective Equipment Required: GLOVE, SAFETY GOGGLES, GLASS

Emergency Equipment Required: FIRE EXTINGUISHER

CHECKLIST	INITIAL:	
	YES	DOES NOT APPLY
Area personnel have been informed of work to be performed.	BOT	
All tanks, lines, valves are disconnected, blinded, or blocked out.		BOT
Electrical service has been locked out and tagged.		BOT
Equipment and all attached piping has been cleaned and purged with (check blank): Water _____ Steam _____ Inert Gas _____ Air _____		BOT
All grounding/bonding wire in place.		BOT
Surrounding equipment and operations are safe for hot work.	BOT	
No open vessels, lines, or combustible items within 35 feet of hot work area.	BOT	
Fully charged and appropriate fire extinguisher easily accessible.	BOT	
Fire watch has been provided.	BOT	
No flammable gases greater than 10% LEL in hot work area.		BOT
Compressed gas cylinders kept upright and secured.		BOT
Air monitoring required.		BOT

AIR MONITORING (If Required)						
EXACT LOCATION OF TEST	TIME	% LOWER EXPLOSIVE LIMIT	% OXYGEN	OTHER TEST	OTHER TEST	INITIAL

Special Instructions: _____

Completed By: BRUCE DINKEN B.D. Dinken 5/16/07
 Printed Name Signature Date

Weather Conditions for RTGC1

Current time: May 16, 2007 - 16:18 PDT

Most Recent Observations at May 16, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	55.0° F	57.0 at 14:51	46.0 at 6:51	57.0 at 14:51	46.0 at 6:51
Dew Point	45.4° F	47.8 at 0:51	44.4 at 10:51	48.9 at 17:51	44.4 at 10:51
Relative Humidity	70%	95 at 6:51	70 at 14:51	95 at 6:51	70 at 14:51
Wind Speed	17 mph from W	17 at 15:51	6 at 7:51	17 at 17:51	6 at 7:51
Wind Gust	25 mph	25 at 15:51	15 at 1:51	26 at 17:51	15 at 1:51
Pressure	28.98 in	29.02 at 8:51	28.98 at 2:51	29.02 at 8:51	28.98 at 2:51
Sea Level Pressure	29.50 in	29.55 at 8:51	29.50 at 15:51	29.55 at 8:51	29.50 at 15:51
Altimeter	29.50 in	29.54 at 8:51	29.50 at 2:51	29.54 at 8:51	29.50 at 2:51
Solar Radiation	1221.0 W/m ² m	1390.0 at 12:51	18.0 at 0:51	1390.0 at 12:51	15.0 at 21:51
Fuel Temperature	61.0° F	64.0 at 12:51	46.0 at 6:51	64.0 at 12:51	46.0 at 6:51
10 hr Fuel Moisture	11 gm	17 at 5:51	11 at 13:51	17 at 5:51	11 at 13:51
Battery voltage	12.90 volt	13.00 at 9:51	12.30 at 5:51	13.00 at 17:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 17, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi 58	Lo		46	
WIND	Still Moderate	High	W@111mph		
HUMIDITY	Dry	Moderate	High	70%	

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	40
PICK-UP	5	Y	50
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Bobcat with Brush hog attachment	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	9	N	90

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

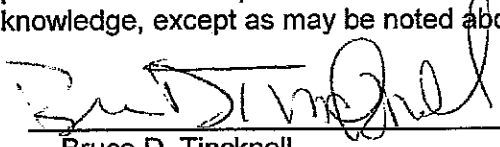
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/17/07, UXOSO FADL 5/17/07, UXO Escort 2007 Burn FADL 5/17/2007, Tailgate safety Meeting dated 05/17/07, JSAs dated 05/17/07 UXO, GEO, and 2007 Burn area, equipment inspections (Timberline), FT Ord Weather report,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/17/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Teams conducting target investigations. One UXO tech supporting Timberline

Summary: UXO Teams investigated and cleared 150 target sites.

MEC recovered: One 2.36" rocket

Seeds found: Two blue QC seeds. 1ea 37mm projo, 1ea M11 rifle grenade

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the high 40's. Afternoon in the high 50's.

None

SIGNATURE: John Tortolano

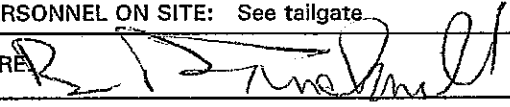
5/17/2007

page 1 of 1



DAILY LOG	DATE	05	17	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; Poison Oak, use alcohol/barrier cream. 0700 Watched the team check their instruments at the test pit, Set on level 4, 0830 QC'd 163 Grid packages 1030 2007 Burn area, observing operations 1300 MRS-16 QC'ing dig teams results, observed operations, no problems, 1635 MRS 16 secured 1700: COB, no incidents or accidents -----Nothing Follows-----		
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE 		DATE: 5/17/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/17/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: Poison oak - Spray equipment with diluted beach/alcohol prior to working on them

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
Chris Scoville	<i>Chris Scoville</i>
BOB SCOVILLE	<i>TZ M</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



FIELD ACTIVITY DAILY LOG

K1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 783751

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING
 0645 - DEPART FOR WORKSITE
 0705 - ARRIVE WORKSITE, COMPLETED JSA, STARTED SAFETY EQUIPMENT CHECKOUT
 0730 - TAZ AND BOBCAT START CUTTING, SAFETY EQUIPMENT CHECKOUT SHEETS COMPLETED
 1000 - BOBCAT FINISHED CUTTING ORIGINAL FIREBREAK ON FOUL BORE, LAW, AND PHOENIX RDS TO AUSTIN, MOVED TO CORNER OF AUSTIN RD AND BLUE LINE TO RE-CUT AREA SKIPPED BY TAZ DUE TO SUSPECT MEC
 1015 - TAZ SHUTDOWN TO REPOSITION TWISTED HYDRAULIC LINE
 1030 - LINE FIXED, TAZ CUTTING AGAIN
 1130-1215 LUNCHBREAK
 1500-1515 AFTERNOON BREAK, BOBCAT MOVED TO NOWHERE RD TO CUT EXISTING FIRE BREAK ON EITHER SIDE OF RD
 1545 - STOPPED CUTTING, PERFORMED MAINTENANCE, FUELED EQUIPMENT
 1635 - DEPARTED WORKSITE

TAZ CUT APPROX. 300FT
 BOBCAT CUT APPROX. 500FT @ 45FT^{WIDE} ON PHOENIX RD AND 200FT ON AUSTIN RD (CORNER SECTION THAT NEEDED TO BE RE-CUT)

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: _____ IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE:
 SIGNATURE: *[Signature]* DATE: 5/17/07



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/17/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	<i>Mark Isabell</i>
Joshua Jenkins	<i>JJ</i>
Mike Lightner	<i>M Lightner</i>
TARA VOLPE	<i>T Volpe</i>
Josh King	<i>J King</i>
VALERIE LONGSTAFF	<i>V Longstaff</i>
CHUCK MULLUM	<i>C Mullum</i>
Shirley Tudor	<i>S Tudor</i>

Meeting Conducted by: [Signature]

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/17/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection		
Crew Name Signatures:		
<i>Jeff Steinwand</i>	<i>Chris Beaulieu</i>	
<i>Bon M</i>		

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/17/2007

Job#: 856075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrate, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/17/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects <input checked="" type="checkbox"/></p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <p>Reflective vest and hard hats near heavy equipment <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable -Fuels <input checked="" type="checkbox"/></p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting <input checked="" type="checkbox"/></p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing <input checked="" type="checkbox"/></p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other <input checked="" type="checkbox"/></p> <p>200 FT BETWEEN TEAMS</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>		<p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 5/17/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325CL EXCAVATOR

Equipment Hrs: 2147.6



Date: 5/17/07

Location: NO WARNER + BITTER Rds

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

Equipment Nos: _____

Date: 5/17/07

Equipment Type: Bobcat T-300

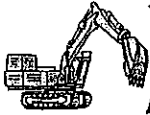
Location: East Ord

Equipment Hrs: 165.8

Supervisor: _____



DAILY EQUIPMENT INSPECTION



List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 18, 2007 - 6:56 PDT

Most Recent Observations at May 18, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	46.0° F	48.0 at 0:51	46.0 at 1:51	58.0 at 15:51	46.0 at 1:51
Dew Point	44.9° F	46.4 at 0:51	44.6 at 1:51	49.4 at 15:51	44.6 at 1:51
Relative Humidity	96%	96 at 2:51	94 at 0:51	96 at 2:51	73 at 14:51
Wind Speed	6 mph from WSW	11 at 0:51	5 at 4:51	17 at 18:51	5 at 4:51
Wind Gust	11 mph	15 at 0:51	8 at 4:51	24 at 15:51	8 at 4:51
Pressure	28.98 in	29.02 at 0:51	28.98 at 4:51	29.03 at 23:51	28.98 at 17:51
Sea Level Pressure	29.51 in	29.55 at 0:51	29.51 at 4:51	29.56 at 23:51	29.50 at 18:51
Altimeter	29.50 in	29.54 at 0:51	29.50 at 4:51	29.55 at 23:51	29.50 at 17:51
Solar Radiation	34.0 W/m*m	35.0 at 4:51	27.0 at 0:51	1344.0 at 13:51	21.0 at 21:51
Fuel Temperature	46.0° F	46.0 at 0:51	44.0 at 3:51	66.0 at 16:51	44.0 at 3:51
10 hr Fuel Moisture	19 gm	20 at 3:51	16 at 0:51	20 at 3:51	10 at 15:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 2:51	13.00 at 8:51	12.40 at 7:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 18, 2007

DAY

S	M	T	W	THUR	<u>F</u>	S
---	---	---	---	------	-----------------	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

WEATHER

Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>60</u>	Lo	<u>46</u>	
Still	<u>Moderate</u>	High	<u>W@15mph</u>	
Dry	<u>Moderate</u>		<u>54%</u>	

DELIVERY ORDER NO. 0016

TEMP: H/L

CONTRACT NO. DACW05-96-D-0011

WIND

PROJECT NO. 846075

HUMIDITY

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equip operator		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	40
PICK-UP	4	Y	50
PICK-UP	1	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	0	Timberline	0
Bobcat with Brush hog attachment	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	9	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

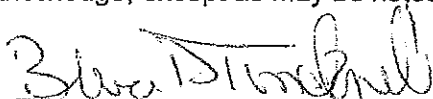
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/18/07, UXOSO FADL 5/18/07, Tailgate safety Meeting dated 05/18/07, JSAs dated 05/18/07 UXO, GEO, FT Ord Weather report,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/18/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Teams conducting target investigations.

Summary: UXO Teams investigated and cleared 187 target sites.

MEC recovered: Two 2.36" rockets
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily/Weekly admin duties were completed.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the high 50's.	None



DAILY LOG	DATE	05	18	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; Discussed weekend traffic and congestion around area</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0830 QC'd 141 Grid packages</p> <p>1030 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1300 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>[Handwritten Signature]</i>		DATE: 5/18/07	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

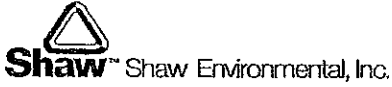
ATTENDEES

NAME PRINTED	SIGNATURE
Valerie Langstaff	<i>Valerie Langstaff</i>
Josh King	<i>Josh King</i>
John Costalomo	<i>John Costalomo</i>
Mark ISABELL	<i>Mark ISABELL</i>
John SAMS	<i>John SAMS</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
JEFF STEINWARD	<i>Jeff Steinward</i>

Meeting Conducted by: *Jeff Steinward*

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/18/2007

Job#: 856075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions/ overhanging tree branches Poison oak UXO Dust Heavy equipment operations Hot dry working conditions Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves, observe working/walking conditions Mod "D" PPE, Clean PPE/Work boots with alcohol Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Stay hydrated, drink plenty of fluids, wear sunscreen Eye contact with equipment operator		
Crew Name Signatures:	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 5/18/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented- non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/18/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/18/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: May 18, 2007 - 15:58 PDT

Most Recent Observations at May 18, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	60.0° F	60.0 at 13:51	46.0 at 1:51	60.0 at 13:51	46.0 at 1:51
Dew Point	43.3° F	50.2 at 9:51	43.3 at 15:51	50.2 at 9:51	43.3 at 15:51
Relative Humidity	54%	97 at 6:51	54 at 15:51	97 at 6:51	54 at 15:51
Wind Speed	15 mph from W	15 at 15:51	5 at 4:51	17 at 18:51	5 at 4:51
Wind Gust	24 mph	24 at 15:51	8 at 4:51	24 at 17:51	8 at 4:51
Pressure	29.01 in	29.04 at 11:51	28.98 at 4:51	29.04 at 11:51	28.98 at 17:51
Sea Level Pressure	29.53 in	29.56 at 11:51	29.51 at 4:51	29.56 at 11:51	29.50 at 18:51
Altimeter	29.53 in	29.56 at 11:51	29.50 at 4:51	29.56 at 11:51	29.50 at 17:51
Solar Radiation	1226.0 W/m*m	1363.0 at 13:51	27.0 at 0:51	1363.0 at 13:51	21.0 at 21:51
Fuel Temperature	68.0° F	68.0 at 15:51	44.0 at 3:51	68.0 at 15:51	44.0 at 3:51
10 hr Fuel Moisture	10 gm	21 at 9:51	8 at 6:51	21 at 9:51	8 at 6:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 6:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: December 18, 2006

DAY	S	M	T	W	T H	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
Hi	33	Lo	48	
Sill	<u>Moderate</u>	High	NW@5 mph	
Dry	<u>Moderate</u>	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Site Prep, Surface Sweep

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.
Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

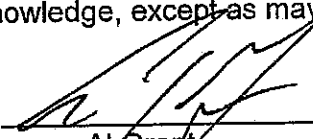
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/18/06, UXOQCS/UXOSO FADL dated 12/18/06, Team FADL dated 12/18/06, Tailgate Safety Meeting dated 12/18/06, JSA dated 12/14/06 (2 pages), Follow-up for surface removal dated 12/18/06.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/18/06
Date

F-1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface Clearance .	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended morning meetings.
 0700 - Continued surface UXO clearance operations.

Summary: Completed 27 full grids and 2 partial grids. Collected and removed 217 pounds of MEC scrap. **FOURTEEN** MEC item encountered. Seven 2.36 inch rockets, 3 - M1 practice Mines, and 3 - Suspect M9 Rifle Grenades were left in place for further investigation. ONE - ATWESS (tow missile simulator) was transported to a safe storage area by USACE OE Safety.

1700 - Done for the day.

1800 - 1830 - Performed admin duties.

Note: I feel surface clearance production will start to decrease due to working near and into the bowl area which has the most surface debris contamination. Today we collected more MEC scrap when compared to other sweep days. Maintaining clearance rates of 20 or more grids per day will be difficult.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Heavy morning frost about 26, Afternoon near 52.	



Shaw E & I, Inc.

UXO Safety/QC FIELD ACTIVITY DAILY LOG

L-6

DAILY LOG	DATE	12	18	06
	NO.			
	SHEET	1	OF	1

PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
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FIELD ACTIVITY SUBJECT: UXO Safety and QC Report

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

0600: Prep for tailgate opened building
0630: Tailgate (Topic: Weekend safety briefing)
0645: Watched the teams check their instruments at the test pit. All the units checked out.
0700: Teams onsite begin surface sweep operations
0705: Admin
0900: Walked the line with the crew, looked at the areas that have been surface cleared.
1100: Checked on crew all is well.
1215: Admin
1400: Walked with the teams and observed their methods and looked at their work. All is well.
1630: Closed MRS-16 for the day.
1700: COB

MEC encountered: See SUXOS FADL

-----Nothing Follows-----

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: N/A
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WEATHER CONDITIONS: cool 33 degrees 45 degrees PM	IMPORTANT TELEPHONE CALLS:
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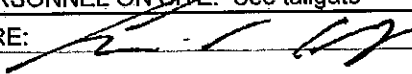
SHAW PERSONNEL ON SITE: See tailgate

SIGNATURE: A. C. Grant	DATE: 12/18/06
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FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	12	18	2006
	No.			13
	Sheet	1 of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, cold, slippery conditions discussed		
Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, starting surface sweep, Schonstedts set on Level 2		
1130 - 1215 Lunch		
Surface sweeps continues		
1630 MEC Scrap inspected and turned over to SUXOS		
1650 Returned to office, secured and cleaned equipment		
1700 Work completed for today		
<i>Equipment used: 4 rental pickup trucks ,1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument</i>		
<i>Grids surfaced swept: 29 MEC Scrap located: 217 lbs</i>		
<i>UXO Located: 1 Ea Simulator, Anti-tank, Guided Missile and Rocket, M22 (ATWESS) turned over to USACESO</i>		
Problems encountered: Several large piles of small arms links and clips encountered today, also working in :bowl area, encountering large amounts of MEC Scrap		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		NONE
WEATHER CONDITIONS: Temps: 28 - 55		IMPORTANT TELEPHONE CALLS:
Morning: COLD, with frost on ground		NONE
Afternoon Cool, slight breeze ENE		
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 18-Dec-06

K-19

Unexploded Ordnance Tracking Form

UXO GPS ID	PHOTO ID	TEAM
UXO-1-065	1660	A
Grid ID		
C3A3E9		

TEAM LEADER
B. J. Traylor

INITIAL INFORMATION			
Date Found	Initial Condition	Initial Description	Initial Disposition
12/18/06	DOD FIRE	PT USES	SAA
Surface?	YES / NO	Initial Comments	
	Circle One		

Manual Reference	Initials	Final Abbreviated Description
Trm 43-0001-37	BSA	SIMULATOR, LAUNCHING, ANTI-TANK GUIDED MISSILE AND ROCKET, M9A

DEMO INFORMATION		
Demo Date	Demo Completed	Demo Description
	YES / NO	
	Circle One	
		Demo Comments

OE Final Disposition	OE Final Condition	OE TRANSFER

QUALITY CONTROL INFORMATION	
QC Review Passed?	Quality Control Review Comments
YES / NO	
Circle One	Modification Notes

UXO Supervisor/Manager
 UXO Quality Control
 USACE/Army

Signature/Title/Date

Grid Summary Sheet

Team #: 4
 Date: 12/18/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A069	12/18/06			X		✓ (Access) 1 team	7	BST
C3A349		12/18/06		X				
C3A219				X				
C3A279				X				
C3B2A9					X			
B3I269				X				
B3I219				X			7	
B3D279				X				
C3A2A9	12/18/06	12/18/06		X		✓ (Access) 1 team	3 1/2	BST

Name: Rover D. Inckrell

Reviewed By: SUXOS
 Team Leader: QC

Signature/Date: [Signature] 12/18/06

Grid Summary Sheet

Team #: **K-14**
 Date: **12/18/09**

A

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A2B9	12/18/09	12/18/09		X		N	9	BDM
C3A2C9				X		N	9	
C3A2D8				X		N	21 48	
C3A2E8				X		N	12	
C3A2F8				X		N	12	
C3A2G8				X		N		
C3A2H8				X		N		
C3A2H7				X		N	9	
C3A2G7				X		N	10	
C3A2F7				X		N	23	BDM

2177 lbs

Name **BOUCE N. TINKNELL**

Reviewed By
 Team Leader
 SUXOS
 QC

Signature/Date
[Signature] 12/18/09

Grid Summary Sheet

Team #: 4
 Date: 12/18/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
CSA2E9	12/18/06	12/18/06		X				
CSA2E9	12/18/06	12/18/06		X			11	BZT
CSA2D9				X			13	
CSA3CI		12/18/06		X			6	
CSA3BI				X			6	
CSA3A1				X				
B3J3JI		12/18/06		X				
B3J3HI	12/18/06			X				

Name: James J. Timken
 Reviewed By: James J. Timken
 Team Leader: SUXOS
 QC: QC

Signature/Date: [Signature] 12/18/2006



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/18/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: _____

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND	
JOHN HOWER	
John Testalano	
Jim Mathison	
Bill Mackrell	
JAMES DEAKE	
ASHLEY RICE	
Harley Davidson	
John Sullivan	

Meeting Conducted by: Al Grant

Supervisor: _____

Manager: _____

TAILGATE SAFETY MEETING CONTUATION SHEET

DATE: 12/18/2006

Job Number 846075

Job Name: Fort Ord/Terc II

NAME PRINTED

SIGNATURE

TARA VOLPE

Julian SPINA

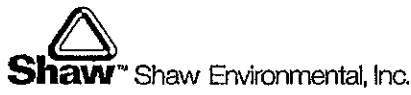




JOB SAFETY ANALYSIS

Date: 12/18/2006
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Tim Mathisen JSA Prepared by: Al Grant Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 12/18/2006
Job#: 846075
Permit#:
Issued By: A.grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliet
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

- Confined Space Know the Following:**
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: December 19, 2006

DAY	S	M	T	W	T H	F	S
-----	---	---	----------	---	--------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif.DELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011

Project # 846075

WEATHER

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	24	Lo	53	
Still	Moderate	High	NW@10 mph	
Dry	Moderate	High	39%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
9	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	QCM	MGT	ITSI	Fort Ord, Calif./QC

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	1	Y	10
PICK-UP	3	Y	30

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

 Site Prep, Surface Sweep

- 4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Follow-up inspection Surface Sweep

- 5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

All metal detectors that are used by the Team are tested at the test pit everyday.

Schoenstedts were set on setting #2 for the magnetometer aided surface sweep.

- 6. Material Received: (Note inspection results and storage provided).

NONE

- 7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

- 8. Off-site Surveillance Activities, Including Action Taken:

NONE

- 9. Job Safety: (List items checked, results, instructions and corrective actions taken).

SEE UXOQC/UXOSO FADL (attached)

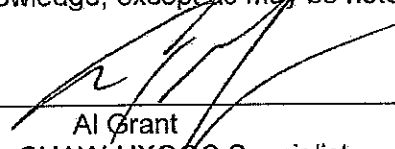
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL dated 12/19/06, UXOQCS/UXOSO FADL dated 12/19/06, Team FADL dated 12/19/06, Tailgate Safety Meeting dated 12/19/06, JSA dated 12/14/06 (2 pages), Follow-up for surface removal dated 12/19/06,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Al Grant
SHAW-UXOQC Specialist

12/19/06

Date

F-1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal	846075
Field Activity: Surface Clearance .	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Al Grant	UXO QC/Safety	10.5
Bruce Tincknell	Team Leader	10
Jack Tortolano	Team Leader	10
Jimmy Drake	UXO Tech III	10
Harley Davidson	UXO Tech III	10
John Honer	UXO Tech III	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - Continued surface UXO clearance operations.

Approx. - 1030 - Escorted Mike Fitzgerald and Nels Johnson to and around MRS-16 in order to provide them an idea on what type of UXO work that was currently being performed at Ft. Ord by Shaw personnel.

Note: No problems or unusual situations encountered today.

Summary: ONE live M49 Trip Flare was transported to the ASP by USACE OE Safety. THREE 2.36 inch Rockets and ONE M1 Practice Mine were left in place for further inspection. Completed grids: 18 full and 4 partial. Collected 348 pounds of MEC scrap.

1700 - Secured.

1730 - 1800 - Secured after completing daily admin duties.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
	None
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Heavy morning frost about 24, Afternoon in the high 50's.	

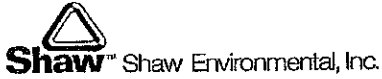


L-6

DAILY LOG	DATE	12	19	06
	NO.			
	SHEET	1	OF	1

UXO Safety/QC FIELD ACTIVITY DAILY LOG

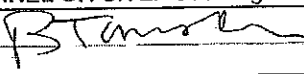
PROJECT NAME: MRS-16 Fort Ord	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate opened building</p> <p>0630: Tailgate (Topic: Water consumption. Boot reimbursement program)</p> <p>0645: Watched the teams check their instruments at the test pit. All the units checked out.</p> <p>0700: Teams onsite begin surface sweep operations.</p> <p>0705: Admin</p> <p>0900: Walked the line with the crew looked at the areas that have been surface cleared.</p> <p>1100: Checked on crew all is well.</p> <p>1215: Admin</p> <p>1400: Walked with the teams and observed their methods and looked at their work. All is well.</p> <p>1630: Closed MRS-16 for the day.</p> <p>1700: COB</p> <p>MEC encountered: See SUXOS FADL</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS: cool 24 degrees 53 degrees PM	N/A IMPORTANT TELEPHONE CALLS:
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: A. C. Grant	DATE: 12/19/06



FIELD ACTIVITY DAILY LOG

F-1

F1				
Daily Log	Date:	12	19	2006
	No.			14
	Sheet	1 Of		1

PROJECT NAME: FORT ORD, CA MRS -16		Project Number: 846075
FIELD ACTIVITY SUBJECT:		
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,		
0630 Arrive Shaw office, completed Tailgate and JSA, cold, slippery conditions discussed, also M22 ATWESS device		
Schonstedts checked in test grid, UXO teams gathered PPE and equipment, depart for MRS 16		
Arrived MRS 16, team assignments made, starting surface sweep, Schonstedts set on Level 2		
1130 - 1215 Lunch		
Surface sweeps continues		
1630 MEC Scrap inspected and turned over to SUXOS		
1650 Returned to office, secured and cleaned equipment		
1700 Work completed for today		
Equipment used: 4 rental pickup trucks, 1 Polaris utility vehicle, 11 schonstedts, 4 hand held radios, 1 Trimble Survey instrument		
Grids surfaced swept: 22 MEC Scrap located: 248 lbs		
UXO Located: 1 Ea Flare, Ground, Trip, M49A1 turned over to USACESO		
Problems encountered: Working in bowl area, encountering large amounts of MEC Scrap		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
USACE OE Safety Clint Huckins		
		NONE
WEATHER CONDITIONS: Temps: 26 - 58		IMPORTANT TELEPHONE CALLS:
Morning: COLD, with frost on ground		
Afternoon: Cool, slight breeze ENE		
		NONE
SHAW PERSONNEL ON SITE: See tailgate		
SIGNATURE: 		DATE: 19-Dec-06

Unexploded Ordnance Tracking Form

UXO GPS ID B3216 PHOTO ID 700-1670-375 A TEAM LEADER Bruce J. Kucharski

Grid ID B3216

INITIAL INFORMATION

Date Found	Initial Condition	Initial Description	Initial Disposition	Initial Comments
10/19/06	unknown	FLARE TRIP, M19	SAAA	

Surface? YES / NO
Circle One

Manual Reference

Initials

Final Abbreviated Description

FLARE TRIP, M19

DEMO INFORMATION

Demo Date	Demo Completed	Demo Description	Demo Comments
	YES / NO <i>Circle One</i>		

OE Final Disposition

OE Final Condition

OE TRANSFER

Signature/Title/Date

QUALITY CONTROL INFORMATION

QC Review Passed?	Quality Control Review Comments	Modification Notes
YES / NO <i>Circle One</i>		

UXO Supervisor/Manager

UXO Quality Control

USACE/Army

K-19

342
8292

Grid Summary Sheet

Team #: 4
Date: 12/19/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A0C6	12/19/06	12/19/06		X			46	BDA
C3A0Y6	12/19/06			X		Y.A. 36	178	BDA

Name: B. D. [Signature]

Reviewed By
Team Leader
SUXOS
QC

Signature/Date
[Signature] 12/19/06

Grid Summary Sheet

Team #:

Date:

12/19/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions			UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid				
B35268	12/19/06	12/19/06			Y		N		BDA
B35278	12/19/06	I			X		N		}
B35288		I		X			Y N	3	
B35298				X			Y 2.36	3	
C342A8				X	Y		Y MINE		
C342B8				X			Y 2.36	8	
C342C8		12/19/06		X				8	
C342E7		I		X				1465	
C342D7		I		X				50	
C342C7		I		X				68	

Name

Bruce T. Tinkler

Reviewed By

Team Leader

SUXOS

QC

Signature/Date

Bruce T. Tinkler

Grid Summary Sheet

Team #:

Date:

3
12/19/06

Grid ID	Grid Started (Date)	Grid Completed (Date)	Grid QC/QA (Date)	Grid Dimensions		UXO Found (Y/N)	OE Scrap Weight (Lbs.)	Team Leader (Initials)
				100 x 100 (check appropriate box)	Partial Grid			
C3A2B7	12/19/06	12/19/06		X		N		BDA
C3A2A7				X		N	30	
B3J2J7				X		N	60	
B3J2I7				X		N	15	
B3J2H7					X	N		
B3J2H6					X	N		
B3J2J6				X		Y mg	20	
B3J2I6				X		W g		
C3A2A6				X		N		BDA
C3A2B6				X		N		

Name

Wase Tuckwell

Reviewed By

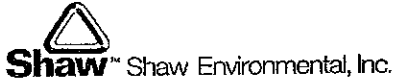
Team Leader

SUXOS

QC

Signature/Date

[Signature]



JOB SAFETY ANALYSIS

Date: 12/19/2006
 Job#: 846075
 Permit#:
 Issued By: A. Grant

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Tim Mathisen
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: Al Grant Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Sweep Operations		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting Slip, Trip, and Falls Cuts and abrasions Poison oak UXO Dust Heavy equipment operations		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas Proper lifting technique, weight limit of 60 lbs Wear work gloves Mod "D" PPE Stay with UXO Personnel, Do not pick up any objects Use of Dust Mask Water intake, stay hydrated Hard hats and reflective vest when spotting for heavy equipment Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 12/19/2006
 Job#: 846075
 Permit#:
 Issued By: A.grant

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 12/19/2006 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca.

Type of Work: Site Prep, UXO Surface Sweep

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. Backhoe

Other: Spotters and personnel working with backhoe need to wear reflective vests

ATTENDEES

NAME PRINTED	SIGNATURE
John Mathison	<i>John Mathison</i>
John Honor	<i>John Honor</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
John Togliano	<i>John Togliano</i>
Bruce ...	<i>Bruce ...</i>
JAMES DRAKE	<i>James Drake</i>
John ...	<i>John ...</i>
TARA VOLPE	<i>Tara Volpe</i>
Harley Davidson	<i>Harley Davidson</i>

Meeting Conducted by: Al Grant *Al Grant*

Supervisor:

Manager:

K.3.1

Form QC-5

FOLLOW UP PHASE INSPECTION CHECKLIST

CONTRACTOR QUALITY CONTROL DAILY REPORT CONTINUATION SHEET
(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Date:

Contractor: Shaw Environmental, Inc.

Contract No: DACW05-96-D-0011 Task Order No: 016 WAD 60 Report No:

Y=YES; N=NO; SEE REMARKS BLANK=NOT APPLICABLE	
WORK COMPLIES WITH CONTRACT AS APPROVED IN INITIAL PHASE	YES

IDENTIFY DEFINABLE FEATURE OF WORK, LOCATION, AND LIST PERSONNEL PRESENT

SURFACE SWEEP MRS-16 SEE SUXOS FADL FOR PERSONNEL LIST

ALL WORK IS IAW CONTRACT DOCUMENTS AND THE WORK PLAN

TESTING PERFORMED & WHO PERFORMED TEST (Include number of samples and/or tests taken)

USACE QA Representative _____ Date _____

Contractors QC Representative [Signature] Date 12/20/06

DAILY QUALITY CONTROL REPORT

DATE: May 21, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif.

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

WEATHER	Sunny	Clear	Overcast	Rain	Fog
TEMP: H/L	Hi 59	Lo	48		
WIND	Still	Moderate	High	W@16mph	
HUMIDITY	Dry	Moderate	High	65%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
3	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	40
PICK-UP	5	Y	50
PICK-UP	3	GSA	30
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	3	Timberline	22
Bobcat with Brush hog attachment	1	Timberline	2
Excavator 325 (TAZ)	1	Timberline	10
Radios	9	N	90

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Anomaly excavation MRS-16, GEO Reacquire, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)
See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).
None

6. Material Received: (Note inspection results and storage provided).
NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:
NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).
See UXOSO FADL

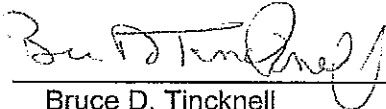
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/21/07, UXOSO FADL 5/21/07, UXO Escort 2007 Burn FADL 5/21/2007, Tailgate safety Meeting dated 05/21/07, JSAs dated 05/21/07 UXO, GEO, and 2007 Burn area, equipment inspections (Timberline), FT Ord Weather report, Hot Work permits for 2007 Burn Area

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/21/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations. One Tech supporting Timberline, One Tech supporting GEO

Summary: UXO Team investigated and cleared 154 target sites.

MEC recovered: Two 2.36" rockets
Seeds found: One blue QC seed, 60mm Mortor

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: Tara Volpe on leave thru 28 May.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the low 50's. Afternoon in the low 60's.

None

SIGNATURE: John Tortolano

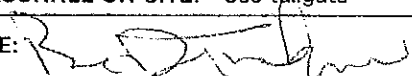
5/21/2007

page 1 of 1



DAILY LOG	DATE	05	21	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; Discussed weekend traffic and congestion around area</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Issued Shaw "HOT WORK Permit" to 2007 burn area, welding needed on TAZ cutter head</p> <p>0745 QC'd 182 Grid packages</p> <p>0800 BLM, Briefed Bruce and 1 volunteer. They are inside MRS-16 (Northwest corner) eradicating "Hemlock:"</p> <p>0815 "HOT work" completed at 2007 burn area</p> <p>1030 2007 Burn area fire break, no problems, BOBCAT Demobed</p> <p>1145 MRS-16 QC'ing dig teams results, observed operations, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: <u>BLM</u>	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: 	DATE: 5/21/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE

0720 - ARRIVE WORKSITE, COMPLETED JSA, STARTED SAFETY EQUIPMENT CHECKOUT FOR TAZ, PERFORMED MAINTENANCE

0745 - SAFETY CHECKOUT COMPLETE, TOOK MEASUREMENT FROM NOWHERE RD INTO AREA B TO ENSURE 200FT. REQUIREMENT, TAZ STARTED CUTTING, BOBCAT MOVED TO WATKINS GATE RD TO BE LOADED UP AND TAKEN OFF SITE

0855 - TAZ STOPS CUTTING TO PERFORM HOT WORK (WELDING) ON CUTTING HEAD, HOT WORK PERMITS ON HAND, FIRE EXTINGUISHERS READY, AND AREA IS SAFE FOR HOT WORK

0915 - HOTWORK COMPLETE, NO FIRES OR MISHAPS TO REPORT, DOUBLE CHECKED EVERYTHING ON CUTTING HEAD AFTER CRACKED WELDS WERE REPAIRED

0930 - TAZ STARTED CUTTING AGAIN

1015 - BOBCAT DEPARTS WORKSITE ON TRAILER, IT'S JOB ON THE PROJECT IS COMPLETE

1130-1215 * LUNCHEBREAK

1430 - SHAW 2 ON SITE WITH CHRIS FROM FIRE DEPARTMENT BEING ESCORTED BY SHAW SAFETY TO SURVEY CUT AREA FOR 2007 VEG BURN

1500-1515 AFTERNOON BREAK

1605 - TAZ STOPS CUTTING, FUELED MACHINE

1630 - DEPARTED WORKSITE

^{CUT}
TAZ APPROX. 250 FT.

VISITORS ON SITE: KEVIN SIEMANN (SHAW 2) CHRIS (FIRE DEPARTMENT)	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]* DATE: 5/21/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

LI

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/21/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Poison Oak – Use barrier cream and wash with alcohol

ATTENDEES

NAME PRINTED	SIGNATURE
John Testolero	
John SPARKS	
Joshua Senkins	
VALERIE LANGSTAFF	
Joshua King	
Mike Lightner	
CHUCK NICHUM	
MARK ISABELL	

Meeting Conducted by:

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/21/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; TAZ and Brush hog

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted beach/alcohol prior to performing maintenance**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	
CHRIS SCOVILLE	
EID WORTH	

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/21/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time: _____
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/21/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input checked="" type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO Intrusive 200 ft</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/21/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		Supervisor's Initials
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrate, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/21/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

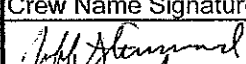
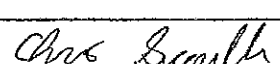

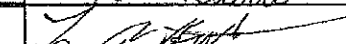
BRUSH Clearing

Date: 5/21/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location	
	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	
	Assembly Point: Escort Vehicle	
New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		
 		
 		

JOB SAFETY ANALYSIS

Date: 5/21/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
--	---	--

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

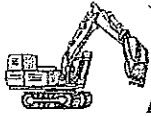
Date: 5/21/07

Equipment Type: Bobcat T-300

Location: Fort Ord

Equipment Hrs: 172.0

Supervisor: _____



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Chris Scoville

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Equipment Nos: _____

Equipment Type: 325 CL

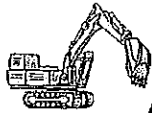
Equipment Hrs: 2153.8



Date: 5/21/07

Location: Nowhere + Bomen

Supervisor: Ed



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: Bob Scoville (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

HOT-WORK PERMIT

For use of this form, see AR 420-90; the proponent agency is ACSIM

1. LOCATION <i>Newham Rd + Bitter</i>	2. DATE <i>21 May 07</i>	3. PERMIT NO. <i>07-006</i>
4. TYPE WORK	5. START TIME <i>0830</i>	6. FINISH TIME <i>1700</i>
7. a. NAME OF PERSON RESPONSIBLE FOR HOT-WORK AT JOB SITE (Contractor/Government Employee) <i>Val Valdez 750-5718</i>	7. b. SIGNATURE <i>Val Valdez</i>	

PRECAUTIONS BEFORE OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
8. Did Fire Department Inspector inspect site?	<input checked="" type="checkbox"/>	
9. Are there procedures for Fire Department emergency notification? (Emergency No.)	<input checked="" type="checkbox"/>	
10. Are combustibles in area noted?	<input checked="" type="checkbox"/>	
11. Should combustibles be covered? (If yes, note in remarks)		<input checked="" type="checkbox"/>
12. Are proper extinguishers on hand?	<input checked="" type="checkbox"/>	
13. Is wet-down necessary? (If yes, note in remarks)		<input checked="" type="checkbox"/>
14. Is smoking permissible at work sites?		<input checked="" type="checkbox"/>
15. Is continuous fire watch required?		<input checked="" type="checkbox"/>
16. Is Fire Department standby required?		<input checked="" type="checkbox"/>
17. Are other precautions required? (If yes, note in remarks)		<input checked="" type="checkbox"/>
18.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE <i>[Signature]</i>	18.b. DATE <i>21 May 07</i>	

PRECAUTIONS AFTER OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
19.a. Was Fire Department notified after hot-work operation was completed?	<input checked="" type="checkbox"/>	
19.b. Time: <i>0915</i>		
20.a. Did Fire Department inspector inspect work site?		<input checked="" type="checkbox"/>
20.b. Time:		
21. Are after work conditions safe? (If no, note in remarks)	<input checked="" type="checkbox"/>	
22. Are heat producing devices safe if left at work site?	<input checked="" type="checkbox"/>	
23.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE	23.b. DATE <i>5/21/07</i>	

24. REMARKS

Call 7544, 7701, 7702, 7545 to close out

NOTE: PERMIT VALID ON DAY OF OPERATION AT ONE LOCATION ONLY



Procedure No.
Revision No.
Date of Revision
Last Review Date
Page

HS314
0
04/25/02
04/25/02
6 of 6

ATTACHMENT 2
HOT WORK PERMIT

Project Name 2007 BURN Project No. 846675
 Good for This Date Only 05/01/07 Time: From 0800 AM/PM To 1600 AM/PM
 Hot Work Area NOWHERE ROAD
 Specific Work to be Done WELD ON TAZ CUTTING HEAD
 Personal Protective Equipment Required: _____

Emergency Equipment Required: FIRE EXT.

CHECKLIST	INITIAL:	
	YES	DOES NOT APPLY
Area personnel have been informed of work to be performed.	<u>BOT</u>	
All tanks, lines, valves are disconnected, blinded, or blocked out.		X
Electrical service has been locked out and tagged.		X
Equipment and all attached piping has been cleaned and purged with (check blank): Water _____ Steam _____ Inert Gas _____ Air _____		X
All grounding/bonding wire in place.		X
Surrounding equipment and operations are safe for hot work.	<u>BOT</u>	
No open vessels, lines, or combustible items within 35 feet of hot work area.	<u>BOT</u>	
Fully charged and appropriate fire extinguisher easily accessible.	<u>BOT</u>	
Fire watch has been provided. <u>- JEFF STEWART</u>	<u>BOT</u>	
No flammable gases greater than 10% LEL in hot work area.		X
Compressed gas cylinders kept upright and secured.		X
Air monitoring required.		X

AIR MONITORING (If Required)						
EXACT LOCATION OF TEST	TIME	% LOWER EXPLOSIVE LIMIT	% OXYGEN	OTHER TEST	OTHER TEST	INITIAL

Special Instructions: _____

Completed By: KARL STEWART Printed Name [Signature] Signature 5/21/07 Date

Weather Conditions for RTGC1

Current time: May 21, 2007 - 16:16 PDT

Most Recent Observations at May 21, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	59.0° F	59.0 at 15:51	48.0 at 7:51	59.0 at 15:51	48.0 at 7:51
Dew Point	47.2° F	51.2 at 0:51	46.2 at 14:51	51.2 at 23:51	43.3 at 16:51
Relative Humidity	65%	98 at 4:51	65 at 15:51	98 at 4:51	60 at 16:51
Wind Speed	16 mph from W	17 at 14:51	2 at 9:51	19 at 16:51	2 at 9:51
Wind Gust	25 mph	25 at 15:51	9 at 9:51	30 at 16:51	9 at 9:51
Pressure	28.85 in	28.91 at 0:51	28.85 at 14:51	28.93 at 16:51	28.85 at 14:51
Sea Level Pressure	29.37 in	29.44 at 8:51	29.37 at 15:51	29.45 at 16:51	29.37 at 15:51
Altimeter	29.37 in	29.43 at 0:51	29.37 at 14:51	29.45 at 16:51	29.37 at 14:51
Solar Radiation	1243.0 W/m ² m	1384.0 at 13:51	53.0 at 3:51	1384.0 at 13:51	23.0 at 21:51
Fuel Temperature	63.0° F	67.0 at 11:51	49.0 at 4:51	67.0 at 11:51	49.0 at 4:51
10 hr Fuel Moisture	12 gm	35 at 8:51	0 at 4:51	35 at 8:51	0 at 4:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 6:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 22, 2007

DAY

S	M	<u>T</u>	W	THUR	F	S
---	---	-----------------	---	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

	<u>Sunny</u>	<u>Clear</u>	Overcast	Rain	Fog
Hi	69		Lo	44	
Still	<u>Moderate</u>	High	W@17mph		
Dry	<u>Moderate</u>	High	62%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
4	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	40
PICK-UP	6	Y	50
PICK-UP	3	GSA	30
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Bulldozer D6N	1	Y	10
Water Truck	1	Y	10
Pickup	1	Timberline	22
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Large excavations filled in with bulldozer, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

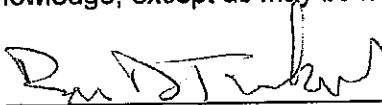
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/22/07, UXOSO FADL 5/22/07, UXO Escort 2007 Burn FADL 5/22/2007, Tailgate safety Meeting dated 05/22/07, JSAs dated 05/22/07 UXO, GEO, and 2007 Burn area, equipment inspections (Timberline), FT Ord Weather report,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/22/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations. One Tech supporting Timberline, One Tech supporting GEO
0900 - 0930 Attended prep meeting for dozer work.
0900 - 1630 One Tech supporting dozer operations moving trench spoils, back filling backhoe digs, repairing roads.
1100 - 1300 attended weekly scheduling meeting with USACE
Summary: UXO Team investigated and cleared 103 target sites.

MEC recovered: One 2.36" rocket
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: Tara Volpe on leave thru 28 May.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 40's. Afternoon in the low 60's.	None

SIGNATURE: John Tortolano

5/22/2007

page 1 of 1



L6

DAILY LOG	DATE	05	22	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; Heavy equipment MRS-16, Dust</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Completed daily reports</p> <p>0745 QC'd ¹³²182 Grid packages</p> <p>0800 Notified by USACESO that BLM would be working in the NW corner of MRS-16.</p> <p>1000 2007 Burn area fire break, no problems, observed measuring of fire break, area is correct. Removed 20 lbs of MDE to MRS-16</p> <p>1300 MRS-16 QC'ing dig teams results, observed bulldozer operations, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: <u>BLM</u>	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/22/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE, FUELED GSA VEHICLE

0720 - ARRIVE WORKSITE, COMPLETED JSA, START SAFETY CHECKOUT SHEET FOR TAZ, PERFORMED MAINTENANCE

0745 - TAZ SAFETY CHECKOUT COMPLETED, STARTED CUTTING

0830 - TAZ STOPPED CUTTING FOR SUSPECT ITEMS, FOUND (1) 3" STOKES MORTAR AND (1) 4" STOKES MORTAR, BOTH EMPTY AND OF NO CONCERN, REMOVED BY UKO QC/SAFETY AND TAKEN TO MRS-16, TOTAL OF 30lbs MD TAKEN AWAY

1130 - 1215 ^{PM} LUNCHBREAK

1220 - TOOK TWO MEASUREMENTS FROM NOWHERE RD INTO AREA B TO ENSURE THE 200FT REQUIREMENT IS BEING MET

1405 - MEASURED CUT FROM NOWHERE RD INTO CUT AREA B TO ENSURE THE 200FT REQUIREMENT IS BEING MET

1500 - 1515 AFTERNOON BREAK

1615 - TAZ STOPPED CUTTING FOR THE DAY, FUELED EQUIPMENT

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 400FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeff Steinmetz*

DATE: 5/22/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/22/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Heavy equipment on site- Blowing Dust

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
Valerie Langstaff	
John Sparks	
Mark Szabell	
Josh King	
Susan Selinas	
Mike Lightner	
Jeremy Flynn	
Shirley Indora	

Meeting Conducted by:

Supervisor: Kirk Bosse
John Anderson

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/22/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/22/2007

Job#: 856075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center; font-weight: bold;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrate, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/22/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>_____ Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

JOB SAFETY ANALYSIS

Date: 5/22/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the Items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p style="text-align: center;">WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p><input checked="" type="checkbox"/> Flammable</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>Other _____</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p><input checked="" type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO Intrusive 200 ft</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/22/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/22/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Equipment Nos: _____

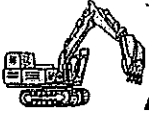
Equipment Type: 325cL

Equipment Hrs: 2161.1

Date: 5/22/07

Location: NOWHERE RD

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 22, 2007 - 16:38 PDT

Most Recent Observations at May 22, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	58.0° F	69.0 at 10:51	44.0 at 2:51	69.0 at 10:51	44.0 at 2:51
Dew Point	45.1° F	49.8 at 9:51	41.3 at 2:51	49.8 at 9:51	41.3 at 2:51
Relative Humidity	62%	95 at 4:51	49 at 10:51	95 at 4:51	49 at 10:51
Wind Speed	17 mph from W	17 at 15:51	2 at 8:51	19 at 17:51	2 at 8:51
Wind Gust	24 mph	24 at 15:51	5 at 8:51	27 at 18:51	5 at 8:51
Pressure	28.85 in	28.86 at 12:51	28.81 at 3:51	28.86 at 12:51	28.81 at 3:51
Sea Level Pressure	29.37 in	29.38 at 12:51	29.34 at 3:51	29.38 at 23:51	29.34 at 17:51
Altimeter	29.37 in	29.38 at 12:51	29.33 at 3:51	29.38 at 12:51	29.33 at 3:51
Solar Radiation	1252.0 W/m*m	1397.0 at 13:51	0.0 at 1:51	1397.0 at 13:51	0.0 at 22:51
Fuel Temperature	64.0° F	74.0 at 10:51	41.0 at 4:51	74.0 at 10:51	41.0 at 4:51
10 hr Fuel Moisture	8 gm	20 at 5:51	8 at 15:51	20 at 5:51	8 at 15:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 5:51	13.00 at 8:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 23, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
HI	71		Lo	44	
Still	Moderate	High	W@11mph		
Dry	Moderate	High	30%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
4	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	40
PICK-UP	6	Y	50
PICK-UP	3	GSA	30
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Bulldozer D6N	1	Y	10
Water Truck	1	Y	10
Pickup	1	Timberline	22
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Large excavations filled in with bulldozer, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/23/07, UXOSO FADL 5/23/07, UXO Escort 2007 Burn FADL 5/23/2007, Tailgate safety Meeting dated 05/23/07, JSAs dated 05/23/07 UXO, GEO, and 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report, FWV-TII-021 "Noisy Area"

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/23/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	0
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One UXO Team conducting target investigations. One Tech supporting Timberline, One Tech supporting GEO
One Tech supporting dozer operations moving trench spoils, back filling backhoe digs, repairing roads.

Summary: UXO Team investigated and cleared 90 target sites.

MEC recovered: Seven 2.36" rockets

Seeds found: One blue QC 37mm Projo

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note: Tara Volpe on leave thru 28 May.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 40's. Afternoon in the low 70's.	None

SIGNATURE: John Tortolano	5/23/2007	page 1 of 1
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L6

DAILY LOG	DATE	05	23	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; Heavy equipment MRS-16, Dust</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Completed daily reports</p> <p>0745 QC'd 99 Grid packages</p> <p>0900 MRS-16 QC'ing dig teams results,</p> <p>1015 Moved dig team to new grids</p> <p>1045 2007 Burn area fire break, no problems, observed measuring of fire break, area is correct.</p> <p>1330 MRS-16 QC'ing dig teams results, observed bulldozer operations, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/23/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE

0710 - ARRIVE WORKSITE, COMPLETED JSA, STARTED SAFE EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0745 - TAZ EQUIPMENT SAFETY CHECKOUT COMPLETE, STARTS CUTTING

1130 - 1215 LUNCHBREAK

1230 - MEASURED CUT FROM NOWHERE RD INTO AREA B TO ENSURE 200FT REQUIREMENT IS MET

1400 - MEASURED CUT FROM NOWHERE RD INTO AREA B TO ENSURE 200FT REQUIREMENT IS MET

1500 - 1515 AFTERNOON BREAK

1615 - TAZ STOPS CUTTING FOR THE DAY, PERFORMED MAINTENANCE

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 450 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeff Stumm*

DATE: 5/23/07



Shaw™ Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/23/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Heavy equipment on site- Blowing Dust; Sunny warm temps

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Kong	
Valerie Longstaff	
John Tortelomo	
John SPARKS	
Joshua Jenkins	
MARTE ISABELL	
Mike Lightner	
CHUCK WILSON	

Meeting Conducted by: S. Tudor

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/23/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/23/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 5/23/2007

Job#: 846075

Permit#:

Issued By: B. Tinknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/23/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/23/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
- GEO Teams**
- PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/23/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Use of Dust Mask		
Water intake, stay hydrated		
Hard hats and reflective vest when spotting for heavy equipment		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 5/23/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: May 23, 2007 - 16:00 PDT

Most Recent Observations at May 23, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	71.0° F	71.0 at 15:51	44.0 at 6:51	71.0 at 15:51	44.0 at 6:51
Dew Point	38.0° F	50.3 at 10:51	37.1 at 14:51	50.3 at 10:51	37.1 at 14:51
Relative Humidity	30%	95 at 1:51	30 at 15:51	95 at 1:51	30 at 15:51
Wind Speed	11 mph from NW	11 at 15:51	1 at 5:51	17 at 19:51	1 at 5:51
Wind Gust	15 mph	15 at 15:51	6 at 4:51	23 at 16:51	6 at 4:51
Pressure	28.91 in	28.92 at 10:51	28.82 at 0:51	28.92 at 10:51	28.81 at 18:51
Sea Level Pressure	29.41 in	29.43 at 10:51	29.35 at 3:51	29.43 at 10:51	29.32 at 18:51
Altimeter	29.43 in	29.44 at 10:51	29.34 at 0:51	29.44 at 10:51	29.33 at 18:51
Solar Radiation	1246.0 W/m ²	1389.0 at 13:51	1.0 at 0:51	1389.0 at 13:51	0.0 at 21:51
Fuel Temperature	78.0° F	79.0 at 12:51	43.0 at 4:51	79.0 at 12:51	43.0 at 4:51
10 hr Fuel Moisture	5 gm	16 at 2:51	5 at 14:51	16 at 2:51	5 at 14:51
Battery voltage	12.80 volt	13.00 at 8:51	12.30 at 5:51	13.00 at 8:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

FIELD WORK VARIANCE

Project Name/Number Fort Ord / 846075 CTO/WAD CTO 16 / WAD 06
 Applicable Document: Draft Final Work Plan, MRS-16 Date: 05/18/07
Munitions and Explosives of Concern Removal, Former
Fort Ord, California, August 2006, Revision 1

Problem Description:

A "noisy area" exists along the northern boundary of MRS-16. This area is subject to electromagnetic external noise (both high and low frequency), the cause of which is unknown. A list of all grids affected by this phenomenon is attached to this FWV. Approximately half of the grids listed are just partial areas within those grids. The processing geophysicist will make a judgement (background removal) regarding how to process the "partial grids" before the field implementation of this solution (as referenced below).

Recommended solution:

Several processing techniques have been tested to resolve the situation described above and a white paper (available upon request) outlines the tests that were implemented. As a result of the testing it was concluded (with concurrence from government QA) that the problem is best handled during reacquisition in the field. However, a different background removal or leveling technique for the data within the noisy area will be implemented to remove the low frequency electromagnetic noise.

Impact on present and completed work:

Will allow completion of anomaly investigation within the "noisy area."

Requested by: Marty Miele

Recommended revisions to the plan:

As referenced in the white paper, anomalies reacquired from 0 to 8 mV yielded no source. Therefore, any anomaly that is reacquired at 8 mV or less will not be excavated. Ten percent of the anomalies that are reacquired from 8 to 10 mV will be excavated. Although none of the anomalies in this range yielded sources during the field testing, they will be considered QC excavations. All anomalies with reacquisition values above 10 mV will be excavated. This approach will minimize cost and schedule impacts on anomalies caused by external noise. Because of the external noise in these areas, excavations will be conducted beneath the flag only and the 3 foot radius surrounding the hole will not be checked for anomalies between 10 and 14mV. Excavations will cease at 2 feet.

Clarification Minor Change Major Change

Affects Budget Yes No X
 Affects Schedule Yes No X

Signature [Signature] Date 5/18/07
 Technical Reviewer

Shaw Approval:
 Signature [Signature] Date 5/18/07 Signature [Signature] Date 5/18/07
 SUXOS Project Manager
 Per PCK



Field Work Variance No. TII-021
Page 2 of 2

Signature [Signature] Date 5/18/07
UXOQCS

USACE Approval: If Major Change:

Signature [Signature] Date 5/21/07 Signature [Signature] Date 5/22/07
OE Safety Specialist USACE COR or TM

Grid	Note:
C3B2A3	Partial
C3B2B3	
C3B2A4	
C3B2B4	
C3B2C4	
C3A2J5	Partial
C3B2A5	
C3B2B5	
C3B2C5	
C3B2D5	
C3B2E5	
C3A2J6	
C3B2B6	
C3B2C6	
C3B2D6	
C3A2J7	Partial
C3B2A7	
C3B2B7	
C3B2C7	Trees
C3A2J8	
C3B2A8	
C3B2B8	Trees
C3A2I9	Partial
C3A2J9	
C3B2B9	
C3A2H0	Partial
C3A2I0	
C3A2J0	
C3A3G1	Partial
C3A3H1	Partial
C3A3I1	
C3A3J1	
C3A3F2	Partial
C3A3G2	Partial
C3A3H2	
C3A3I2	
C3A3E3	Partial
C3A3F3	
C3A3G3	
C3A3H3	
C3A3I3	
C3A3D4	Partial
C3A3E4	
C3A3F4	
C3A3G4	Trees
C3A3H4	
C3A3C5	Partial
C3A3D5	
C3A3E5	
C3A3F5	

Grid	Note:
C3A3G5	Trees
C3A3C6	Partial
C3A3D6	
C3A3E6	
C3A3F6	Trees
C3A3G6	Trees
C3A3B7	Partial
C3A3C7	
C3A3D7	
C3A3E7	
C3A3F7	Trees
C3A3B8	Partial
C3A3C8	
C3A3D8	
C3A3E8	Trees, Partial
C3A3B9	
C3A3C9	
C3A3D9	
C3A3E9	Trees, Partial
C3A3B0	
C3A3C0	
C3A3D0	
C3A3E0	Partial
C3A4B1	
C3A4C1	
C3A4D1	
C3A4A2	Partial
C3A4B2	
C3A4C2	
C3A4D2	Partial
C3A4A3	Partial
C3A4B3	
C3A4C3	
C3A4D3	Trees, Partial
C3A4A4	
C3A4B4	
C3A4C4	
C3A4A5	
C3A4B5	
C3A4C5	
C3A4A6	
C3A4B6	
C3A4C6	Partial

93 Total

Equipment Nos: _____

Equipment Type: 325 CL

Equipment Hrs: 2168.7



Date: 5/23/07

Location: NOWHERE

Supervisor: Ed

NOT ON SITE



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

DAILY QUALITY CONTROL REPORT

DATE: May 24, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

	Sunny	Clear	Overcast	Rain	Fog
Hi	66		Lo	41	
Still	Moderate	High	WNW@17mph		
Dry	Moderate	High	78%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
4	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	3	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	22
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire, Large excavations filled in with bulldozer, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

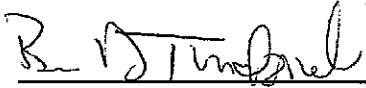
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/24/07, UXOSO FADL 5/24/07, UXO Escort 2007 Burn FADL 5/24/2007, Tailgate safety Meeting dated 05/24/07, JSAs dated 05/24/07 UXO, GEO, and 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/24/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	0
Jeff Steinwand	UXO Tech II	9
Tara Volpe	UXO Tech II	0
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	0
John Sparks	UXO Tech I	10

Today's Activities:
 0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting target investigations. One Tech supporting Timberline.

Summary: UXO Team investigated and cleared 98 target sites.

MEC recovered: One 2.36" rocket
 Seeds found: One blue QC 37mm Projo, and One blue 60mm mortar

1700 - Field crew secured for the day.
 1730 - 1800 - Daily/weekly admin duties were completed.

Note: Tara Volpe on leave thru 28 May. Mark Isabell and Josh Jenkins took an extra home leave day. Jeff Stienwand took 1 hr leave because Timberline shut down early for maintance.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the mid 40's. Afternoon in the high 50's.	None



L6

DAILY LOG	DATE	05	24	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; Heavy equipment MRS-16, Dust 0700 Watched the team check their instruments at the test pit, Set on level 4, 0730 Completed daily reports 0900 MRS-16 QC'ing dig teams results, 1100 TAZ broke in 2007 Burn area, operator acquiring parts for repair. 1330 MRS-16 QC'ing dig teams results, no problems, 1500 QC'd 63 Grid packages 1510 TAZ repaired 1635 MRS 16 secured 1645 QC'd 35 Grid packages 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/24/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0715 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, FUELED TAZ

0740 - TAZ EQUIPMENT SAFETY CHECKOUT COMPLETE, STARTED CUTTING

1000 - TAZ SHUTDOWN, OPERATOR SMELLS SMOKE, TAKES CUTTING HEAD BELT DRIVE COVER OFF TO INVESTIGATE

1030 - NO FIRE PRESENT IN CUTTING HEAD, CLEANED OUT STICKS AND BRUSH INSIDE COVER AND TIGHTENED UP BELT DRIVE, PUT IT BACK TOGETHER AND STARTED CUTTING AGAIN

1040 - TAZ SHUTDOWN, SMOKE COMING OUT OF CUTTING HEAD, TOOK BELT COVER OFF ON CUTTING HEAD

1100 - FOUND CUTTING HEAD DRIVE BELTS SHREDDED, NO FIRE TO REPORT, OREGA CALLED TIMBERLINE OFFICE TO ORDER BELTS

1120 - OPERATOR DEPARTS WORKSITE TO PICK UP NEW BELTS AND OTHER PARTS ORDERED FOR TAZ

1130-1215 LUNCHBREAK

1345 - TAZ OPERATOR BACK ON SITE, REPLACED OLD BELTS ON CUTTING HEAD WITH NEW ONES, TIGHTENED BELT DRIVE AND DOUBLE CHECKED ALL PARTS ON CUTTING HEAD

1500 - CUTTING HEAD BELTS BACK ON AND TESTED, ALL PARTS CHECKED OUT GOOD ON HEAD, OPERATOR SHUTTING DOWN FOR THE DAY TO DECON POISON OAK OILS ENCOUNTERED WHILE WORKING ON CUTTING HEAD, DEPARTED WORKSITE TAZ CUT APPROX. 200FT.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Handwritten Signature]*

DATE: 5/24/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/24/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear,

Other: Sunny warm temps, weekend driving/travel

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua King	
John SPARKS	
VALERIE LANGSTAFF	
Mike Lightner	
John Pastalardo	
CHUCK NYLUM	
John A Kowalski	

Meeting Conducted by:

Supervisor:

Manager:



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/24/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOUILLE	

Meeting Conducted by: JEFF STEINWAND



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/24/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: : Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		Supervisor's Comments
Potential Hazards		Supervisor's Initials
UXO		
Slip; Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/24/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/24/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/24/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manilest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/24/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 5/24/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliet
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

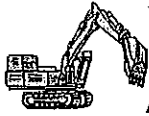
Date: 5/24/07

Equipment Type: 325 cL

Location: NOWHERE RD

Equipment Hrs: 2176

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM *List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet*

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 24, 2007 - 16:29 PDT

Most Recent Observations at May 24, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	57.0° F	66.0 at 11:51	41.0 at 4:51	68.0 at 16:51	41.0 at 4:51
Dew Point	50.2° F	52.1 at 13:51	40.2 at 4:51	52.1 at 13:51	40.2 at 4:51
Relative Humidity	78%	98 at 6:51	49 at 11:51	98 at 6:51	47 at 16:51
Wind Speed	17 mph from WNW	17 at 15:51	1 at 8:51	17 at 15:51	1 at 8:51
Wind Gust	25 mph	25 at 15:51	5 at 2:51	25 at 15:51	5 at 2:51
Pressure	28.88 in	28.94 at 8:51	28.87 at 4:51	28.94 at 8:51	28.87 at 4:51
Sea Level Pressure	29.40 in	29.47 at 8:51	29.39 at 14:51	29.47 at 8:51	29.39 at 14:51
Altimeter	29.40 in	29.46 at 8:51	29.39 at 4:51	29.46 at 8:51	29.39 at 4:51
Solar Radiation	1235.0 W/m ²	1362.0 at 13:51	23.0 at 0:51	1362.0 at 13:51	3.0 at 21:51
Fuel Temperature	63.0° F	73.0 at 11:51	42.0 at 4:51	78.0 at 16:51	42.0 at 4:51
10 hr Fuel Moisture	9 gm	33 at 8:51	9 at 13:51	33 at 8:51	4 at 16:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 4:51	13.00 at 8:51	12.30 at 4:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: May 25, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	------	----------	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	66		Lo	41	
Still	Moderate	High	WNW@15mph		
Dry	Moderate	High	78%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
0	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
1	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
0	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	10
PICK-UP	5	Y	10
PICK-UP	3	GSA	0
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	0
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	10	N	1

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

GEO Reacquire

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

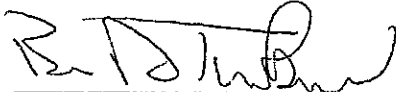
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

Tailgate safety Meeting dated 05/25/07, JSA dated 05/25/07 GEO,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/25/07
DATE



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 05/25/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other: **Maintain communications with main office**

ATTENDEES

NAME PRINTED	SIGNATURE
CHUCK NYLUM	
VALERIE LONGSTAFF	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/25/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/25/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: May 29, 2007

DAY

S	M	I	W	THUR	F	S
---	---	----------	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016 TEMP: H/LCONTRACT NO. DACW05-96-D-0011 WINDPROJECT NO. 846075 HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	58	Lo	45		
Still	Moderate	High	WNW@15mph		
Dry	Moderate	High	69%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equip operator/ Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	2	Timberline	20
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire and fill-in, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

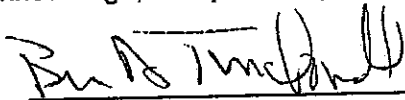
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/29/07, UXOSO FADL 5/29/07, UXO Escort 2007 Burn FADL 5/29/2007, Tailgate safety Meeting dated 05/29/07, JSAs dated 05/29/07 UXO, GEO, and 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/29/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - Two UXO Teams conducting target investigations. One Tech supporting Timberline.

1100 - 1200 Attended weekly scheduling meeting with USACE

Summary: UXO Teams investigated and cleared 182 target sites. Completed 17 grids

UXO recovered: Eight M1A1 Mines
 MEC recovered: Twelve 2.36" rockets, One 57mm AP-T Projectile
 Seeds found: One blue QC 60mm mortar

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note:

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VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: Morning in the high 40's. Afternoon in the high 50's.	IMPORTANT TELEPHONE CALLS: None



L6

DAILY LOG	DATE	05	29	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; first day back from holiday weekend; mind on work 0700 Watched the team check their instruments at the test pit, Set on level 4, 0730 Completed daily reports 0930 2007 Burn area, TAZ broke window on driver's door, repaired with clear palstic 1100 MRS-16 QC'ing dig teams results, 1330 MRS-16 QC'ing dig teams results, no problems, 1500 TM 2 located a 57mm APT, researching publications for briefing and TM LDR's books 1635 MRS 16 secured 1645 QC'd 35 Grid packages 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/29/07

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0710 - ARRIVE WORKSITE, COMPLETED JSA, EQUIPMENT SAFETY CHECKOUT STARTED, MAINTENANCE PERFORMED

0730 - SAFETY CHECKOUT COMPLETED, TAZ OPERATOR SHATTERED CAB DOOR SLIDING GLASS WINDOW WHILE SHUTTING ARMORED DOOR, TIMBERLINE SUPERVISOR LEFT TO PURCHASE PLASTIC TO COVER OPENING ON CAB DOOR

0800 - TIMBERLINE SUPERVISOR RETURNED WITH PLASTIC, OPENING COVERED ON CAB DOOR

0830 - TAZ STARTS CUTTING

1130 - 1215 LUNCHBREAK

1345 - TIMBERLINE SUPERVISOR FUELS UP TAZ, MEASUREMENT TAKEN FROM NOWHERE RD INTO AREA B TO ENSURE 200FT REQUIREMENT IS BEING MET

1405 - TAZ STARTS CUTTING AGAIN

1500 - 1515 AFTERNOON BREAK

1615 - TAZ SHUTS DOWN FOR THE DAY, PERFORMS MAINTENANCE

1630 - DEPART WORKSITE

TAZ CUT APPROX. 350FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:



DATE: 5/29/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/29/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark Isabella</i>
Joshua Jenkins	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
VALERIE LANGSTAFF	<i>[Signature]</i>
Joshua King	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>

USE CONTINUATION PAGE

Meeting Conducted by: *[Signature]*

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/29/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

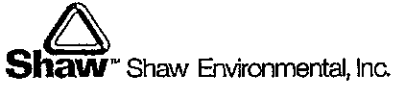
Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
Ed worth	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/29/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures: <div style="font-family: cursive; font-size: 1.2em;"> [Signature 1] [Signature 2] [Signature 3] [Signature 4] [Signature 5] </div>	<div style="font-size: 2em;"> [Signature] </div>	

JOB SAFETY ANALYSIS

Date: 5/29/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects <input checked="" type="checkbox"/></p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p>Reflective vest and hard hats near heavy equipment <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable -Fuels <input checked="" type="checkbox"/></p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination Poison Oak <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input checked="" type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing <input checked="" type="checkbox"/> GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other <input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/29/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name, Signatures:		

JOB SAFETY ANALYSIS

Date: 5/29/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/29/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		<u>Supervisor's Comments</u>
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/29/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____ Cold Work _____ Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/> Entry Permit _____ All Conditions Met _____ Signed Off when Complete _____ Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/> Composition of Gloves <input checked="" type="checkbox"/> Special Purpose Gloves _____ Tyvek Suit _____ Acid Suit/Slicker Suit _____ Rubber boots _____ Mono Goggles (vented-non-vented) _____ Face Shield _____ Respirator _____ Fresh Air _____ Ear Protection <input checked="" type="checkbox"/> Safety Harness _____ Burning Goggles _____ Other _____ Safety vest and Hard hats <input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/> Proper Tools for the Job <input checked="" type="checkbox"/> Good Tool Condition <input checked="" type="checkbox"/> Qualifications _____ Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/> Safety Shower _____ Evacuation Route <input checked="" type="checkbox"/> Other _____</p> <p>ACCESS</p> <p>Scaffold (properly inspected) _____ Ladder (Tied Off) _____ Manlift _____ Personnel Basket (Inspected & Approved) _____ Operator training _____ Special Provisions _____ Other _____</p>	<p>WELDING</p> <p>Flashburns _____ Combustibles _____ Spark Containment <input checked="" type="checkbox"/> Shields _____ Grounding _____ Water Hose _____ Fire extinguisher _____ Fire Blanket _____ Fire Watch _____ Sewer Covers _____ Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____ Signs _____ Hole Cover _____ Handrail _____ Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____ Try Start/Stop Switch _____ GFCI Test _____ Assured Grounding _____ Extension Cord Inspection _____ Other _____</p> <p>LIFTING</p> <p>Forklift _____ Cherry Picker _____ Load Chart _____ Angle _____ Crane _____ Chainfall _____ Proper Rigging Practices _____ Manual Lifting _____ Condition of Equipment _____ Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____ Heat Stress <input checked="" type="checkbox"/> Heavy Objects _____ Hot/Cold Surf or Mat _____ Inadequate Lighting _____ Line Breaking _____ Noise <input checked="" type="checkbox"/> Poor Access/Egress _____ Sharp Objects _____ Other _____ UXO <input checked="" type="checkbox"/></p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____ Flammable _____ Ingestion _____ Inhalation _____ Skin Contamination _____ Other _____</p> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/> Pinch Points _____ Slip-Trip Potential <input checked="" type="checkbox"/> Other _____</p> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____ Type of Work Others Doing _____ Doing _____ PPE Due to Other Work _____ Other _____</p> <p>Confined Space Know the Following: * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: May 29, 2007 - 16:33 PDT

Most Recent Observations at May 29, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	58.0° F	58.0 at 15:51	45.0 at 0:51	60.0 at 17:51	45.0 at 0:51
Dew Point	47.9° F	48.6 at 10:51	43.4 at 0:51	48.6 at 10:51	43.4 at 0:51
Relative Humidity	69%	95 at 1:51	69 at 12:51	95 at 1:51	66 at 16:51
Wind Speed	15 mph from WNW	15 at 15:51	1 at 3:51	15 at 15:51	1 at 22:51
Wind Gust	22 mph	23 at 14:51	4 at 4:51	23 at 14:51	4 at 23:51
Pressure	28.95 in	28.97 at 12:51	28.89 at 3:51	28.97 at 12:51	28.85 at 17:51
Sea Level Pressure	29.47 in	29.49 at 12:51	29.42 at 3:51	29.49 at 12:51	29.36 at 17:51
Altimeter	29.47 in	29.49 at 12:51	29.41 at 3:51	29.49 at 12:51	29.37 at 17:51
Solar Radiation	1049.0 W/m ²	1081.0 at 14:51	5.0 at 4:51	1081.0 at 14:51	3.0 at 21:51
Fuel Temperature	65.0° F	67.0 at 12:51	43.0 at 0:51	69.0 at 16:51	43.0 at 0:51
10 hr Fuel Moisture	11 gm	17 at 7:51	11 at 14:51	17 at 7:51	10 at 17:51
Battery voltage	12.90 volt	13.00 at 9:51	12.30 at 5:51	13.00 at 9:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

Equipment Nos: _____

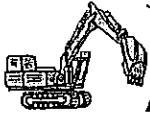
Date: 5/29/07

Equipment Type: 325 CL

Location: NOWHERE & BLUE LINE

Equipment Hrs: 2178.2

Supervisor: Ed



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

DAILY QUALITY CONTROL REPORT

DATE: May 30, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

Sunny		Clear	Overcast	Rain	Fog
Hi	58	Lo	49		
Still	Moderate	High	WSW@7mph		
Dry	Moderate	High	82%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	3	GSA	30
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	30
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire and fill-in, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

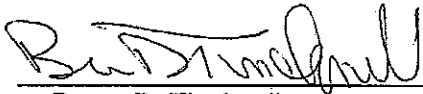
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/30/07, UXOSO FADL 5/30/07, UXO Escort 2007 Burn FADL 5/30/2007, Tailgate safety Meeting dated 05/30/07, JSAs dated 05/30/07 UXO, GEO, and 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/30/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Two UXO Teams conducting target investigations. One Tech supporting Timberline.

Summary: UXO Teams investigated and cleared 203 target sites. Completed 12 grids

UXO recovered: Nineteen M1A1 Mines
 MEC recovered: Two M49 trip flare pellets, One 60mm Projectile from possible M2A4 Anti personnel land mine
 Seeds found: One blue QC MK 2 grenade, One orange QA M26 grenade

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note:

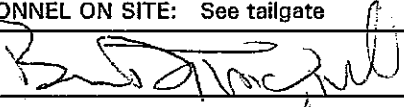
VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the high 40's. Afternoon in the high 50's.	None



L6

DAILY LOG	DATE	05	30	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; New ordnance, 57mm discussed</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Completed daily reports</p> <p>0745 QC'd 182 dig reports</p> <p>0900 Met with representative of AIRGAS, new national contract supplier for H & S supplies</p> <p>1100 MRS-16 QC'ing dig teams results,</p> <p>1300 Attended meeting on Data Base issues/improvements</p> <p>1500 MRS-16 QC'ing dig teams results, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 5/30/07	



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE

0705 - ARRIVE WORKSITE, COMPLETED JSA, EQUIPMENT SAFETY CHECKOUT STARTED, PERFORMED MAINTENANCE

0745 - MEASURED IN TWO SPOTS FROM NOWHERE RD INTO AREA B, BOTH WERE 200FT

0800 - SAFETY CHECKOUT COMPLETED, TAZ STARTS CUTTING

0945 - TAZ STOPS CUTTING, REQUESTED SHAW SAFETY TO COME ON SITE AND POINT OUT CORRECT MEASURING SPOT FOR LAST SECTION OF NOWHERE RD TO BLUE LINE, CUT MARKER SEEMS SHORT

1005 - SHAW SAFETY ON SITE, CORRECT MEASURING SPOT WAS IDENTIFIED AND THE CUT WAS SHORT, TAZ CUT AREA TO CORRECT WIDTH TO FINISH LAST SECTION TO BLUE LINE

1015 - TAZ MOVES UP TO WATKINS GATE RD TO BEGIN CUTTING NORTH SIDE OF AREA A

1045 - TAZ BEGINS CUTTING FROM WATKINS GATE RD INTO AREA A

1130-1215 LUNCHBREAK

1215 - TOOK MEASUREMENT FROM WATKINS GATE RD INTO AREA A TO ENSURE 150FT

REQUIREMENT IS MET, FOUND ONE ~~RIFLE~~ THIRTY ROUND MAGAZINE FULL OF 5.56 SMALL ARMS AMMUNITION, HOLDING TO TURN OVER TO QC AND BE TAKEN TO MRS-16

1425 - TAZ STOPS CUTTING, CUTTING HEAD DRIVE BELT SQUEAKING, REMOVED COVER AND TIGHTENED BELT

1445 - TAZ FINISHED TIGHTENING CUTTING HEAD BELT AND STARTED CUTTING AGAIN

1500-1515 AFTERNOON BREAK

1615-1630 TAZ STOPS CUTTING, FUELED TAZ, DEPARTED WORKSITE TAZ CUT APPROX. 500FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]*

DATE: 5/30/07



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/30/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: 200 ft or TWO grids between teams

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
MARK ISABELL	
Joshua Jenkins	
Mike Lightner	
John SPARRIS	
Joshua King	
VALERIE LANESTAFF	
Shirley Tudor	
Christouymack	

USE CONTINUATION PAGE

Meeting Conducted by: _____

Supervisor: _____

Manager: _____

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/30/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

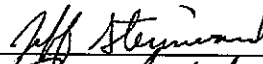
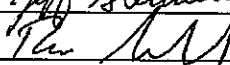
Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/30/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p><input checked="" type="checkbox"/> near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 5/2302007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/30/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
- GEO Teams**
- PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/30/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/30/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____ Cold Work _____ Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/> Entry Permit _____ All Conditions Met _____ Signed Off when Complete _____ Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/> Composition of Gloves <input checked="" type="checkbox"/> Special Purpose Gloves _____ Tyvek Suit _____ Acid Suit/Slicker Suit _____ Rubber boots _____ Mono Goggles (vented-non-vented) _____ Face Shield _____ Respirator _____ Fresh Air _____ Ear Protection <input checked="" type="checkbox"/> Safety Harness _____ Burning Goggles _____ Other _____ Safety vest and Hard hats <input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/> Proper Tools for the Job <input checked="" type="checkbox"/> Good Tool Condition <input checked="" type="checkbox"/> Qualifications _____ Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/> Safety Shower _____ Evacuation Route <input checked="" type="checkbox"/> Other _____</p> <p>ACCESS</p> <p>Scaffold (properly inspected) _____ Ladder (Tied Off) _____ Manlift _____ Personnel Basket (Inspected & Approved) _____ Operator training _____ Special Provisions _____ Other _____</p>	<p>WELDING</p> <p>Flashburns _____ Combustibles _____ Spark Containment <input checked="" type="checkbox"/> Shields _____ Grounding _____ Water Hose _____ Fire extinguisher _____ Fire Blanket _____ Fire Watch _____ Sewer Covers _____ Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____ Signs _____ Hole Cover _____ Handrail _____ Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____ Try Start/Stop Switch _____ GFCI Test _____ Assured Grounding _____ Extension Cord Inspection _____ Other _____</p> <p>LIFTING</p> <p>Forklift _____ Cherry Picker _____ Load Chart _____ Angle _____ Crane _____ Chainfall _____ Proper Rigging Practices _____ Manual Lifting _____ Condition of Equipment _____ Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____ Heat Stress <input checked="" type="checkbox"/> Heavy Objects _____ Hot/Cold Surf or Mat _____ Inadequate Lighting _____ Line Breaking _____ Noise <input checked="" type="checkbox"/> Poor Access/Egress _____ Sharp Objects _____ Other _____ UXO <input checked="" type="checkbox"/></p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____ Flammable _____ Ingestion _____ Inhalation _____ Skin Contamination _____ Other _____</p> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/> Pinch Points _____ Slip-Trip Potential <input checked="" type="checkbox"/> Other _____</p> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____ Type of Work Others Doing _____ Doing _____ PPE Due to Other Work _____ Other _____</p> <p>Confined Space Know the Following: * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325CL

Equipment Hrs: 2185.3



Date: 5/30/07

Location: NOWHERE

Supervisor: Ed

(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

① ADD 1 QT. 15W-40 DELO
12. DOOR GLASS ON INSIDE DOOR BROKE YESTERDAY WHEN INSIDE + OUTSIDE DOORS CAME TOGETHER.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 31, 2007 - 6:25 PDT

Most Recent Observations at May 31, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	49.0° F	52.0 at 2:51	49.0 at 5:51	58.0 at 12:51	49.0 at 5:51
Dew Point	47.6° F	49.6 at 4:51	46.3 at 0:51	49.6 at 4:51	46.0 at 6:51
Relative Humidity	95%	95 at 4:51	84 at 0:51	95 at 4:51	71 at 14:51
Wind Speed	4 mph from WSW	5 at 3:51	3 at 1:51	17 at 14:51	1 at 8:51
Wind Gust	7 mph	9 at 3:51	7 at 5:51	25 at 14:51	6 at 9:51
Pressure	28.98 in	29.01 at 0:51	28.98 at 4:51	29.03 at 10:51	28.98 at 4:51
Sea Level Pressure	29.51 in	29.53 at 0:51	29.50 at 4:51	29.55 at 10:51	29.50 at 4:51
Altimeter	29.50 in	29.53 at 0:51	29.50 at 4:51	29.55 at 10:51	29.50 at 4:51
Solar Radiation	10.0 W/m ² m	10.0 at 5:51	3.0 at 1:51	943.0 at 12:51	3.0 at 23:51
Fuel Temperature	49.0° F	52.0 at 3:51	49.0 at 5:51	65.0 at 12:51	49.0 at 21:51
10 hr Fuel Moisture	19 gm	19 at 5:51	14 at 0:51	19 at 5:51	10 at 15:51
Battery voltage	12.40 volt	12.50 at 0:51	12.40 at 3:51	13.00 at 9:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: May 31, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

Sunny	Clear	Overcast	Rain	Fog
Hi	55	Lo	49	
Still	Moderate	High	W@16mph	
Dry	Moderate	High	90%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	3	GSA	30
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	30
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Reacquire and fill-in, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

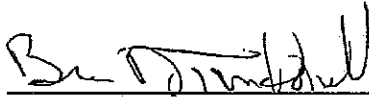
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 5/31/07, UXOSO FADL 5/31/07, UXO Escort 2007 Burn FADL 5/31/2007, Tailgate safety Meeting dated 05/31/07, JSAs dated 05/31/07 UXO, GEO, and 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

05/31/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Teams conducting target investigations. One Tech supporting Timberline.

Summary: UXO Teams investigated and cleared 195 target sites. Completed 6 grids

UXO recovered: Eight M1A1 Mines, One 37 mm LE MK-I

MEC recovered: Seven 2.36" rockets

Seeds found: One blue QC M-8 Smoke grenade

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the high 40's. Afternoon in the high 50's.

None

SIGNATURE: John Tortolano

5/31/2007

page 1 of 1



L6

DAILY LOG	DATE	05	31	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; New ordnance, M2A4 Landmine, (60mm mortar) 0700 Watched the team check their instruments at the test pit, Set on level 4, 0730 Completed daily reports 0745 QC'd 203 dig reports 1000 2007 Burn Area, observing operations, no problems 1100 MRS-16 QC'ing dig teams results, 1500 MRS-16 QC'ing dig teams results, no problems, 1635 MRS 16 secured 1700: COB, no incidents or accidents -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 5/31/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0710 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0745 - SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING FOR THE DAY

1130-1215 LUNCHBREAK

1500-1515 AFTERNOON BREAK

1545 - MEASURED FROM WATKINS GATE RD INTO AREA A TO ENSURE 150FT REQUIREMENT IS MET

1615 - TAZ STOPS CUTTING FOR THE DAY, FUELED TAZ

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 550 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]*

DATE: 5/31/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/31/2007 Time: 06:30 Job Number: 846075

Customer: USAGE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 5/31/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ZSABELL	<i>Mark Zsabell</i>
John Tortolano	<i>[Signature]</i>
Joshua King	<i>[Signature]</i>
VALENE LANGSTAFF	<i>[Signature]</i>
Joshua Jenkins	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
Mike Lightner	<i>[Signature]</i>
Shirley Tudor	<i>S. Tudor</i>

USE CONTINUATION PAGE

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 5/31/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 5/31/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 5/31/2007

Job#: 856075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		
<i>Mark L. [Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 5/31/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p style="text-align: center;">PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p>_____ Hot Work</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p>_____ Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p style="text-align: center;">TOOLS</p> <p>_____ Current Inspection</p> <p>_____ Proper Tools for the Job</p> <p>_____ Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manliest</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p> <hr/>	<p style="text-align: center;">WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p>_____ Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p> <hr/>	<p style="text-align: center;">HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p style="text-align: center;">HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p style="text-align: center;">OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> <u>GEO Teams</u></p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> <u>200 FT BETWEEN TEAMS</u></p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 5/31/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325cL

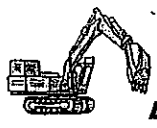
Equipment Hrs: 2191.7



Date: 5/31/07

Location: WATKINS GATE

Supervisor: ED
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: May 31, 2007 - 23:31 GMT

Most Recent Observations at May 31, 2007 - 22:51 GMT

	22:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	55.0° F	58.0 at 21:51	49.0 at 12:51	58.0 at 0:51	49.0 at 12:51
Dew Point	47.6° F	49.6 at 11:51	46.0 at 18:51	49.6 at 11:51	46.0 at 18:51
Relative Humidity	76%	95 at 11:51	72 at 21:51	95 at 11:51	71 at 0:51
Wind Speed	16 mph from W	16 at 22:51	3 at 8:51	16 at 22:51	3 at 8:51
Wind Gust	24 mph	24 at 22:51	7 at 12:51	24 at 22:51	7 at 12:51
Pressure	28.95 in	29.01 at 7:51	28.95 at 21:51	29.02 at 5:51	28.95 at 21:51
Sea Level Pressure	29.47 in	29.53 at 7:51	29.47 at 21:51	29.55 at 5:51	29.47 at 21:51
Altimeter	29.47 in	29.53 at 7:51	29.47 at 21:51	29.54 at 5:51	29.47 at 21:51
Solar Radiation	631.0 W/m*m	851.0 at 20:51	3.0 at 8:51	851.0 at 20:51	3.0 at 6:51
Fuel Temperature	61.0° F	63.0 at 21:51	49.0 at 12:51	63.0 at 0:51	49.0 at 4:51
10 hr Fuel Moisture	12 gm	22 at 14:51	3 at 13:51	22 at 14:51	3 at 13:51
Battery voltage	12.90 volt	13.00 at 17:51	12.30 at 13:51	13.00 at 17:51	12.30 at 13:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: June 1, 2007

S	M	T	W	THUR	F	S
---	---	---	---	------	----------	---

DAY

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L

CONTRACT NO. DACW05-96-D-0011 WIND

PROJECT NO. 846075 HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	56		Lo	49	
Still	Moderate	High	W@12mph		
Dry	Moderate	High	81%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	0
PICK-UP	4	Y	40
PICK-UP	2	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	20
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	6	N	60

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

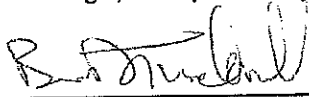
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/01/07, UXOSO FADL 6/01/07, UXO Escort 2007 Burn FADL 6/01/2007, Tailgate safety Meeting dated 06/01/07, JSAs dated 06/01/07 UXO, 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/01/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Teams conducting target investigations. One Tech supporting Timberline.

Summary: UXO Teams investigated and cleared 218 target sites. Completed 10 grids
UXO recovered: Three M1A1 Mines, One 37 mm LE MK I, One M49 Trip flare
MEC recovered: None
Seeds found: Three blue QC seeds 1 ea 37mm projo, 1 ea 60mm mortar, 1ea M125 slap flare

1700 - Field crew secured for the day.
1730 - 1800 - Daily/weekly admin duties were completed.

Note:

VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS	
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS:	
Morning in the high 40's. Afternoon in the mid 50's.		None	



L6

DAILY LOG	DATE	06	1	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0600: Prep for tailgate 0630: Tailgate; 0700 Watched the team check their instruments at the test pit, Set on level 4, 0730 Completed daily reports 0745 QC'd 180 dig reports 1000 2007 Burn Area, observing operations, no problems 1100 MRS-16 QC'ing dig teams results, 1500 MRS-16 QC'ing dig teams results, no problems, 1600 QC'd 38 dig reports 1635 MRS 16 secured 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/01/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAIL GATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0710 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0740 - SAFETY EQUIPMENT CHECKOUT COMPLETE, TAZ STARTS CUTTING

1015 - TAZ SHUTS DOWN TO ~~CLEAN UP~~ FREE UP STUCK TEETH ON CUTTING HEAD

1055 - TAZ STARTS CUTTING AGAIN

1130-1215 LUNCHBREAK

1430 - TAZ STOPPED CUTTING FOR THE DAY, REPLACED INNER AND OUTER ENGINE AIR FILTERS, ATTEMPTED TO REMOVE OUTER CAB FILTER, COULDN'T REMOVE IT BECAUSE CAB ARMOR IS IN THE WAY, BLEW FILTER OUT WITH AIR HOSE, PERFORMED OTHER MAINTENANCE, FUELED TAZ

1500-1515 AFTERNOON BREAK

1615 - COMPLETED MAINTENANCE, DEPARTED WORKSITE

TAZ CUT APPROX. 500 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE: 6/1/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/01/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear.

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	<i>[Signature]</i>
MARK ISABELL	<i>[Signature]</i>
Joshua Jenkins	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
Joshua King	<i>[Signature]</i>
VALENE LANGSTAFF	<i>[Signature]</i>

USE CONTINUATION PAGE

Meeting Conducted by: Ben Dittman

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/01/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

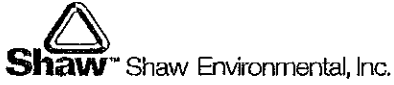
Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/1/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/1/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects <input checked="" type="checkbox"/></p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable -Fuels <input checked="" type="checkbox"/></p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination Poison Oak <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input checked="" type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing <input checked="" type="checkbox"/></p> <p>GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other <input checked="" type="checkbox"/></p> <p>200 FT BETWEEN TEAMS</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

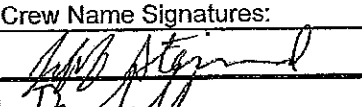
BRUSH Clearing

Date: 6/1/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection		
Crew Name Signatures:		
		

JOB SAFETY ANALYSIS

Date: 6/1/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Stienwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Sticker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 c L

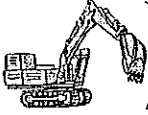
Equipment Hrs: 2199.2



Date: 6/1/07

Location: WATKINS GATE RD.

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

- | | | | | | | | |
|----|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 1 | Check Engine Oil Level And Engine Compartment For Trash, Debris, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Check Hydraulic Oil Level, Cap And Vent. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | Check Transmission Oil Level (Dozers) or Swing Case (Excavators). | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6 | Check For Oil or Coolant Leaks. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____ | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 | Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 | Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 | Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 | Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 | Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 | Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 | Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 | Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 | Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 | Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19 | Verify The Presence Of The Operations / Maintenance Manual. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20 | Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: June 1, 2007 - 16:19 PDT

Most Recent Observations at June 1, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	56.0° F	56.0 at 15:51	49.0 at 6:51	56.0 at 16:51	49.0 at 6:51
Dew Point	50.3° F	50.3 at 15:51	47.3 at 6:51	50.3 at 15:51	47.3 at 6:51
Relative Humidity	81%	94 at 5:51	81 at 15:51	94 at 5:51	78 at 17:51
Wind Speed	12 mph from WNW	12 at 15:51	2 at 7:51	13 at 16:51	2 at 7:51
Wind Gust	17 mph	18 at 13:51	7 at 6:51	21 at 16:51	7 at 6:51
Pressure	28.88 in	28.92 at 0:51	28.88 at 5:51	28.94 at 16:51	28.88 at 5:51
Sea Level Pressure	29.40 in	29.44 at 0:51	29.40 at 15:51	29.46 at 16:51	29.40 at 15:51
Altimeter	29.40 in	29.44 at 0:51	29.40 at 5:51	29.46 at 16:51	29.40 at 5:51
Solar Radiation	594.0 W/m*m	602.0 at 13:51	8.0 at 1:51	602.0 at 13:51	6.0 at 21:51
Fuel Temperature	59.0° F	60.0 at 14:51	49.0 at 5:51	61.0 at 16:51	49.0 at 5:51
10 hr Fuel Moisture	14 gm	17 at 5:51	14 at 14:51	17 at 5:51	12 at 16:51
Battery voltage	12.90 volt	13.00 at 10:51	12.30 at 6:51	13.00 at 10:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: June 4, 2007

DAY

S	M	T	W	THUR	F	S
---	----------	---	---	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

	Sunny	Clear	Overcast	Rain	Fog
Hi	65		Lo	50	
Still	Moderate	High	W@12mph		
Dry	Moderate	High	68%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Re-acquire, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/04/07, UXOSO FADL 6/04/07, UXO Escort 2007 Burn FADL 6/04/2007, Tailgate safety Meeting dated 06/04/07, JSAs dated 06/04/07 UXO, 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/04/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting target investigations. One Tech supporting Timberline.

Summary: UXO Team investigated and cleared 87 target sites. Completed 1 grids

UXO recovered: None
 MEC recovered: None
 Seeds found: One orange QA 3.5" rocket

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None



L6

DAILY LOG	DATE	06	4	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:			
<p>0600: Prep for tailgate</p> <p>0630: Tailgate;</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Completed daily reports</p> <p>0745 QC'd 32 dig reports</p> <p>1000 Reported by dig team of an odor coming from Dig #82 C3A2A5.</p> <p>1015 MRS -16 checked hole with PID, instrument reading 1385 ppm, notified Kevin Siemann and Val Valdez.</p> <p>1500 MRS-16 QC'ing dig teams results, no problems,</p> <p>1600 Assisting with property inventory.</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>Ben Stordewell</i>		DATE: 6/04/07	



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING For 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

- 0630 - TAILGATE SAFETY MEETING
- 0700 - LEAVE FOR WORKSITE
- 0715 - ARRIVED WORKSITE, COMPLETED ISA, PERFORMED EQUIPMENT SAFETY CHECKOUT
- 0730 - COMPLETED SAFETY EQUIPMENT CHECKOUT, TAZ STARTS CUTTING
- 0915 - TAZ STOPPED, COLLECTED CABLE WIRE HE HIT, CHECKED EQUIPMENT
- 0940 - TAZ STARTED CUTTING AGAIN
- 1115 - TAZ STOPPED TO PERFORM MAINTENANCE ON EQUIPMENT
- 1125 - TAZ STARTED CUTTING AGAIN
- 1130 - 1215 - LUNCH BREAK
- 1245 - TAZ STOPPED TO PERFORM MAINTENANCE ON EQUIPMENT
- 1315 - TAZ STARTED CUTTING AGAIN
- 1500 - 1515 - AFTERNOON BREAK
- 1610 - STOPPED CUTTING FOR THE DAY, PERFORMED MAINTENANCE ON EQUIPMENT, END OF DAY CHECKS
- 1625 - DEPART WORKSITE
- TAZ CUT APPROX 500 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Handwritten Signature]*

DATE: 4 JUN 07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/04/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY***

ATTENDEES

NAME PRINTED	SIGNATURE
BOB SCOVILLE	<i>RS</i>

Meeting Conducted by: TARA VOLPE *TJ ERY*

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/04/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

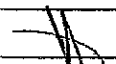

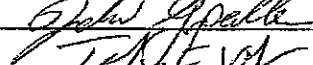

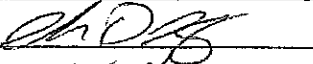


Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

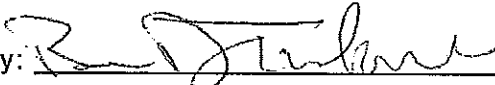
Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
MARK ISABELL	
JOHN SPARKS	
TARA VOLPE	
Joshua Senkins	
Joshua King	
VALENEE LONGSTAFF	

USE CONTINUATION PAGE

Meeting Conducted by: 

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/4/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

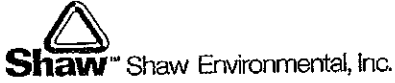
Date: 6/4/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> <u>GEO Teams</u></p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> <u>200 FT BETWEEN TEAMS</u></p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/4/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/4/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/4/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand TARA VOLPE JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/4/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Date: 6/4/07

Equipment Type: 325 CL

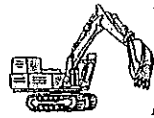
Location: WATKINS HATE RD

Equipment Hrs: 2204.2

Supervisor: Ed



(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: June 4, 2007 - 16:26 PDT

Most Recent Observations at June 4, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	62.0° F	65.0 at 10:51	50.0 at 2:51	65.0 at 10:51	50.0 at 2:51
Dew Point	51.3° F	60.7 at 10:51	49.2 at 2:51	60.7 at 10:51	49.2 at 2:51
Relative Humidity	68%	98 at 4:51	68 at 14:51	98 at 4:51	68 at 14:51
Wind Speed	12 mph from W	15 at 14:51	1 at 10:51	15 at 14:51	1 at 10:51
Wind Gust	21 mph	22 at 14:51	6 at 10:51	22 at 14:51	6 at 10:51
Pressure	28.97 in	29.01 at 7:51	28.94 at 0:51	29.01 at 7:51	28.94 at 23:51
Sea Level Pressure	29.48 in	29.53 at 7:51	29.46 at 0:51	29.53 at 7:51	29.46 at 0:51
Altimeter	29.49 in	29.53 at 7:51	29.46 at 0:51	29.53 at 7:51	29.46 at 23:51
Solar Radiation	879.0 W/m*m	1395.0 at 13:51	21.0 at 0:51	1395.0 at 13:51	3.0 at 21:51
Fuel Temperature	70.0° F	71.0 at 13:51	50.0 at 1:51	71.0 at 13:51	50.0 at 1:51
10 hr Fuel Moisture	15 gm	36 at 9:51	5 at 6:51	36 at 9:51	5 at 6:51
Battery voltage	12.90 volt	12.90 at 9:51	12.40 at 3:51	12.90 at 16:51	12.40 at 3:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: June 5, 2007

DAY

S	M	<u>T</u>	W	THUR	F	S
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USAGE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
HI	61		Lo	53	
Still	Moderate	High	W@19mph		
Dry	Moderate	High	66%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
3	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	30
PICK-UP	6	Y	50
PICK-UP	3	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	5
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO Re-acquire, Phase 2 acquire using towed array, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

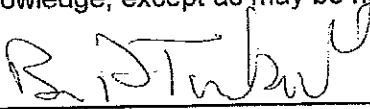
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Phase Two acquire started using towed array, UXO Tm will finish Phase 1 excavations this week, then move to 2007 Burn Area for avoidance sweep.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/05/07, UXOSO FADL 6/05/07, UXO Escort 2007 Burn FADL 6/05/2007, Tailgate safety Meeting dated 06/05/07, JSAs dated 06/05/07 UXO, 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/05/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting target investigations. One Tech supporting Timberline.

Summary: UXO Team investigated and cleared 79 target sites. Completed 2 grids

UXO recovered: None
 MEC recovered: One 2.36" rocket
 Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the Mid 50's. Afternoon in the Low 60's.

None

SIGNATURE: John Tortolano

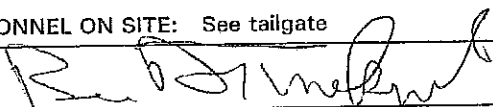
6/5/2007

page 1 of 1



DAILY LOG	DATE	06	5	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate;</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Completed daily reports</p> <p>0800 Phone meeting with Task manager, PM and Mr. Meile, discussed work schedule for June, current plan is to stop intrusive work on MRS-16 on 8 Jun 2007, and have GEO complete Phase 2 operations. . Have a prep meeting for 2007 burn avoidance sweep, and start the sweep 11 June 07.</p> <p>0845 QC'd 87 dig reports</p> <p>0930 2007 Burn area, no problems</p> <p>1300 MRS-16 QC'ing dig teams results, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 6/05/07	



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE

0705 - ARRIVE WORKSITE, COMPLETED JSA, START EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, FUELED TAZ

0735 - TAZ EQUIPMENT SAFETY CHECKOUT COMPLETE, STARTED CUTTING

1130-1215 LUNCHBREAK

1340 - TAZ STOPS CUTTING, TOOK TWD MEASUREMENTS FROM WATKINS GATE RD INTO AREA A TO ENSURE 150FT REQUIREMENT

1400 - TAZ STARTS CUTTING ALONG AUSTIN RD HEADING SOUTH IN AREA A

1500-1515 AFTERNOON BREAK

1615 - TAZ STOPPED CUTTING FOR THE DAY, PERFORMED MAINTENANCE, FUELED TAZ

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 500FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *[Signature]*

DATE: 6/5/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	<i>Mark Isald</i>
VALEIE LANGSTAFF	<i>V Langstaff</i>
Joshua King	<i>John King</i>
JOHN SPARKS	<i>John Sparks</i>
Joshua Senters	<i>Joshua Senters</i>
Mike Lightner	<i>Mike Lightner</i>
CLUCK NYLUM	<i>Cluck Nylum</i>

USE CONTINUATION PAGE

Shirley Tolan

Shirley Tolan

Meeting Conducted by: *Burt Stankel*

Supervisor: _____

Manager: _____



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

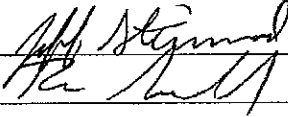
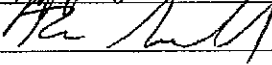
Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY***

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/5/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures: <div style="font-family: cursive; font-size: 1.2em;"> Mod Leahy Valerie Langstaff Rob P... Steve... Ed... Tuf... </div>		

JOB SAFETY ANALYSIS

Date: 6/5/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 6/5/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name/Signatures:		

JOB SAFETY ANALYSIS

Date: 6/52007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliet
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/5/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA						
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No				
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	<table border="1"> <tr> <td>New:</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Revised:</td> <td><input type="checkbox"/></td> </tr> </table>	New:	<input checked="" type="checkbox"/>	Revised:
New:	<input checked="" type="checkbox"/>					
Revised:	<input type="checkbox"/>					
Job Task (What are You Doing)		Audit the Job Audit Time:				
Clearing and Grubbing of vegetative material including poison oak		Supervisor's Comments				
Potential Hazards						
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise		Supervisor's Initials				
Recommended Action or Procedure						
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection						
Crew Name Signatures:						

JOB SAFETY ANALYSIS

Date: 6/5/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: June 6, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016 TEMP: H/LCONTRACT NO. DACW05-96-D-0011 WINDPROJECT NO. 846075 HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	59	Lo	49	
Still	Moderate	High	W@20mph	
Dry	Moderate	High	66%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
2	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	5
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO, Phase 2 acquire using towed array, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

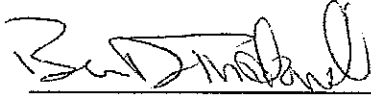
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/06/07, UXOSO FADL 6/06/07, UXO Escort 2007 Burn FADL 6/06/2007, Tailgate safety Meeting dated 06/06/07, JSAs dated 06/06/07 UXO, 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/06/07
DATE



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0655 - DEPART FOR WORKSITE

0715 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0750 - TAZ STARTED CUTTING

0800 - TAZ STOPS CUTTING DUE TO SUSPECT ITEM, FOUND A 75MM GRAPESHOT RND EXPENDED

0815 - TAZ STARTS CUTTING AGAIN

0940 - TAZ STOPS CUTTING TO REPAIR PLASTIC COVERING CAB WINDOW OPENING

0950 - TAZ STARTS CUTTING AGAIN

1015 - CONSTRUCTION SUPPORT ONSITE TO DROP OFF SCRAP BINS FOR VISUAL SWEEP OF FIRE BREAK, AND MOVING TO AREA C NORTH OF BLUE LINE TO REMOVE BARBED WIRE AND METAL DEBRIS SO TAZ CAN CUT AREA, SHAW SAFETY WILL PROVIDE ESCORT

1115 - CONSTRUCTION SUPPORT OFFSITE

1130-1215 LUNCHBREAK

1245 - TOOK MEASUREMENT FROM AUSTIN RD INTO AREA A TO ENSURE 200FT REQUIREMENT

1330 - TAZ ENCOUNTERED ANOTHER 75MM GRAPESHOT RND EXPENDED, ITEM MOVED OUT OF CUTTING PATH

1500-1515 AFTERNOON BREAK, TOOK TWO MEASUREMENTS FROM AUSTIN RD INTO AREA A

1530 - TAZ CALLED TO HAVE ITEM CHECKED OUT, MOVED EXPENDED 75MM GRAPESHOT RND

1615 - TAZ STOPS CUTTING FOR THE DAY, FUELED TAZ

1630 - DEPARTED WORKSITE TAZ CUT APPROX. 350 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *Jeff Stearns*

DATE: 6/6/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting target investigations. One Tech supporting Timberline.

Summary: UXO Team investigated and cleared 133 target sites. Completed 0 grids

UXO recovered: One M-9 rifle grenade fuze and booster
 MEC recovered: None
 Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the Low 50's. Afternoon in the Low 60's.	None



L6

DAILY LOG	DATE	06	6	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0600: Prep for tailgate</p> <p>0630: Tailgate; discussed dusty conditions</p> <p>0700 Watched the team check their instruments at the test pit, Set on level 4,</p> <p>0730 Completed daily reports</p> <p>0845 QC'd 78 dig reports</p> <p>0930 2007 Burn area, no problems</p> <p>1300 MRS-16 QC'ing dig teams results, no problems,</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/06/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/06/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline, sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear.

Other: Very Dusty roads, DRIVE VERY,VERY SLOWLY

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua King	
Mark ISABELL	
JOHN SPARRIS	
Sarah Jenkins	
VALERIE LANGSTAFF	
TARA VOLPE	
Mike Lightner	

USE CONTINUATION PAGE

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/06/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY**

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND

BOB SCOVILLE

Meeting Conducted by: JEFF STEINWAND



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/6/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions/ overhanging tree branches Poison oak UXO Dust Heavy equipment operations Hot dry working conditions Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs Observe walking areas Wear work gloves, observe working/walking conditions Mod "D" PPE, Clean PPE/Work boots with alcohol Positive identification before moving any ordnance items Use of Dust Mask Hard hats and reflective vest when spotting for heavy equipment, Eye contact with Stay hydrated, drink plenty of fluids, wear sunscreen Maintain speed, GO SLOW		
Crew Name Signatures:		

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/6/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <div style="text-align: center; border: 1px solid black; padding: 5px;">MOD "D"</div>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? yes New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		Supervisor's Initials
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name/Signatures:		

JOB SAFETY ANALYSIS

Date: 6/6/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/6/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/6/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 cL

Equipment Hrs: 2219.5

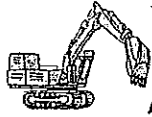


Date: 6/6/07

Location: AUSTIN Rd,

Supervisor: EJ

(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (T&S)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: June 6, 2007 - 16:26 PDT

Most Recent Observations at June 6, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	58.0° F	59.0 at 11:51	49.0 at 4:51	59.0 at 16:51	49.0 at 4:51
Dew Point	47.5° F	49.7 at 1:51	45.6 at 9:51	52.1 at 20:51	45.6 at 9:51
Relative Humidity	68%	93 at 0:51	66 at 14:51	94 at 22:51	66 at 14:51
Wind Speed	18 mph from W	20 at 14:51	8 at 8:51	22 at 17:51	8 at 23:51
Wind Gust	33 mph	34 at 14:51	16 at 8:51	35 at 16:51	16 at 8:51
Pressure	29.00 in	29.01 at 13:51	28.96 at 3:51	29.01 at 13:51	28.94 at 19:51
Sea Level Pressure	29.52 in	29.53 at 13:51	29.48 at 3:51	29.53 at 13:51	29.46 at 19:51
Altimeter	29.52 in	29.53 at 13:51	29.48 at 3:51	29.53 at 13:51	29.46 at 19:51
Solar Radiation	1283.0 W/m ² m	1391.0 at 13:51	0.0 at 0:51	1391.0 at 13:51	0.0 at 22:51
Fuel Temperature	64.0° F	66.0 at 11:51	47.0 at 5:51	67.0 at 16:51	47.0 at 5:51
10 hr Fuel Moisture	12 gm	21 at 2:51	12 at 13:51	21 at 2:51	12 at 13:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 6:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: June 7, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

Sunny		Clear	Overcast	Rain	Fog
Hi	60		Lo	45	
Still	Moderate	High	W@17mph		
Dry	Moderate	High	63%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	40
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	40
Tractor (towed a-ray)	1	Y	10
John Deere 310 Backhoe	1	Y	5
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	10	N	100

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Anomaly excavation MRS-16, GEO, Phase 2 acquire using towed array, Brush cutting 2007 Burn area

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

See QC FADL

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

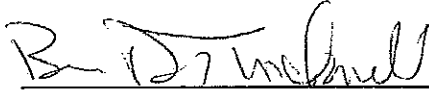
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE. _____

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/07/07, UXOSO FADL 6/07/07, UXO Escort 2007 Burn FADL 6/07/2007, Tailgate safety Meeting dated 06/07/07, JSAs dated 06/07/07 UXO, 2007 Burn area, equipment inspection (Timberline), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/07/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Two UXO Teams conducting target investigations. One Tech supporting Timberline.

Summary: UXO Team investigated and cleared 176 target sites. Completed 4 grids

UXO recovered: One M-9 rifle grenade fuze and booster, One M-49 trip flare

MEC recovered: Nine 2.36" rockets

Seeds found: One blue 37mm projo

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the mid 40's. Afternoon in the high 50's.

None

SIGNATURE: John Tortolano

6/7/2007

page 1 of 1



DAILY LOG	DATE	06	7	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; Conducted by SUXOS</p> <p>0830 Arrived on site, personnel business</p> <p>0845 Completed daily reports</p> <p>0930 QC'd 139 dig reports</p> <p>1030 2007 Burn area, no problems</p> <p>1400 MRS-16 QC'ing dig teams results, Team was digging C3A2A3 #23 and located what appears to be an old latrine. I was checking the excavation and discovered "transit" tiles in the excavation. These tiles appear to be broken up in to several pieces. I told the TM not to excavate the dig any longer because of it being and old latrine and the broken tiles.</p> <p>1435 Notified Kevin Siemann, MRS-16 Task manager of the situation. He said that we would mention it to the PM at the 1600 phone call today.</p> <p>1455 Notified Ft Ord Site Safety Officer, Val Valdez of the issues at MRS-16.</p> <p>1600 Conference call with PM, Kevin and Jack. Discussed work progress and the tiles at MRS-16.</p> <p>1635 MRS 16 secured</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/07/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 BURN AREA

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE

0705 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0745 - TAZ STARTS CUTTING

0830 - MEASURED FROM AUSTIN RD INTO AREA A, 200FT REQUIREMENT WAS GOOD

1130-1215 LUNCBREAK

1500-1515 AFTERNOON BREAK

1530 - TAZ STOPS CUTTING DUE TO SUSPECT ITEM, FOUND 75MM GRAPESHOT RND EXPENDED, MOVED OUT OF CUTTING PATH

1540 - TAZ CUTTING AGAIN

1600 - TAZ STOPS CUTTING FOR THE DAY, PERFORMS MAINTENANCE, FUELS TAZ

1620 - DEPARTED WORKSITE

TAZ CUT APPROX. 400 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

[Handwritten Signature]

DATE:

6/7/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/07/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY; Rattle Snake Spotted in Area***

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>[Signature]</i>

Meeting Conducted by: JEFF STEINWAND



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/072007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Very Dusty roads, DRIVE VERY, VERY SLOWLY

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolero	
Mark ISABELL	
Joshua King	
VALERIE LONGSTAFF	
Joshua Jenkins	
John SPARKS	
Mike Lightner	

USE CONTINUATION PAGE

Meeting Conducted by: Jack

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/6/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/7/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/7/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/7/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/6/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/7/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL

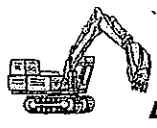
Equipment Hrs: 2227.3



Date: 6/7/07

Location: AUSTIN RD

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: June 7, 2007 - 16:20 PDT

Most Recent Observations at June 7, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	57.0° F	60.0 at 10:51	45.0 at 5:51	60.0 at 10:51	45.0 at 5:51
Dew Point	47.7° F	49.6 at 14:51	41.4 at 5:51	49.6 at 14:51	41.4 at 5:51
Relative Humidity	71%	92 at 0:51	63 at 10:51	92 at 0:51	63 at 10:51
Wind Speed	17 mph from W	17 at 12:51	4 at 6:51	21 at 17:51	4 at 6:51
Wind Gust	25 mph	25 at 15:51	6 at 7:51	32 at 17:51	6 at 7:51
Pressure	28.94 in	28.98 at 0:51	28.94 at 14:51	29.00 at 22:51	28.94 at 14:51
Sea Level Pressure	29.46 in	29.51 at 2:51	29.46 at 14:51	29.53 at 22:51	29.46 at 14:51
Altimeter	29.46 in	29.50 at 0:51	29.46 at 14:51	29.52 at 22:51	29.46 at 14:51
Solar Radiation	1251.0 W/m ²	1385.0 at 13:51	0.0 at 1:51	1385.0 at 13:51	0.0 at 21:51
Fuel Temperature	65.0° F	67.0 at 10:51	41.0 at 6:51	67.0 at 10:51	41.0 at 6:51
10 hr Fuel Moisture	10 gm	16 at 2:51	10 at 13:51	16 at 2:51	10 at 18:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 5:51	13.00 at 8:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: June 11, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	59	Lo	44	
Still	Moderate	High	W@16mph	
Dry	Moderate	High	66%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
2	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	10
PICK-UP	5	Y	50
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	10
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	6
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	5	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Surface Sweep 2007 Burn Fire Break, Brush cutting with TAZ 2007 Fire Break, GEO, Phase 2 acquire using towed array.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Preparatory Meeting 2007 Burn Fire Break Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

TAZ stopped cutting 1415 hrs in afternoon due to a bearing issue on the cutter head, operator departed to purchase parts a repair in AM tomorrow.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/11/07, UXOSO FADL 6/11/07, UXO escort for brush cutting FADL dtd 6/11/07, Tailgate safety Meeting dated 06/11/07, (Surface Sweep, Geo, and Brush cutting) JSAs dated 06/11/07, (Surface Sweep, Geo, and Brush cutting), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/11/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - 2007 Burn Area Fire Breaks 846075
Field Activity: UXO Avoidance Sweep and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	2
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	3
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - Conducted Preparatory meeting with USACE, BRAC, Shaw personnel
0800 - One team conducting surface UXO avoidance sweep, One UXO tech supporting Timberline

Summary: UXO Team cleared Approximately 2000 feet.

UXO recovered: None
MEC recovered: None
Seeds found: None reported
MD Scrap recovered: 43 Lbs

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: Josh & Tara Left work sick.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the high 50's.	None



L6

DAILY LOG	DATE	06	11	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed GEO working alone at MRS-16, UXO at 2007 Burn Area</p> <p>0700 Attended Prep meeting for 2007 Burn Surface sweep of the fire break</p> <p>0745 Completed daily reports</p> <p>0730 QC'd 131 dig report</p> <p>1000 2007 burn area, observing operations, water truck unable to water Austin Rd due to steep hills and large ruts in road, UXO TM stated dust is not a problem today as the wind is from the West and blowing the dust away from the work site.</p> <p>1245 MRS-16, checked on GEO TM, they have completed their work at the site for today. Will secure site upon leaving, in approximately 15 min.</p> <p>1300 MRS 16 secured MRS - 16 secured.</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/11/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 - TAILGATE SAFETY MEETING

0655 - DEPART FOR WORKSITE

0715 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, ~~STARTED~~ PERFORMED MAINTENANCE, TIGHTENED COUPLER ON CUTTING HEAD

0815 - SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING

1130-1215 LUNCHBREAK

1245 - FIRE DEPARTMENT ON SITE FOR AREA B MOISTURE SAMPLING

1415 - TAZ STOPS CUTTING FOR THE DAY, STARTED REPLACING PULLEY SHAFT BEARING ON CUTTING HEAD

1500-1515 AFTERNOON BREAK

1545 - CLEANED UP TOOLS AND WORK AREA

1600 - DEPARTED WORKSITE FOR THE DAY, OPERATOR HAD TO GO AND PURCHASE PARTS BEFORE PUTTING NEW BEARING ON

TAZ CUT APPROX. 300 FT

VISITORS ON SITE: FIRE DEPARTMENT: CHRIS, CHIEF RIZZO, MIKE

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/11/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: 2007 Burn Fire Break

Type of Work: Surface Removal of MD, MEC, and other scrap material

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches, Flying debris form TAZ

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear.

Other: **Snakes have been spotted in area**

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
John Sparks	
Joshua Jenkins	
Valerie Longstaff	
Joshua King	
MARK ISABELL	
TARA VOPE	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear.

Other: **Maintain communications with main office**

ATTENDEES

NAME PRINTED	SIGNATURE
CHUCK MICUM Mike Lightner	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

L1

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted beach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY; Rattle Snake Spotted in Area**

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND

BOB SCOVILLE



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/11/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

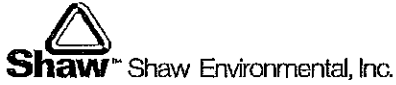
Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves _____</p> <p><input checked="" type="checkbox"/> Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p><input checked="" type="checkbox"/> Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats _____</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection _____</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job _____</p> <p><input checked="" type="checkbox"/> Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p><input checked="" type="checkbox"/> Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential _____</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Surface Sweep 2007 Burn Area

Date: 6/11/2007
 Job#: 846075
 Permit#: _____
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): 2007 Burn Area, Former Ft Ord, CA		
Required PPE: <p style="text-align: center; font-weight: bold;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Nowhere and Austin Road	JSA Prepared by: Bruce Tincknell Are other crews in area? Yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:	<i>T. J. Ery</i>	

JOB SAFETY ANALYSIS

Date: 6/11/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls <input checked="" type="checkbox"/></p> <p>Reflective vest near heavy equipment <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>TAZ 400 FT exclusion zone <input checked="" type="checkbox"/></p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>		<p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 6/11/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/11/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

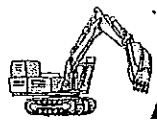
- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Equipment Nos: _____
 Equipment Type: 325 ch
 Equipment Hrs: 2234

Date: 6/11/07
 Location: AUSTIN RD.
 Supervisor: Ed
 (NOT ON SITE)



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOUILLIE (TES) EMPLOYEE NUMBER: _____

Weather Conditions for RTGC1

Current time: June 12, 2007 - 13:51 GMT

Most Recent Observations at June 12, 2007 - 12:51 GMT

	12:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	46.0° F	47.0 at 8:51	44.0 at 11:51	59.0 at 17:51	44.0 at 11:51
Dew Point	44.6° F	44.8 at 8:51	42.4 at 11:51	49.6 at 17:51	42.4 at 11:51
Relative Humidity	95%	95 at 12:51	90 at 7:51	95 at 12:51	64 at 0:51
Wind Speed	9 mph from S	11 at 8:51	9 at 11:51	21 at 21:51	6 at 17:51
Wind Gust	12 mph	16 at 7:51	12 at 12:51	32 at 22:51	12 at 12:51
Pressure	28.90 in	28.91 at 7:51	28.88 at 9:51	28.91 at 7:51	28.79 at 13:51
Sea Level Pressure	29.43 in	29.44 at 7:51	29.41 at 10:51	29.44 at 7:51	29.31 at 13:51
Altimeter	29.42 in	29.43 at 7:51	29.40 at 9:51	29.43 at 7:51	29.31 at 13:51
Solar Radiation	10.0 W/m ²	10.0 at 12:51	1.0 at 7:51	1364.0 at 20:51	0.0 at 4:51
Fuel Temperature	45.0° F	46.0 at 8:51	43.0 at 11:51	67.0 at 19:51	43.0 at 11:51
10 hr Fuel Moisture	18 gm	18 at 11:51	15 at 7:51	18 at 11:51	10 at 0:51
Battery voltage	12.30 volt	12.50 at 7:51	12.30 at 12:51	13.00 at 15:51	12.30 at 13:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DATE: June 12, 2007

S	M	I	W	THUR	F	S
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DAY

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

Sunny	Clear	Overcast	Rain	Fog
Hi	66	Lo	45	
Still	Moderate	High	NE@6mph	
Dry	Moderate	High	53%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	10
PICK-UP	5	Y	50
PICK-UP	1	GSA	5
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	20
Tractor (towed a-ray)	1	Y	6
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	5	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Surface Sweep 2007 Burn Fire Break, Brush cutting with TAZ 2007 Fire Break, GEO, Phase 2 acquire/fill in

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

Mr. King, UXO Tech II reported that he had re-injured a pre-existing condition on his right knee. He was seen at the VA clinic at Ft Ord and taken to VA Clinic Pala Alto, CA for further evaluation. See UXOSO FADL for details.

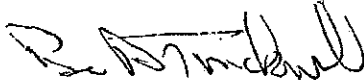
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

TAZ did not operate today due to a bearing issue on the cutter head, operator/company purchased wrong repair parts. New parts due in on Wed am.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/12/07, UXOSO FADL 6/12/07, UXO escort for brush cutting FADL dtd 6/12/07, Tailgate safety Meeting dated 06/12/07, (Surface Sweep, Geo, and Brush cutting) JSAs dated 06/12/07, (Surface Sweep, Geo, and Brush cutting), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/12/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - 2007 Burn Area Fire Breaks	846075
Field Activity: UXO Avoidance Sweep and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	7.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	5
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	7
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One team conducting surface UXO avoidance sweep, One UXO tech supporting Timberline

1100 -1200 - Attended weekly scheduling meeting with USACE

Summary: UXO Team cleared Approximately 2200 feet.

UXO recovered: None
 MEC recovered: None
 Seeds found: None reported
 MD Scrap recovered: 7 Lbs

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note: Josh & Jeff Left work sick.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the Mid 60's.	None



DAILY LOG	DATE	06	12	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed GEO working alone at MRS-16, UXO at 2007 Burn Area</p> <p>0700 Completed daily reports</p> <p>0930 2007 burn area, observing operations, TAZ still broken, operator in Salinas purchasing parts</p> <p>1000 2007 Sweep area, observing sweep team.</p> <p>1030 Josh King informed me that he has aggravated his right knee. This is a pre-existing condition from his military career. He asked to be taken to the VA clinic on site. Shaw Safety Officer on site, informed Val Valdez of our actions.</p> <p>1100 Arrived VA Clinic, Mr. King checking in</p> <p>1130 Mr. King was given a phone number to call to make an appointment, we returned to site office.</p> <p>1145 TAZ down for the day, wrong parts were purchased, will not be fixed until tomorrow am.</p> <p>1200 Arrived site office, notified Kevin Siemann of the situation, Val Valdez called the project CIH. Fred Malakar, he said that Mr. King could proceed through the VA or he could go to the SHAW doctors. MR. King has decided to try the VA route at this time.</p> <p>1400 Departed for the VA clinic at Palo Alto, CA with Mr. King</p> <p>1700 Mr. King seen by doctors, x-rays taken, he has been placed on light duty, and will have to return to this clinic for an MRI that they are trying to schedule. Mr. King was given a narcotic prescription for pain. I informed Mr. King he could not work if he was taken this medication; he said he would not take it during work hours, as the doctor had also given him non-narcotic medication to take during the day. SUXOS informed of all of this.</p> <p>1900 Returned to Marina, CA, dropped of Mr. King at his hotel and instructed him to call me if his knee got any worse over the evening.</p> <p>1910 Telephoned Mr. Mathisen, UXO Resource Manager, informed him of the situation with Mr. King. He follows up tomorrow.</p> <p style="text-align:center">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>Ben Stumvoll</i>	DATE: 6/12/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE, FUELED GSA VEHICLE

0710 - ARRIVED WORKSITE, COMPLETED JSA, CONTINUED TO WORK ON REPLACING BEARING ON CUTTING HEAD

0800 - OPERATOR DEPARTS SITE TO PICK UP ANOTHER PART

1020 - OPERATOR BACK ON SITE, DOESN'T HAVE THE CORRECT PART, PERFORMED MAINTENANCE AND LEFT FOR THE DAY, THE PART WILL BE IN TOMORROW MORNING

1130 - 1215 LUNCH BREAK, DEPARTED WORKSITE FOR THE DAY

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/12/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/12/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: 2007 Burn Fire Break

Type of Work: Surface Removal of MD, MEC, and other scrap material

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches, Flying debris form TAZ

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other: Snakes have been spotted in area, Dusty and ruff roads, Drive VERY Slowly

ATTENDEES

NAME PRINTED	SIGNATURE
Mark Isabella	<i>Mark Isabella</i>
JOHN SPARKS	<i>John Sparks</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
Joshua King	<i>Joshua King</i>
VALERIE LONGSTAFF	<i>Valerie Longstaff</i>
TARA VOLPE	<i>Tara Volpe</i>
John Tatalano	<i>John Tatalano</i>

Meeting Conducted by: Burt Stimpert

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/12/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY; Rattle Snake Spotted in Area***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOVILLE	<i>Bob Scoville</i>



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/12/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other: **Maintain communications with main office, very dust conditions**

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner CHUCK NICKER	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/12/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: : Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? No
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		Supervisor's Comments
Potential Hazards		Supervisor's Initials
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 6/12/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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Weather Conditions for RTGC1

Current time: June 13, 2007 - 6:14 PDT

Most Recent Observations at June 13, 2007 - 5:51 PDT

	5:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	51.0° F	52.0 at 3:51	48.0 at 2:51	66.0 at 10:51	45.0 at 6:51
Dew Point	44.7° F	46.8 at 1:51	44.7 at 5:51	51.7 at 10:51	43.9 at 6:51
Relative Humidity	79%	92 at 1:51	79 at 5:51	96 at 6:51	56 at 9:51
Wind Speed	162 mph from NE	162 at 5:51	3 at 3:51	162 at 5:51	1 at 8:51
Wind Gust	8 mph	8 at 4:51	7 at 2:51	23 at 18:51	5 at 8:51
Pressure	28.92 in	28.95 at 0:51	28.92 at 5:51	28.96 at 12:51	28.91 at 6:51
Sea Level Pressure	29.44 in	29.48 at 0:51	29.44 at 5:51	29.48 at 0:51	29.44 at 19:51
Altimeter	29.44 in	29.47 at 0:51	29.44 at 5:51	29.48 at 12:51	29.43 at 6:51
Solar Radiation	4.0 W/m*m	6.0 at 2:51	3.0 at 0:51	1380.0 at 13:51	2.0 at 21:51
Fuel Temperature	51.0° F	51.0 at 5:51	46.0 at 2:51	79.0 at 11:51	43.0 at 6:51
10 hr Fuel Moisture	14 gm	15 at 2:51	13 at 0:51	19 at 6:51	7 at 18:51
Battery voltage	12.30 volt	12.50 at 0:51	12.30 at 5:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 6/12/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/12/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - Doing
 - PPE Due to Other Work
 - TAZ 400 FT exclusion zone

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

JOB SAFETY ANALYSIS

Date: 6/12/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
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 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
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- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
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 - Poor Access/Egress
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- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
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 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
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- OTHER WORK IN AREA**
- Others Working Overhead
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 - TAZ 400 FT exclusion zone

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: June 13, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	----------	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L

CONTRACT NO. DACW05-96-D-0011 WIND

PROJECT NO. 846075 HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	79		Lo	48	
Still	Moderate	High	W@6mph		
Dry	Moderate	High	33%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
2	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	5
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	1	Y	0
EM-61 MK 2 A	1	SHAW	0
EM-61 MK 2 A	4	N	10
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	5	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Surface Sweep 2007 Burn Fire Break, Brush cutting with TAZ 2007 Fire Break, GEO, Phase 2 acquire/fill in

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

Conducted Initial Phase Inspection 2007 Burn Area Surface Sweep

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

NONE

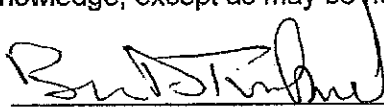
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

Repair parts for TAZ did not arrive until 1030, repairs completed 1130, started cutting

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

Initial Phase inspection 2007 Burn, FADL SUXOS, dtd 6/13/07, UXOSO FADL 6/13/07, UXO escort for brush cutting FADL dtd 6/13/07, Tailgate safety Meeting dated 06/13/07, (Surface Sweep, Geo, and Brush cutting) JSAs dated 06/13/07, (Surface Sweep, Geo, and Brush cutting), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/13/07
DATE

Form QC-4

INITIAL PHASE INSPECTION CHECK LIST

TERC II - K.3

Contract No.: DACW 05-96-D-0011
Task Order No. 016
Fort Ord, California

Date: 6/13/2007

Title and No. of Technical Section: Preliminary Draft
WP, MRS-BLM Burn Units 1 - 5, Munitions an
Explosives of Concern , Former Fort Ord, CA June
2007, Rev C

Field Work Variance TII-022, dtd 06/08/2007

Description and Location of Work Inspected:

Surface Sweep, 2007 Burn Fire Break, Nowhere Rd. Former
FT Ord, CA

Reference Contract Drawings:

A. Key Personnel Present:

	<u>Name</u>	<u>Position</u>	<u>Company</u>
1)	Jack Tortolano	Lead UXO	Shaw
2)	Mark Isabell	UXO Tech III	Shaw
3)	Clinton Huckins	OE Safety Specialist	USACE
4)	Bruce Tincknell	UXOQC/SO	Shaw

B. Materials being used are in strict compliance with the contract plans and specifications: Yes X__ No __

If not, explain: _____

C. Procedures and/or work methods witnessed are in strict compliance with the contract specifications: Yes X__ No __

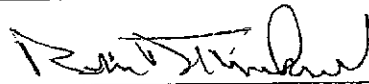
If not, explain: _____

D. Workmanship is acceptable: Yes X__ No __

State where improvement is needed: _____

E. Workmanship is free of safety violations: Yes X__ No __

If no, corrective action taken: _____



Contractor Quality Control Representative



FIELD WORK VARIANCE

Project Name/Number Fort Ord / 846075 CTO/WAD CTO 16 / WAD 06
Applicable Document: Preliminary Draft Work Plan, MRS-BLM Burn Units 1-5 Munitions and Explosives of Concern Removal, Former Fort Ord, California, June 2007, Revision C
Date: 06/08/07

Problem Description:

Original scope allowed for completion of entire surface removal following conduct of prescribed burn. Surface removal over fuel break portion of the site prior to prescribed burn is required to allow safe access by firefighters during prescribed burn activities. Total fuel break area is approximately 56 acres.

Recommended solution:

Implement surface removal in Fuel Breaks surrounding MRS-BLM Burn Units 1 and 2 prior to prescribed burn to allow safe access by POMFD firefighters.

Impact on present and completed work:

N/A

Requested by: Kevin Siemann

Recommended revisions to the plan:

UXO personnel will conduct a surface removal over approximately 56 acres prior to conduct of prescribed burn. Preliminary Draft Site Specific Health and Safety Plan will be implemented to ensure actions conducted on-site are safe. Procedures for the surface removal established in the Final Work Plan, Time Critical Removal Action and Ordnance and Explosives Reconnaissance, Eucalyptus Fire Area, Former Fort Ord, CA, October, 2003 will be implemented with the exception of referencing the surface removal to the existing 100ft by 100ft grids in the Fort Ord GIS.

Clarification Minor Change Major Change

Affects Budget Yes No X
Affects Schedule Yes X No

Signature Date 6/8/07
Technical Reviewer

Shaw Approvals:
Signature Date 6/8/07 Signature _____ Date _____
UXOS Project Manager
Signature Date 6/08/07
UXOQCS

USACE Approval: If Major Change:
Signature Date 6/11/07 Signature _____ Date _____
OE Safety Specialist USACE COR or TM



L6

DAILY LOG	DATE	06	13	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed GEO working alone at MRS-16, UXO at 2007 Burn Area</p> <p>0700 Completed daily reports</p> <p>0900 2007 burn area, observing operations, TAZ still not operatin</p> <p>1000 Escorted towed array from MRS-16 to field office.</p> <p>1030 Timberline operator on site with parts, starting repair.</p> <p>1130 Repairs completed, TAZ started cutting.</p> <p>1245 MRS-16, checked on GEO TM, they have completed their work at the site for today. Will secure site upon leaving, in approximately 15 min.</p> <p>1300 MRS 16 secured MRS – 16 secured.</p> <p>1500 2007 Burn area, observing operations, no problems</p> <p>1545 1 connex moved from MRS-16 to new ESL</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/13/07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING
 0650 - DEPARTED FOR WORKSITE
 0715 - ARRIVED WORKSITE, COMPLETED JSA, WAITED FOR OPERATOR TO COME ON SITE WITH NEW BEARING FOR TAZ CUTTING HEAD, DID TURN OVER WITH JOSH KING
 0805 - JOSH KING TAKING OVER AS TIMBERLINE ESCORT, TURN OVER COMPLETE
 1035 - Started to fix TAZ / started safety checklist
 1130 - 1215 - Lunch Break
 1205 - TAZ shutdown to tighten down bearing
 1320 - TAZ back operating - brush clearing
 1500 - 1515 - Took Afternoon Break
 1520 - 1545 TAZ shutdown
 1615 - STOPPED cutting for the day, fueled equipment, performance checks
 1630 - Departed worksite

cut 200ft

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

Josh King

SIGNATURE:

DATE: 6/13/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - 2007 Burn Area Fire Breaks	846075
Field Activity: UXO Avoidance Sweep and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One team conducting surface UXO avoidance sweep, One UXO tech supporting Timberline

Summary: UXO Team cleared Approximately 2500 feet.

UXO recovered: None

MEC recovered: None

Seeds found: None reported

MD Scrap recovered: 14 Lbs

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the Mid 70's.	None

SIGNATURE: John Tortolano

6/13/2007

page 1 of 1



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/13/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison, OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment, EM-61 Gear,

Other: **Maintain communications with main office, very dust conditions**

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner CHUCK WYUM	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/13/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: 2007 Burn Fire Break

Type of Work: Surface Removal of MD, MEC, and other scrap material

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches, Flying debris form TAZ

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other: Pre-existing medical conditions

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	
Joshua Jenkins	
JOHN SPARKS	
Joshua D King	
VALERIE LONGSTAFF	
TARA VOLPE	
John Tortolano	

Meeting Conducted by: Burt Stimpert

Supervisor:

Manager:



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/13/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Chuck Nycum JSA Prepared by: B. Tincknell Are other crews in area? yes New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/13/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
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 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Surface Sweep 2007 Burn Area

Date: 6/13/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): 2007 Burn Area, Former Ft Ord, CA		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Nowhere and Austin Road	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? Yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 6/13/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
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- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
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 - Rubber boots
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 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
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 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
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- LIFTING**
- Forklift
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 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - TAZ 400 FT exclusion zone

Confined Space Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/13/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand/Josh King JSA Prepared by: B. Tincknell Are other crews in area? Yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/13/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand/Josh King

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

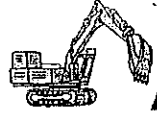
Date: 6/13/07

Equipment Type: 325 c2

Location: AUSTIN Rd,

Equipment Hrs: 2239.7

Supervisor: Ed.
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

#8 LOST PUMP SHAFT ~~BEARING~~ BEARING @ 2:15 ON 6/11/07
BACK TOGETHER @ 12:00 PM ON 6/13/07

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: June 13, 2007 - 15:59 PDT

Most Recent Observations at June 13, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	73.0° F	79.0 at 12:51	48.0 at 2:51	79.0 at 12:51	48.0 at 2:51
Dew Point	49.8° F	51.2 at 12:51	42.2 at 9:51	51.2 at 12:51	42.2 at 9:51
Relative Humidity	44%	92 at 1:51	33 at 9:51	92 at 1:51	33 at 9:51
Wind Speed	12 mph from W	162 at 5:51	2 at 8:51	162 at 5:51	2 at 8:51
Wind Gust	18 mph	18 at 14:51	6 at 7:51	23 at 18:51	6 at 7:51
Pressure	28.91 in	28.95 at 0:51	28.91 at 15:51	28.95 at 16:51	28.91 at 15:51
Sea Level Pressure	29.41 in	29.48 at 0:51	29.41 at 15:51	29.48 at 0:51	29.41 at 15:51
Altimeter	29.43 in	29.47 at 0:51	29.43 at 15:51	29.47 at 16:51	29.43 at 15:51
Solar Radiation	1250.0 W/m ²	1385.0 at 13:51	3.0 at 0:51	1385.0 at 13:51	2.0 at 21:51
Fuel Temperature	78.0° F	92.0 at 12:51	46.0 at 2:51	92.0 at 12:51	46.0 at 2:51
10 hr Fuel Moisture	5 gm	15 at 2:51	5 at 13:51	15 at 2:51	5 at 13:51
Battery voltage	12.80 volt	12.90 at 8:51	12.30 at 5:51	12.90 at 16:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: June 14, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	84		Lo	49	
	Still	Moderate	High	W@8mph	
	Dry	Moderate	High	32%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
3	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	5	Y	50
PICK-UP	1	GSA	5
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	4	N	0
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	5	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Surface Sweep 2007 Burn Fire Break, Brush cutting with TAZ 2007 Fire Break,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

NONE

10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/14/07, UXOSO FADL 6/14/07, UXO escort for brush cutting FADL dtd 6/14/07, Tailgate safety Meeting dated 06/14/07, (Surface Sweep, and Brush cutting) JSAs dated 06/14/07, (Surface Sweep, and Brush cutting), FT Ord Weather report

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/14/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - 2007 Burn Area Fire Breaks	846075
Field Activity: UXO Avoidance Sweep and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	0
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One team conducting surface UXO avoidance sweep, One UXO tech supporting Timberline

Summary: UXO Team cleared Approximately 2400 feet.

UXO recovered: None

MEC recovered: None

Seeds found: None reported

MD Scrap recovered: 5 Lbs

1700 - Field crew secured for the day.

1730 - 1800 - Daily/weekly admin duties were completed.

Note:

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the low 50's. Afternoon in the Mid 70's.

None

SIGNATURE: John Tortolano

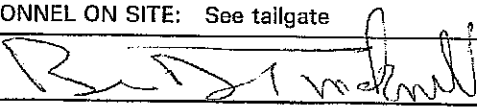
6/14/2007

page 1 of 1



DAILY LOG	DATE	06	14	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed GEO working alone at MRS-16, UXO at 2007 Burn Area</p> <p>0700 Completed daily reports</p> <p>0900 2007 burn area, observing operations</p> <p>1130 2007 Burn area, observing operations, no problems</p> <p>1500 2007 Burn area, observing operations, no problems</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 6/14/07	



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPARTED FOR WORKSITE

0705 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, TOOK TWO MEASUREMENTS FROM AUSTIN RD INTO AREA A TO ENSURE 200FT REQUIREMENT IS BEING MET

0815 - SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING

0935 - TAZ STOPS CUTTING TO FREE UP CUTTING TEETH THAT WERE STOCK

1005 - TAZ STARTS CUTTING AGAIN

1130-1215 LUNCHBREAK

1500-1515 AFTERNOON BREAK

1520 - MEASURED FROM AUSTIN RD INTO AREA A IN TWO SPOTS TO ENSURE 200FT. REQUIREMENT IS MET

1615 - TAZ STOPS CUTTING FOR THE DAY

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 400FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

Jeff Starned

DATE:

6/14/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/14/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: 2007 Burn Fire Break

Type of Work: Surface Removal of MD, MEC, and other scrap material

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches, Flying debris form TAZ

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
Mark ISABell	
Joshua Jenkins	
JOHN SPARKS	
VALERIE LANGSTAFF	
TARA VOLPE	

Meeting Conducted by:

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/14/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/14/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand/Josh King JSA Prepared by: B. Tincknell Are other crews in area? Yes New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak _____ _____ _____ _____		Supervisor's Comments _____ _____
Potential Hazards		
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Snakes		Supervisor's Initials _____ _____
Recommended Action or Procedure		
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/14/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

Surface Sweep 2007 Burn Area

Date: 6/14/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): 2007 Burn Area, Former Ft Ord, CA		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Nowhere and Austin Road	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? Yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/14/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - TAZ 400 FT exclusion zone

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL

Equipment Hrs: 2244.1

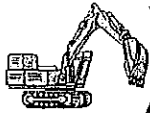


Date: 6-14-07

Location: AUSTIN RD

Supervisor: Ed

(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

Weather Conditions for RTGC1

Current time: June 14, 2007 - 16:16 PDT

Most Recent Observations at June 14, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	70.0° F	84.0 at 10:51	49.0 at 2:51	84.0 at 10:51	49.0 at 2:51
Dew Point	50.5° F	53.5 at 13:51	47.2 at 6:51	53.5 at 13:51	47.2 at 6:51
Relative Humidity	50%	95 at 3:51	32 at 10:51	95 at 3:51	32 at 10:51
Wind Speed	12 mph from W	185 at 5:51	1 at 3:51	185 at 5:51	1 at 3:51
Wind Gust	19 mph	19 at 13:51	4 at 4:51	22 at 20:51	4 at 4:51
Pressure	28.78 in	28.85 at 0:51	28.78 at 12:51	28.90 at 16:51	28.78 at 12:51
Sea Level Pressure	29.29 in	29.37 at 0:51	29.28 at 12:51	29.41 at 16:51	29.28 at 12:51
Altimeter	29.30 in	29.37 at 0:51	29.30 at 12:51	29.42 at 16:51	29.30 at 12:51
Solar Radiation	1244.0 W/m*m	1369.0 at 13:51	6.0 at 0:51	1369.0 at 13:51	2.0 at 21:51
Fuel Temperature	76.0° F	93.0 at 11:51	47.0 at 3:51	93.0 at 11:51	47.0 at 3:51
10 hr Fuel Moisture	4 gm	16 at 5:51	4 at 12:51	16 at 5:51	4 at 16:51
Battery voltage	12.90 volt	12.90 at 8:51	12.30 at 3:51	12.90 at 17:51	12.30 at 3:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORT

DAY

DATE: June 18, 2007

S	M	T	W	THUR	F	S
---	----------	---	---	------	---	---

USACE UXO SAFETY Clinton Huckins
 PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L
 CONTRACT NO. DACW05-96-D-0011 WIND
 PROJECT NO. 846075 HUMIDITY

Sunny		Clear	Overcast	Rain	Fog
Hi	66	Lo	49		
Still	Moderate	High	NW@8mph		
Dry	Moderate	High	58%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
1	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	2	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	0
EM-61 MK 2 A	4	N	10
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Surface Sweep 2007 Burn Fire Break, Brush cutting with TAZ 2007 Fire Break, GEO Reacquire MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

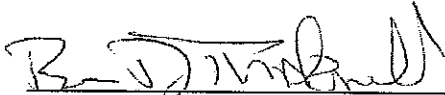
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/18/07, UXOSO FADL 6/18/07, UXO escort for brush cutting FADL dtd 6/18/07, Tailgate safety Meeting dated 06/18/07, (Surface Sweep, GEO, and Brush cutting) JSAs dated 06/18/07, (Surface Sweep, GEO and Brush cutting), Equipment inspection Timeline

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/18/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - 2007 Burn Area Fire Breaks	846075
Field Activity: UXO Avoidance Sweep and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One team conducting surface UXO avoidance sweep, One UXO tech supporting Timberline, One Tech supporting GEO for reaquire, One Tech escorting fence work for new ESL.

Summary: UXO Team cleared Approximately 2000 feet.

UXO recovered: None

MEC recovered: None

Seeds found: None reported

MD Scrap recovered: 16 Lbs

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the low 50's. Afternoon in the Mid 60's.

None

SIGNATURE: John Tortolano

6/18/2007

page 1 of 1



DAILY LOG	DATE	06	18	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed GEO working alone at MRS-16, UXO at 2007 Burn Area</p> <p>0700 Completed daily reports</p> <p>0745 Attended Prep meeting ESL for fence crew. Decision was made to supply UXO support to fence crew while digging post holes.</p> <p>0830 Josh King will escort fence crew at new ESL.</p> <p>0900 2007 burn area, observing operations</p> <p>1130 2007 Burn area, observing operations, no problems</p> <p>1500 2007 Burn area, observing operations, no problems</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/18/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE

0720 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, FUELED TAZ

0900 - TAZ STARTS CUTTING

1130-1215 LUNCH BREAK

1500-1515 AFTERNOON BREAK

1615 - TAZ STOPS CUTTING FOR THE DAY, PERFORMED MAINTENANCE

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 350 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/18/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other: **Maintain communications with main office, very dust conditions**

ATTENDEES

NAME PRINTED	SIGNATURE
CHUCK NYCUM Vincent Chubb	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/18/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: 2007 Burn Fire Break

Type of Work: Surface Removal of MD, MEC, and other scrap material

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches, Flying debris form TAZ

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , GPS Equipment. EM-61 Gear,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
Mark ISABELL	<i>[Signature]</i>
John SPARKS	<i>[Signature]</i>
Joshua Jenkins	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
VALENE LANGSTAFF	<i>[Signature]</i>
Joshua King	<i>[Signature]</i>
John Catalano	<i>[Signature]</i>

Meeting Conducted by: *[Signature]*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

Surface Sweep 2007 Burn Area

Date: 6/18/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): 2007 Burn Area, Former Ft Ord, CA							
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? Yes 400 Ft from TAZ					
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Nowhere and Austin Road	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">New:</td> <td style="width:15%; text-align: center;">X</td> <td style="width:70%;"></td> </tr> <tr> <td>Revised:</td> <td></td> <td></td> </tr> </table>	New:	X		Revised:	
New:	X						
Revised:							
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)							
Job Task (What are You Doing)		Audit the Job Audit Time:					
OE Surface Clearance Operations							
Potential Hazards		Supervisor's Comments					
Lifting							
Slip, Trip, and Falls							
Cuts and abrasions							
Poison oak							
UXO							
Dust							
Recommended Action or Procedure		Supervisor's Initials					
Observe walking areas							
Proper lifting technique, weight limit of 60 lbs							
Wear work gloves							
Mod "D" PPE							
Positive ID of MEC before movement							
Use of Dust Mask							
Water intake, stay hydrated							
Crew Name Signatures:							

JOB SAFETY ANALYSIS

Date: 6/18/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

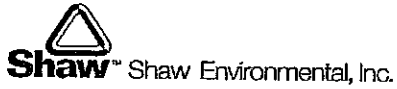
- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - TAZ 400 FT exclusion zone

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/18/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Chuck Nycum
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Operating towed array		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Hard hat and reflective vest required near tractor		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/18/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/14/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	
	Supervisor of Work: Josh King JSA Prepared by: B. Tincknell Are other crews in area? Yes	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Snakes		Supervisor's Initials
Recommended Action or Procedure		
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/18/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Josh King

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Skin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Weather Conditions for RTGC1

Current time: June 18, 2007 - 16:06 PDT

Most Recent Observations at June 18, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	65.0° F	66.0 at 14:51	49.0 at 4:51	66.0 at 14:51	49.0 at 4:51
Dew Point	49.9° F	51.1 at 10:51	47.6 at 4:51	51.1 at 10:51	47.6 at 4:51
Relative Humidity	58%	96 at 5:51	58 at 14:51	96 at 5:51	58 at 14:51
Wind Speed	8 mph from NW	11 at 0:51	1 at 9:51	14 at 16:51	1 at 9:51
Wind Gust	13 mph	18 at 2:51	5 at 9:51	20 at 16:51	5 at 9:51
Pressure	28.81 in	28.82 at 0:51	28.79 at 3:51	28.85 at 16:51	28.79 at 3:51
Sea Level Pressure	29.32 in	29.34 at 0:51	29.31 at 3:51	29.36 at 16:51	29.31 at 3:51
Altimeter	29.33 in	29.34 at 0:51	29.31 at 3:51	29.37 at 16:51	29.31 at 3:51
Solar Radiation	1248.0 W/m*m	1379.0 at 13:51	12.0 at 0:51	1379.0 at 13:51	0.0 at 21:51
Fuel Temperature	77.0° F	77.0 at 13:51	49.0 at 0:51	77.0 at 13:51	49.0 at 0:51
10 hr Fuel Moisture	9 gm	16 at 1:51	9 at 14:51	16 at 1:51	9 at 16:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 6:51	13.00 at 8:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

DAILY QUALITY CONTROL REPORTDATE: June 19, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

Sunny	Clear	Overcast	Rain	Fog
Hi	69	Lo	51	
Still	Moderate	High	NNW@7mph	
Dry	Moderate	High	53%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	15
PICK-UP	4	Y	40
PICK-UP	1	GSA	5
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	3
EM-61 MK 2 A	4	N	15
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Surface Sweep 2007 Burn Fire Break, Brush cutting with TAZ 2007 Fire Break, GEO Reacquire MRS-16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/19/07, UXOSO FADL 6/19/07, UXO escort for brush cutting FADL dtd 6/19/07, Tailgate safety Meeting dated 06/19/07, (Surface Sweep, GEO, and Brush cutting) JSAs dated 06/19/07, (Surface Sweep, GEO and Brush cutting), Equipment inspection Timberline

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/19/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	0
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting target investigations. One Tech supporting GEO, One Tech supporting Timberline, One Tech supporting ESL operation.

Summary: UXO Team investigated and cleared 135 target sites. Completed 4 grids

UXO recovered: None
 MEC recovered: Ten 2.36" rockets, Four M-9 Rifle Grenades.
 Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note: Mark took personal day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None

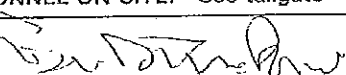
SIGNATURE: John Tortolano

6/19/2007



DAILY LOG	DATE	06	19	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed memo from Monterey landfill what can be thrown away and what is not acceptable. UXO at 2007 Burn Area.</p> <p>0700 Completed daily reports</p> <p>0745 UXO support to fence crew while digging post holes at new ESL</p> <p>0900 2007 burn area, observing operations.</p> <p>1230 UXO Support completed at ESL site.</p> <p>1030 MRS-16 observing operations, no problems</p> <p>1400 2007 Burn area, observing operations, no problems</p> <p>1500 MRS-16 observing operations, no problems</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 6/19/07	



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0715 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, FUELED TAZ, REPLACED CAB DOOR SLIDING WINDOW

0910 - TAZ STARTED CUTTING, SAFETY CHECKOUT COMPLETE

1030 - TAZ STOPS CUTTING DUE TO A SUSPECT ITEM, FOUND .75MM GRAPESHOT ROUND EXPENDED, MOVED OUT OF TAZ'S WAY

1130 - 1215 LUNCH BREAK

1400 - TAZ STOPS TO FREE UP STUCK CUTTING TEETH ON HEAD

1430 - TAZ STARTS CUTTING AGAIN

1500 - 1515 AFTERNOON BREAK

1615 - TAZ STOPS CUTTING FOR THE DAY

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 200 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/19/07

Weather Conditions for RTGC1

Current time: June 19, 2007 - 16:43 PDT

Most Recent Observations at June 19, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	68.0° F	69.0 at 14:51	51.0 at 1:51	69.0 at 14:51	51.0 at 22:51
Dew Point	51.2° F	52.3 at 8:51	49.6 at 1:51	52.4 at 16:51	49.2 at 21:51
Relative Humidity	55%	96 at 2:51	53 at 14:51	96 at 2:51	53 at 14:51
Wind Speed	7 mph from NNW	7 at 0:51	1 at 6:51	9 at 16:51	1 at 6:51
Wind Gust	14 mph	17 at 13:51	4 at 7:51	19 at 16:51	4 at 7:51
Pressure	28.92 in	28.95 at 12:51	28.86 at 0:51	28.95 at 12:51	28.80 at 18:51
Sea Level Pressure	29.43 in	29.46 at 12:51	29.38 at 4:51	29.46 at 12:51	29.31 at 18:51
Altimeter	29.44 in	29.47 at 12:51	29.38 at 0:51	29.47 at 12:51	29.32 at 18:51
Solar Radiation	1261.0 W/m ² in	1381.0 at 13:51	9.0 at 0:51	1381.0 at 13:51	3.0 at 21:51
Fuel Temperature	79.0° F	79.0 at 15:51	51.0 at 1:51	79.0 at 15:51	51.0 at 1:51
10 hr Fuel Moisture	9 gm	16 at 3:51	9 at 15:51	16 at 3:51	7 at 17:51
Battery voltage	12.80 volt	13.00 at 10:51	12.30 at 5:51	13.00 at 10:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"

JOB SAFETY ANALYSIS

Date: 6/19/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Josh King

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work: Sharpening of blades/welding
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Safety vest and Hard hats

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manlift
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/19/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Josh King JSA Prepared by: B. Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/19/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrall
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

GEO Physics

Date: 6/19/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Chuck Nycum
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/19/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear,

Other: Dump List of Prohibited Items

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
JOHN SPITARS	
Sasha Jenkins	
Joshua King	
VALERIE LANGSTAFF	
TARA VOLPE	

USE CONTINUATION PAGE

Meeting Conducted by:

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/19/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted beach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; Armored Doors are HEAVY; VERY DUSTY ROADS - DRIVE VERY, VERY SLOWLY**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND

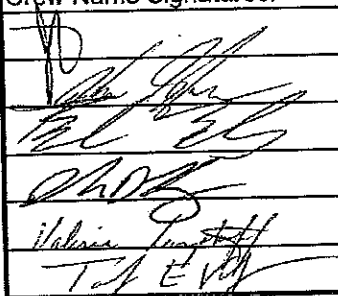
Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/19/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: John Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: _____ Revised: X
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		<u>Supervisor's Comments</u>
Lifting Slip, Trip, and Falls Cuts and abrasions/ overhanging tree branches Poison oak UXO Dust Heavy equipment operations Hot dry working conditions Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Proper lifting technique, weight limit of 60 lbs Observe walking areas Wear work gloves, observe working/walking conditions Mod "D" PPE, Clean PPE/Work boots with alcohol Positive identification before moving any ordnance items Use of Dust Mask Hard hats and reflective vest when spotting for heavy equipment, Eye contact with Stay hydrated, drink plenty of fluids, wear sunscreen Maintain speed, GO SLOW		
Crew Name Signatures: 		

JOB SAFETY ANALYSIS

Date: 6/19/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL

Equipment Hrs: 2259.9

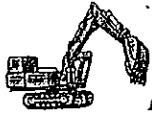


Date: 6/19/07

Location: AUSTIN RD

Supervisor: Ed

(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

#12 INSTALLED NEW DOOR GLASS

EMPLOYEE NAME: BOB SCOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

DAILY QUALITY CONTROL REPORT

DATE: June 20, 2007

DAY

S	M	T	<u>W</u>	THUR	F	S
---	---	---	-----------------	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

	Sunny	<u>Clear</u>	Overcast	Rain	Fog
HI	<u>63</u>		Lo	<u>53</u>	
<u>Still</u>	Moderate	High	<u>WNW@15mph</u>		
Dry	<u>Moderate</u>	High	<u>64%</u>		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
1	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	15
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	10
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

DGM Anomaly removal MRS-16, Brush cutting with TAZ 2007 Fire Break,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

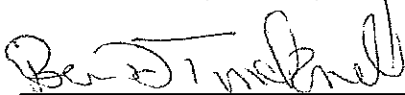
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/20/07, UXOSO FADL 6/20/07, UXO escort for brush cutting FADL dtd 6/20/07, Tailgate safety Meeting dated 06/20/07, (Anomaly removal and Brush cutting) JSAs dated 06/20/07, (Anomaly removal and Brush cutting), Equipment inspection Timberline

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/20/07

DATE



DAILY LOG	DATE	06	20	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; discussed FT Ord Safety Council meeting today,</p> <p>0700 Completed daily reports</p> <p>1030 MRS-16 observing operations, no problems</p> <p>1200 – 1300 Ft Ord Safety Council meeting</p> <p>1400 2007 Burn area, observing operations, no problems</p> <p>1500 MRS-16 observing operations, no problems</p> <p>1600 TAZ wrapped wire around cutting head,</p> <p>1630 TAZ will need assistance to remove wire, cutting torch will be used tomorrow. Hot work permit requested from POM Fire Dept.</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>Butterfield</i>		DATE: 6/20/07	

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. **846075**
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations. One Tech supporting Timberline.
1000-1100 Attended weekly scheduling meeting with USACE.
1200-1300 Team attended Shaw's monthly safety council meeting

Summary: UXO Team investigated and cleared 127 target sites. Completed 4 grids

UXO recovered: None
MEC recovered: Six 2.36" rockets
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING
 0700 - DEPART FOR WORKSITE
 0720 - ARRIVED WORKSITE, COMPLETED JSA, PERFORMED MAINTENANCE, STARTED EQUIPMENT
~~0830 - SAFETY CHECKOUT~~
 0830 - SAFETY CHECKOUT COMPLETE, TAZ STARTED CUTTING
 1130 - 1215 LUNCHBREAK
 1420 - TAZ STOPS DUE TO A SUSPECT ITEM, FOUND 75MM GRAPESHOT ROUND EXPENDED,
 MOVED OUT OF CUTTING PATH
 1430 - TAZ STARTED CUTTING AGAIN
 1500 - 1515 AFTERNOON BREAK
 1600 - TAZ STOPS CUTTING, GOT WIRE WRAPPED UP IN CUTTING HEADS DRUM, WORKED ON
 CUTTING IT OUT
 1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 250 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/20/07

Weather Conditions for RTGC1

Current time: June 20, 2007 - 16:24 PDT

Most Recent Observations at June 20, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	63.0° F	63.0 at 15:51	53.0 at 0:51	69.0 at 17:51	51.0 at 23:51
Dew Point	51.5° F	51.5 at 15:51	47.3 at 7:51	52.8 at 20:51	47.3 at 7:51
Relative Humidity	66%	94 at 0:51	64 at 11:51	94 at 0:51	54 at 17:51
Wind Speed	15 mph from WNW	15 at 15:51	1 at 3:51	15 at 15:51	1 at 3:51
Wind Gust	22 mph	22 at 14:51	4 at 5:51	22 at 14:51	4 at 5:51
Pressure	29.06 in	29.07 at 13:51	28.99 at 0:51	29.07 at 13:51	28.92 at 17:51
Sea Level Pressure	29.57 in	29.58 at 13:51	29.51 at 0:51	29.58 at 13:51	29.43 at 17:51
Altimeter	29.58 in	29.59 at 13:51	29.51 at 0:51	29.59 at 13:51	29.44 at 17:51
Solar Radiation	1259.0 W/m ² m	1382.0 at 13:51	4.0 at 4:51	1382.0 at 13:51	3.0 at 21:51
Fuel Temperature	70.0° F	71.0 at 12:51	52.0 at 0:51	83.0 at 16:51	51.0 at 22:51
10 hr Fuel Moisture	8 gm	14 at 0:51	8 at 13:51	14 at 23:51	6 at 18:51
Battery voltage	12.90 volt	12.90 at 9:51	12.30 at 4:51	12.90 at 9:51	12.30 at 4:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/20/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted beach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; WARM SUNNY WEATHER - STAY HYDRATED***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCVILLE	

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



Shaw Environmental, Inc.

L1

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/20/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline, sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment, EM-61 Gear,

Other: Dump List of Prohibited Items

ATTENDEES

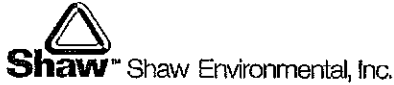
NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark Isbell</i>
MALEICIE LANGSTAFF	<i>Valerie Langstaff</i>
John Testalano	<i>John Testalano</i>
Joshua King	<i>Joshua King</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
JOHN SPADAKS	<i>John Spadaks</i>
TARA VOLPE	<i>Tara Volpe</i>

USE CONTINUATION PAGE

Meeting Conducted by: *Rob Stinson*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/20/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: John Tortolano JSA Prepared by: B. Tincknell Are other crews in area? YES New: _____ Revised: X
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:	<i>T. J. E. V.</i>	
<i>Mal I. Smith</i>		
<i>Victoria Langhoff</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

JOB SAFETY ANALYSIS

Date: 6/20/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <hr/> <p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input checked="" type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manliest _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p> <hr/>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other Cold stress _____</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/20/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	
	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/20/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>_____ Required</p> <p>_____ Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>_____ Entry Permit</p> <p>_____ All Conditions Met</p> <p>_____ Signed Off when Complete</p> <p>_____ Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p>_____ Special Purpose Gloves</p> <p>_____ Tyvek Suit</p> <p>_____ Acid Suit/Slicker Suit</p> <p>_____ Rubber boots</p> <p>_____ Mono Goggles (vented-non-vented)</p> <p>_____ Face Shield</p> <p>_____ Respirator</p> <p>_____ Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p>_____ Safety Harness</p> <p>_____ Burning Goggles</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p>_____ Qualifications</p> <p>_____ Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p>_____ Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p>_____ Other</p> <hr/> <p>ACCESS</p> <p>_____ Scaffold (properly inspected)</p> <p>_____ Ladder (Tied Off)</p> <p>_____ Manlift</p> <p>_____ Personnel Basket (Inspected & Approved)</p> <p>_____ Operator training</p> <p>_____ Special Provisions</p> <p>_____ Other</p>	<p>WELDING</p> <p>_____ Flashburns</p> <p>_____ Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>_____ Shields</p> <p>_____ Grounding</p> <p>_____ Water Hose</p> <p>_____ Fire extinguisher</p> <p>_____ Fire Blanket</p> <p>_____ Fire Watch</p> <p>_____ Sewer Covers</p> <p>_____ Other</p> <hr/> <p>OVERHEAD WORK</p> <p>_____ Barricades</p> <p>_____ Signs</p> <p>_____ Hole Cover</p> <p>_____ Handrail</p> <p>_____ Other</p> <hr/> <p>ELECTRICAL</p> <p>_____ Locked and Tagged Out</p> <p>_____ Try Start/Stop Switch</p> <p>_____ GFCI Test</p> <p>_____ Assured Grounding</p> <p>_____ Extension Cord Inspection</p> <p>_____ Other</p> <hr/> <p>LIFTING</p> <p>_____ Forklift</p> <p>_____ Cherry Picker</p> <p>_____ Load Chart</p> <p>_____ Angle</p> <p>_____ Crane</p> <p>_____ Chainfall</p> <p>_____ Proper Rigging Practices</p> <p>_____ Manual Lifting</p> <p>_____ Condition of Equipment</p> <p>_____ Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>_____ Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p>_____ Heavy Objects</p> <p>_____ Hot/Cold Surf or Mat</p> <p>_____ Inadequate Lighting</p> <p>_____ Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p>_____ Poor Access/Egress</p> <p>_____ Sharp Objects</p> <p>_____ Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>_____ Chemical Burn Shin/Eyes</p> <p>_____ Flammable</p> <p>_____ Ingestion</p> <p>_____ Inhalation</p> <p>_____ Skin Contamination</p> <p>_____ Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p>_____ Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p>_____ Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead</p> <p>_____ Type of Work Others Doing</p> <p>_____ PPE Due to Other Work</p> <p>_____ Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: June 21, 2007

S	M	T	W	THUR	F	S
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DAY

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

	Sunny	Clear	Overcast	Rain	Fog
Hi	63		Lo	53	
Still	Moderate		High	WNW@17mph	
Dry	Moderate		High	67%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	15
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	10
Tractor (towed a-ray)	1	Y	0
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

DGM Anomaly reacquire MRS-16, Surface sweep 2007 Burn Fire Break, and Brush cutting with TAZ 2007 Fire Break,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

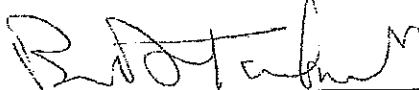
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/21/07, UXOSO FADL 6/21/07, UXO escort for brush cutting FADL dtd 6/21/07, Tailgate safety Meeting dated 06/21/07, (GEO re-acquire, Surface Sweep, and Brush cutting) JSAs dated 06/21/07, (Anomaly removal, GEO re-acquire and Brush cutting), Equipment inspection Timberline, Hot Work permits for TAZ at 2007 Fire Break.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/21/07

DATE



L6

DAILY LOG	DATE	06	21	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; completion of 2007 Burn and site clean up</p> <p>0700 Completed daily reports</p> <p>0900 QC'd 268 DGM digs from MRS-16</p> <p>1100 2007 Burn area, observing operations, no problems</p> <p>1300 TAZ moved to Gate 25, to cut along Blue Line in Area 1</p> <p>1630 2007 Burn Sweep completed</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 6/21/07

DATE	6/21/2007
NO.	6
SHEET	1 of 1

F1

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - 2007 Burn Area Fire Breaks	846075
Field Activity: UXO Avoidance Sweep and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One team conducting surface UXO avoidance sweep, One UXO tech supporting Timberline

1600 - 1700 Attended cost and scheduling meeting with USACE and BRAC

Summary: UXO Team cleared Approximately 1500 feet. Avoidance sweep of 2007 burn area complete.

UXO recovered: None

MEC recovered: None

Seeds found: None reported

MD Scrap recovered: 22 Lbs

1700 - Field crew secured for the day.

1730 - 1800 - Daily/Weekly admin duties were completed.

Note:

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Morning in the low 50's. Afternoon in the Mid 60's.

None



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE WITH WATER TRUCK AND CONSTRUCTION SUPPORT AND A CUTTING TORCH

0720 - ARRIVED WORKSITE, WET DOWN AREA THAT HOTWORK WILL BE PERFORMED, COMPLETED USA

0735 - STARTED HOTWORK TO REMOVE BARBED WIRE WRAPPED AROUND CUTTING HEAD DRUM ON TAZ, HOTWORK PERMITS ON HAND, FIRE EXTINGUISHERS ON STANDBY

0830 - HOTWORK COMPLETE, AREA CLEAR AND NO FIRES TO REPORT, WATER TRUCK AND CONSTRUCTION SUPPORT DEPART SITE, STARTED EQUIPMENT SAFETY CHECKOUT

0850 - EQUIPMENT SAFETY CHECKOUT COMPLETE, TAZ STARTED CUTTING, TOOK TWO MEASUREMENTS FROM AUSTIN RD INTO AREA A TO ENSURE 200FT REQUIREMENT IS MET

1030 - TAZ COMPLETES CUT ON EAST SIDE OF AREA A DOWN TO NOWHERE RD, TOOK TWO MEASUREMENTS FROM AUSTIN RD INTO AREA A, 200FT REQUIREMENT MET, TAZ MOVES TO WATKINS GATE RD TO WAIT FOR TRANSPORT TO GATE 25 TO FINISH CUT SOUTH OF BLUE LINE NEAR AREA C

1130-1215 LUNCH BREAK, TRANSPORT ON SITE, LOADED TAZ AND MOVED TO RANGE 25 GATE

1310 - DOWNLOADED TAZ AND MOVED UP TO CUT AREA SOUTH OF BLUE LINE, TRANSPORT OFFSITE OPERATOR PERFORMS FULL MAINTENANCE ON TAZ, NEEDS TO REPLACE ANOTHER BEARING ON CUTTING HEAD, VIBRATION IS TOO BAD TO CUT UNTIL REPLACED, FUELED TAZ

1500-1515 AFTERNOON BREAK, FINISHED MAINTENANCE

1525 - DEPARTED WORKSITE, OPERATOR WENT TO PICK UP PART

TAZ CUT APPROX. 100 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/21/07



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/21/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted beach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; WARM SUNNY WEATHER - STAY HYDRATED***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	<i>Jeff Steinwand</i>
BOB SCOURLE	<i>Bob Scourle</i>
MIRIK BOOSE	<i>Mirik Boose</i>
JOHN A KANDLER	<i>John A Kandler</i>

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/21/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: 2007 Burn Fire Break

Type of Work: Surface Removal of MD, MEC, and other scrap material

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO;

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches, Flying debris form TAZ

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers,

Other:

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	
VALERIE LANGSTAFF	
Joshua Sealans	
JOHN SPARKS	
John Tortalano	
Joshua King	
TARA VOLPE	
Shirley Tudor	

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/21/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: GEO Fill-in and reacquire

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, GPS Equipment. EM-61 Gear,

Other: **Maintain communications with main office, Warm and sunny conditions**

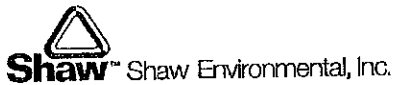
ATTENDEES

NAME PRINTED	SIGNATURE
CHUCK NEUM	<i>ck n</i>

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

Surface Sweep 2007 Burn Area

Date: 6/21/2007
 Job#: 846075
 Permit#: _____
 Issued By: B.Tincknell

Location of Job (Unit/Location on Project): 2007 Burn Area, Former Ft Ord, CA		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Nowhere and Austin Road	Supervisor of Work: John Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? Yes 400 Ft from TAZ
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
OE Surface Clearance Operations		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Poison oak		
UXO		
Dust		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Positive ID of MEC before movement		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 6/21/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN John Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - TAZ 400 FT exclusion zone

Confined Space
Know the Following:
 * Possible hazards within the confined space
 * First signs of exposure
 * How to summons help
 * How to track personnel
 * Entering and exiting the confined space
 * Maintain contact with all entrants by voice or visual
 * Do not attempt to rescue unless you are a part of a coordinated effort
 * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

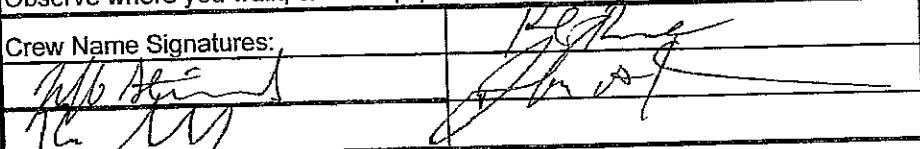
BRUSH Clearing

Date: 6/21/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	
	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing) Clearing and Grubbing of vegetative material including poison oak		Audit the Job Audit Time:
Potential Hazards UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		Supervisor's Comments
Recommended Action or Procedure Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		Supervisor's Initials
Crew Name Signatures: 		

JOB SAFETY ANALYSIS

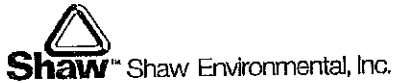
Date: 6/21/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____ Cold Work _____</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p>Entry Permit _____ All Conditions Met _____ Signed Off when Complete _____ Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves <input checked="" type="checkbox"/> Composition of Gloves Special Purpose Gloves _____ Tyvek Suit _____ Acid Suit/Slicker Suit _____ Rubber boots _____ Mono Goggles (vented-non-vented) _____ Face Shield _____ Respirator _____ Fresh Air _____ <input checked="" type="checkbox"/> Ear Protection Safety Harness _____ Burning Goggles _____ Other _____ <input checked="" type="checkbox"/> Safety vest and Hard hats</p> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection <input checked="" type="checkbox"/> Proper Tools for the Job <input checked="" type="checkbox"/> Good Tool Condition Qualifications _____ Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers Safety Shower _____ <input checked="" type="checkbox"/> Evacuation Route Other _____</p> <p>ACCESS</p> <p>_____ Scaffold (properly inspected) _____ Ladder (Tied Off) _____ Manlift _____ Personnel Basket (Inspected & Approved) _____ Operator training _____ Special Provisions _____ Other</p>	<p>WELDING</p> <p>Flashburns _____ Combustibles _____</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p>Shields _____ Grounding _____ Water Hose _____ Fire extinguisher _____ Fire Blanket _____ Fire Watch _____ Sewer Covers _____ Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____ Signs _____ Hole Cover _____ Handrail _____ Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____ Try Start/Stop Switch _____ GFCI Test _____ Assured Grounding _____ Extension Cord Inspection _____ Other _____</p> <p>LIFTING</p> <p>Forklift _____ Cherry Picker _____ Load Chart _____ Angle _____ Crane _____ Chainfall _____ Proper Rigging Practices _____ Manual Lifting _____ Condition of Equipment _____ Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____ <input checked="" type="checkbox"/> Heat Stress</p> <p>Heavy Objects _____ Hot/Cold Surf or Mat _____ Inadequate Lighting _____ Line Breaking _____ <input checked="" type="checkbox"/> Noise Poor Access/Egress _____ Sharp Objects _____ Other _____ <input checked="" type="checkbox"/> UXO</p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____ Flammable _____ Ingestion _____ Inhalation _____ Skin Contamination _____ Other _____</p> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential Pinch Points _____ <input checked="" type="checkbox"/> Slip-Trip Potential Other _____</p> <p>OTHER WORK IN AREA</p> <p>_____ Others Working Overhead _____ Type of Work Others Doing _____ Doing _____ PPE Due to Other Work _____ Other</p> <p>Confined Space Know the Following: * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/21/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Chuck Nycum JSA Prepared by: B. Tincknell Are other crews in area? YES
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 6/21/2007

Job#: 846075

Permit#:

Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment
- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Procedure No.
Revision No.
Date of Revision
Last Review Date
Page

HS314
0
04/25/02
04/25/02
6 of 6

ATTACHMENT 2
HOT WORK PERMIT

Project Name 2007 BURN FILL Break Project No. 846075
 Good for This Date Only 06/21/06 Time: From 0700 AM/PM To 1700 AM/PM
 Hot Work Area Now taken & Aerator Rd
 Specific Work to be Done Cut and Remove (ring) well from TAZ
 Personal Protective Equipment Required: MOS ID

Emergency Equipment Required: Fire extinguisher & water truck

CHECKLIST	INITIAL:	
	YES	DOES NOT APPLY
Area personnel have been informed of work to be performed.	BOT	
All tanks, lines, valves are disconnected, blinded, or blocked out.		BOT
Electrical service has been locked out and tagged.		BOT
Equipment and all attached piping has been cleaned and purged with (check blank): Water _____ Steam _____ Inert Gas _____ Air _____		BOT
All grounding/bonding wire in place.		BOT
Surrounding equipment and operations are safe for hot work.	BOT	
No open vessels, lines, or combustible items within 35 feet of hot work area.	BOT	
Fully charged and appropriate fire extinguisher easily accessible.	BOT	
Fire watch has been provided.	BOT	
No flammable gases greater than 10% LEL in hot work area.		BOT
Compressed gas cylinders kept upright and secured.	BOT	
Air monitoring required.		BOT

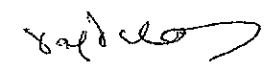
AIR MONITORING (If Required)						
EXACT LOCATION OF TEST	TIME	% LOWER EXPLOSIVE LIMIT	% OXYGEN	OTHER TEST	OTHER TEST	INITIAL

Special Instructions: _____

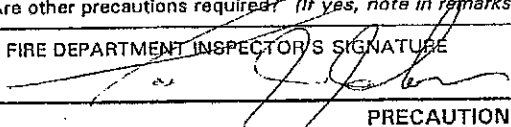
Completed By: Bruce Trinkel Bruce Trinkel 06/21/06
 Printed Name Signature Date

HOT-WORK PERMIT

For use of this form, see AR 420-90; the proponent agency is ACSIM

1. LOCATION <i>Newhane & Austin Rds</i>	2. DATE <i>21 Jun 07</i>	3. PERMIT NO. <i>07-11</i>
4. TYPE OF WORK <i>Cutting & Grinding</i>	5. START TIME <i>0800</i>	6. FINISH TIME <i>1900</i>
7.a. NAME OF PERSON RESPONSIBLE FOR HOT-WORK AT JOB SITE (Contractor/Government Employee) <i>Vil Valdes / Shaw Zu</i>	7.b. SIGNATURE 	

PRECAUTIONS BEFORE OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
8. Did Fire Department inspector inspect site?		<input checked="" type="checkbox"/>
9. Are there procedures for Fire Department emergency notification? (Emergency No.)	<input checked="" type="checkbox"/>	
10. Are combustibles in area noted?	<input checked="" type="checkbox"/>	
11. Should combustibles be covered? (If yes, note in remarks)		<input checked="" type="checkbox"/>
12. Are proper extinguishers on hand?	<input checked="" type="checkbox"/>	
13. Is wet-down necessary? (If yes, note in remarks)		<input checked="" type="checkbox"/>
14. Is smoking permissible at work sites?	<input checked="" type="checkbox"/>	
15. Is continuous fire watch required?		<input checked="" type="checkbox"/>
16. Is Fire Department standby required?		<input checked="" type="checkbox"/>
17. Are other precautions required? (If yes, note in remarks)		<input checked="" type="checkbox"/>
18.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE 	18.b. DATE <i>21 Jun 07</i>	

PRECAUTIONS AFTER OPERATIONS

CHECKLIST	CHECK ONE	
	YES	NO
19.a. Was Fire Department notified after hot-work operation was completed?	<input checked="" type="checkbox"/>	
19.b. Time: <i>8:30 A.M.</i>		
20.a. Did Fire Department inspector inspect work site?		<input checked="" type="checkbox"/>
20.b. Time: <i>ea</i>		
21. Are after work conditions safe? (If no, note in remarks)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
22. Are heat producing devices safe if left at work site?		<i>N/A</i>
23.a. FIRE DEPARTMENT INSPECTOR'S SIGNATURE	23.b. DATE <i>6/21/07</i>	

24. REMARKS

When completed Call the FIRE DEPARTMENT at
242-7701/7702/7544/7545

NOTE: PERMIT VALID ON DAY OF OPERATION AT ONE LOCATION ONLY

DAILY QUALITY CONTROL REPORT

DATE: June 25, 2007

DAY

S	<u>M</u>	T	W	THUR	F	S
---	-----------------	---	---	------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L

CONTRACT NO. DACW05-96-D-0011 WIND

PROJECT NO. 846075 HUMIDITY

	Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>69</u>		Lo	<u>45</u>	
Still	<u>Moderate</u>		High	<u>W@13mph</u>	
Dry	<u>Moderate</u>		High	<u>51%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech/Manger		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
John Deere 310 Backhoe	1	Y	0
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

DGM Anomaly reacquire MRS-16,GEO Reacquire Phase II DGM and Brush cutting with TAZ 2007 Fire Break,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

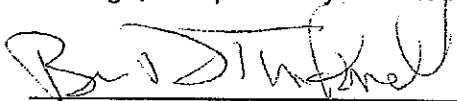
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

TAZ not operational due to a breakdown.

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/25/07, UXOSO FADL dtd 6/25/07, Timberline Escort FADL dtd 6/25/07, Tailgate safety Meeting dated 06/25/07, (GEO re-acquire, Anomaly removal MRS-16), dated 06/25/07, JSA Anomaly removal, (GEO re-acquire and Brush cutting), Equipment inspection Timberline, Ft Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/25/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended morning meetings.

0700 - One Tech supporting Timberline with vegetation removal/cutting and another UXO Tech assisting Geo's with target reacquisition phase II.

1000 - Attended a project status meeting with Kevin, Peter, Marty, and Bruce.

Summary: UXO Team investigated and cleared 52 target sites, completing 5 grids.

UXO recovered: None

MEC recovered: One 2.36" rockets

Seeds found: None

Munitions Debris Fragments (MDF) collected and secured: Approx. 15 lbs.

1700 - Done for the day.

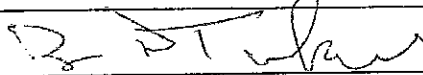
1800 - 1830 - Completed daily's.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the mid 40's. Afternoon in the low 70's.	None



DAILY LOG	DATE	06	25	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; Back doing DGM digs in MRS-16</p> <p>0700 Completed daily reports</p> <p>0900 MRS-16 observing operations, no problems</p> <p>1130 TAZ down for the day, needs new parts, will return tomorrow with parts and repair TAZ</p> <p>1430 MRS-16 observing operations, no problems</p> <p>1700: COB, no incidents or accidents</p> <p>-----Nothing Follows-----</p>			
VISITORS ON SITE: <u>NONE</u>		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 6/25/07	



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0700 - DEPART FOR WORKSITE, FUELED GSA TRUCK

0735 - ARRIVED WORKSITE, COMPLETED JSA, STARTED REPLACING PULLEY SHAFT BEARING ON CUTTING HEAD

0850 - DEPARTED WORKSITE TO TAKE ASSEMBLY WITH BEARING BACK TO COMPOUND TO WORK ON IT, OPERATOR DID NOT HAVE PROPER SIZE TOOL TO TAKE BEARING LOCKING COLLAR OFF

1100 - BACK ON WORKSITE, UNABLE TO GET SCREWS OUT OF COLLAR ON PULLEY SHAFT, OPERATOR TAKES MEASUREMENTS OF PULLEY SHAFT AND ASSEMBLY TO TAKE TO A MACHINE SHOP AND HAVE NEW PARTS MADE

1130-1215 LUNCHBREAK, TAZ OPERATOR DEPARTS SITE TO GET PARTS AND GO TO A MACHINE SHOP

1400 - TAZ OPERATOR CALLED TO SAY THE NEW PULLEY SHAFT WILL NOT BE FINISHED TODAY AND THAT HE WOULD NOT RETURN UNTIL TOMORROW MORNING, TAZ DID NOT CUT TODAY

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

DATE:

6/25/07

Conditions for RTGC1

Current time: June 25, 2007 - 16:39 PDT

Most Recent Observations at June 25, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	63.0° F	69.0 at 11:51	45.0 at 5:51	69.0 at 11:51	45.0 at 5:51
Dew Point	47.1° F	50.3 at 10:51	43.7 at 5:51	50.3 at 10:51	43.7 at 5:51
Relative Humidity	56%	96 at 6:51	51 at 11:51	96 at 6:51	51 at 11:51
Wind Speed	13 mph from W	13 at 0:51	1 at 8:51	20 at 16:51	1 at 8:51
Wind Gust	19 mph	19 at 0:51	6 at 8:51	32 at 17:51	6 at 8:51
Pressure	28.91 in	28.94 at 9:51	28.91 at 4:51	28.96 at 17:51	28.91 at 4:51
Sea Level Pressure	29.42 in	29.46 at 1:51	29.42 at 15:51	29.48 at 17:51	29.42 at 15:51
Altimeter	29.43 in	29.46 at 9:51	29.43 at 4:51	29.48 at 17:51	29.43 at 4:51
Solar Radiation	1265.0 W/m ² m	1394.0 at 13:51	13.0 at 0:51	1394.0 at 13:51	8.0 at 21:51
Fuel Temperature	70.0° F	81.0 at 12:51	44.0 at 3:51	81.0 at 12:51	44.0 at 3:51
10 hr Fuel Moisture	6 gm	18 at 5:51	6 at 14:51	18 at 5:51	6 at 14:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 5:51	13.00 at 8:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

L1

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/25/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, GEO Fill-in and reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
Joshua Jenkins	
John SPARRS	
Valerie Lanestaff	
Joshua D King	
MARK ISABELL	
Tim MATHISEN	

USE CONTINUATION PAGE

Meeting Conducted by:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/25/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; WARM SUNNY WEATHER – STAY HYDRATED***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLIE	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/25/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: : Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		<u>Supervisor's Comments</u>
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Stay hydrated, wear sunscreen		
Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/25/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there 	

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/25/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Chuck Nycum
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/25/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/25/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 6/25/2007
Job#: 846075
Permit#:
Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: June 28, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	-------------	---	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L

CONTRACT NO. DACW05-96-D-0011 WIND

PROJECT NO. 846075 HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	66		Lo	51	
Still	Moderate		High	W@18mph	
Dry	Moderate		High	74%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	2	GSA	15
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	15
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

DGM Anomaly removal MRS-16,GEO Fill-in Phase I and Brush cutting with TAZ 2007 Fire Break,

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

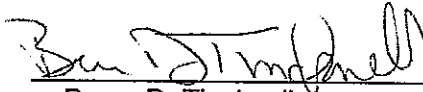
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 6/28/07, UXOSO FADL dtd 6/28/07, Timberline Escort FADL dtd 6/28/07, Tailgate safety Meeting dated 06/28/07, (GEO re-acquire, Anomaly removal MRS-16), dated 06/28/07, JSA Anomaly removal, GEO fill-in , Brush cutting, Equipment inspection Timberline, Ft Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

06/28/07

DATE



DAILY LOG	DATE	06	28	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate; 0700 Completed daily reports 0900 MRS-16 observing operations, no problems 0930 QC 169 completed DGM digs, Phase I and II 1430 MRS-16 observing operations, no problems 1500 Research on M4 Mine, Anti-tank, non-metallic, located in B3J2J9-0010, item is mark for training. 1700: COB, no incidents or accidents -----Nothing Follows-----			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>[Handwritten Signature]</i>		DATE: 6/28/07	

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	4
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.

0700 - One UXO Team conducting target investigations. One Tech supporting Timberline.

Summary: UXO Team investigated and cleared 158 target sites. Completed 3 grids

UXO recovered: Twenty Two M1A1 Landmines, One M1A1 Landmine Fuze, One 37mm LE MKII projo

MEC recovered: None

Seeds found: None

1700 - Field crew secured for the day.

1730 - 1800 - Daily admin duties were completed.

Note: Josh King had a medical appointment

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE

0710 - ARRIVE WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0800 - SAFETY CHECKOUT COMPLETE, TAZ STARTED CUTTING

1000 - TOOK MEASUREMENT TO ENSURE 200 FT REQUIREMENT IS BEING MET

1130 - 1215 LUNCH BREAK

1400 - TAZ STOPS TO FREE UP THE CUTTING TEETH STUCK

1435 - TAZ CUTTING AGAIN

1500-1515 AFTERNOON BREAK

1600 - TAZ STOPS CUTTING FOR THE DAY, PERFORMED MAINTENANCE

1620 - DEPARTED WORKSITE

TAZ CUT APPROX. 400 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

[Handwritten Signature]

DATE:

6/28/07

Weather Conditions for RTGC1

Current time: June 28, 2007 - 16:50 PDT

Most Recent Observations at June 28, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	64.0° F	66.0 at 14:51	50.0 at 1:51	66.0 at 14:51	50.0 at 1:51
Dew Point	55.5° F	57.1 at 14:51	48.3 at 1:51	57.1 at 14:51	48.3 at 1:51
Relative Humidity	74%	94 at 1:51	73 at 10:51	94 at 1:51	64 at 17:51
Wind Speed	18 mph from W	18 at 15:51	3 at 5:51	54 at 21:51	3 at 5:51
Wind Gust	26 mph	26 at 15:51	7 at 6:51	29 at 18:51	7 at 6:51
Pressure	29.03 in	29.04 at 12:51	28.98 at 4:51	29.04 at 12:51	28.98 at 4:51
Sea Level Pressure	29.54 in	29.55 at 12:51	29.50 at 4:51	29.55 at 12:51	29.50 at 4:51
Altimeter	29.55 in	29.56 at 12:51	29.50 at 4:51	29.56 at 12:51	29.50 at 4:51
Solar Radiation	1277.0 W/m ² m	1350.0 at 14:51	42.0 at 0:51	1350.0 at 14:51	23.0 at 21:51
Fuel Temperature	70.0° F	74.0 at 13:51	49.0 at 3:51	74.0 at 13:51	49.0 at 3:51
10 hr Fuel Moisture	10 gm	19 at 6:51	10 at 15:51	19 at 6:51	9 at 16:51
Battery voltage	12.90 volt	12.90 at 8:51	12.30 at 6:51	12.90 at 16:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/28/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark Isbell</i>
JOHN SPARKS	<i>John Sparks</i>
Joshua Jenkins	<i>Joshua Jenkins</i>
VALEIE LANGSTAFF	<i>Valerie Langstaff</i>
TARA VOLPE	<i>Tara Volpe</i>
John Tortolero	<i>John Tortolero</i>
Joshua King	<i>Joshua King</i>

USE CONTINUATION PAGE

Meeting Conducted by: *[Signature]*

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 06/28/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; WARM SUNNY WEATHER - STAY HYDRATED***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOUILLÉ	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____

Manager: _____



JOB SAFETY ANALYSIS

GEO Physics

Date: 6/28/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Chuck Nycum
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? YES
Wind Direction:		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time: _____
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Slips, Trips, and Falls		
Lifting		Supervisor's Initials
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/28/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

- Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 6/28/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Tim Mathisen JSA Prepared by: B. Tincknell Are other crews in area? YES New: _____ Revised: <input checked="" type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		
Valerie Lightfoot		
T. J. E. V. J.		

JOB SAFETY ANALYSIS

Date: 6/28/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Tim Mathisen

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 6/28/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		<u>Supervisor's Comments</u>
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 6/28/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input checked="" type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job</p> <p><input checked="" type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manlift</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p> <hr/>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input checked="" type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p> <hr/>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Skin/Eyes</p> <p><input type="checkbox"/> Flammable</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input type="checkbox"/> Skin Contamination</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input type="checkbox"/> Doing</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL

Equipment Hrs: 2285.8

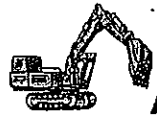


Date: 6/25/07

Location: BLUE LINE

Supervisor: Ed

NOT ON SITE



DAILY EQUIPMENT INSPECTION

ITEM

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

- 1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.
- 2 Check Hydraulic Oil Level, Cap And Vent.
- 3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.
- 4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).
- 5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)
- 6 Check For Oil or Coolant Leaks.
- 7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____
- 8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.
- 9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.
- 10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.
- 11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.
- 12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.
- 13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.
- 14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.
- 15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.
- 16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.
- 17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.
- 18 Check Breathing Air Sustum (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.
- 19 Verify The Presence Of The Operations / Maintenance Manual.
- 20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.

OK	Add	N/A	Comments
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

EMPLOYEE NAME: BOB SLOVILLE (TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.



DAILY QUALITY CONTROL REPORTDATE: July 02, 2007

DAY

S	<u>M</u>	T	W	THUR	F	S
---	-----------------	---	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016

TEMP: H/L

CONTRACT NO. DACW05-96-D-0011

WIND

PROJECT NO. 846075

HUMIDITY

	Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	70		Lo	53	
Still	<u>Moderate</u>	High	W@14mph		
<u>Dry</u>	Moderate	High	36%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
Pickup	1	Timberline	1
Excavator 325 (TAZ)	1	Timberline	1
Radios	7	N	60

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Real Time DGM Anomaly removal MRS-16 (Tree Grids), Brush cutting 2007 burn area, GEO reacquire MRS 16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL


10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 7/02/07, UXOSO FADL dtd 07/02/07, Timberline escort FADL 07/02/07; Tailgate safety Meeting dated 07/02/07, (Anomaly removal MRS-16, GEO Reacquire, and Brush cutting), JSA (Anomaly removal, GEO, and Brush cutting) dtd 07/02/07, Timberline equipment inspection, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/02/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, Real time in trees, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting real time EM-61 in trees, One tech supporting Timberline, Two techs supporting GEO

Summary: UXO Team investigated and completed 3 tree grids

UXO recovered: One M1A1 mine
MEC recovered: None
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 70's.	None



L6

DAILY LOG	DATE	07	02	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; VERY WARM AND SUNNY WEATHER, also watch for tree limbs and branches while working in trees</p> <p>0700 Completed daily reports</p> <p>0800 Entered data to data base from Thurs tree grids.</p> <p>1130 2007 Burn area, observing operations, no issues/problems</p> <p>1300 MRS-16 observing operations, no problems</p> <p>1630 MRS-16 operations completed for today, gate secured.</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 07/02/07



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING
 0650 - DEPART FOR WORKSITE
 0715 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT,
 PERFORMED MAINTENANCE
 0800 - EQUIPMENT SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING
 1130-1215 LUNCHBREAK
 1345 - TAZ STOPS CUTTING TO FREE UP STUCK CUTTING TEETH
 1430 - TAZ STARTED CUTTING AGAIN
 1500 - 1515 AFTERNOON BREAK
 1615 - TAZ STOPS CUTTING FOR THE DAY, PERFORMED MAINTENANCE
 1630 - DEPARTED WORKSITE FOR THE DAY

TAZ CUT APPROX. 300 FT.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE: *John Steward* DATE: 7/2/07

Weather Conditions for RTGC1

Current time: July 2, 2007 - 16:39 PDT

Most Recent Observations at July 2, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	67.0° F	72.0 at 10:51	52.0 at 1:51	72.0 at 10:51	52.0 at 1:51
Dew Point	46.7° F	48.1 at 14:51	42.7 at 11:51	48.9 at 17:51	42.7 at 11:51
Relative Humidity	48%	84 at 1:51	36 at 11:51	84 at 1:51	36 at 11:51
Wind Speed	14 mph from W	14 at 13:51	2 at 7:51	15 at 17:51	2 at 7:51
Wind Gust	23 mph	23 at 15:51	6 at 6:51	23 at 16:51	6 at 6:51
Pressure	29.04 in	29.04 at 13:51	29.00 at 3:51	29.04 at 13:51	29.00 at 18:51
Sea Level Pressure	29.55 in	29.55 at 15:51	29.52 at 4:51	29.55 at 15:51	29.51 at 19:51
Altimeter	29.56 in	29.56 at 13:51	29.52 at 3:51	29.56 at 13:51	29.52 at 18:51
Solar Radiation	1250.0 W/m ²	1366.0 at 13:51	0.0 at 4:51	1366.0 at 13:51	0.0 at 21:51
Fuel Temperature	76.0° F	83.0 at 10:51	50.0 at 3:51	83.0 at 10:51	50.0 at 3:51
10 hr Fuel Moisture	5 gm	14 at 3:51	5 at 12:51	14 at 3:51	5 at 12:51
Battery voltage	12.90 volt	12.90 at 9:51	12.30 at 5:51	12.90 at 16:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/02/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: Low hanging branches, bugs, warm weather

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolero	
Mark ASABELL	
JOHN SPARKS	
Joshua Jenkins	
Joshua D King	
VALENT LANGSTAFF	
TARA VOLPE	

USE CONTINUATION PAGE

Meeting Conducted by:

Supervisor:

Manager:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/02/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable;**

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND

BOB SCOVILLE

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 7/2/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO		
Slip, Trips, and Falls		
Possible hand or eye injury and overhead hazards		
Operation of heavy equipped mowers		
Poison oak		
Lifting		
Fueling of powered equipment		
Noise		
Hot, Sunny conditions		
Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground		
Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting		
Safety vest, hearing protection, 400 ft throw radius around TAZ		
Barrier cream and cotton coveralls, Decon equipment before maintenance		
Use proper lifting techniques		
Proper lifting technique, 60 lb limit		
Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle		
Hard hat with hearing protection		
Stay hydrated, wear sunscreen		
Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

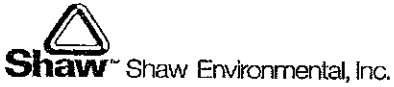
Date: 7/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p><input checked="" type="checkbox"/> Hot Work: Sharpening of blades/welding _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves _____</p> <p><input checked="" type="checkbox"/> Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p><input checked="" type="checkbox"/> Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> Safety vest and Hard hats _____</p> <hr/> <p>TOOLS</p> <p><input checked="" type="checkbox"/> Current Inspection _____</p> <p><input checked="" type="checkbox"/> Proper Tools for the Job _____</p> <p><input checked="" type="checkbox"/> Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route _____</p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p><input checked="" type="checkbox"/> Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p><input checked="" type="checkbox"/> Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p><input checked="" type="checkbox"/> Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> UXO _____</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential _____</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential _____</p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/2/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord								
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano						
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? YES						
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">New:</td> <td style="width: 30%;"></td> <td style="width: 40%;"></td> </tr> <tr> <td>Revised:</td> <td style="text-align: center;">X</td> <td></td> </tr> </table>	New:			Revised:	X	
	New:							
Revised:	X							
Job Task (What are You Doing)		Audit the Job Audit Time:						
DGM Anomaly removal								
OE Sub-surface Clearance Operations in Tree line								
Potential Hazards		Supervisor's Comments						
Lifting								
Slip, Trip, and Falls								
Cuts and abrasions/ overhanging tree branches								
Poison oak								
UXO								
Dust								
Heavy equipment operations								
Hot dry working conditions								
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials						
Recommended Action or Procedure								
Proper lifting technique, weight limit of 60 lbs								
Observe walking areas								
Wear work gloves, observe working/walking conditions								
Mod "D" PPE, Clean PPE/Work boots with alcohol								
Positive identification before moving any ordnance items								
Use of Dust Mask								
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with								
Stay hydrated, drink plenty of fluids, wear sunscreen								
Maintain speed, GO SLOW								
Crew Name Signatures:	<i>T. J. Evg</i>							
<i>[Signature]</i>								
<i>[Signature]</i>								
<i>[Signature]</i>								
<i>[Signature]</i>								
<i>[Signature]</i>								

JOB SAFETY ANALYSIS

Date: 7/2/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

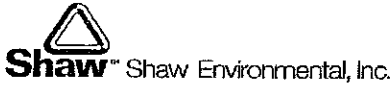
- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 7/2/2007
 Job#: 846075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Chuck Nycum JSA Prepared by: B. Tincknell Are other crews in area? YES New: _____ Revised: X
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		
<i>CH Y</i>		

JOB SAFETY ANALYSIS

Date: 7/2/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: July 03, 2007

DAY

S	M	I	W	THUR	F	S
---	---	----------	---	------	---	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
HI	61	Lo	50		
Still	Moderate	High	W@15mph		
Dry	Moderate	High	74%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
7	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	2	GSA	20
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
Pickup	1	Timberline	1
Excavator 325 (TAZ)	1	Timberline	1
Radios	7	N	70

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Real Time DGM Anomaly removal MRS-16 (Tree Grids), Brush cutting 2007 burn area, GEO reacquire MRS 16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

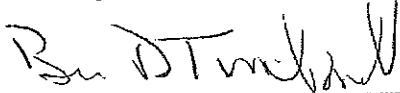
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

FADL SUXOS, dtd 7/03/07, UXOSO FADL dtd 07/03/07, Timberline escort FADL 07/03/07; Tailgate safety Meeting dated 07/03/07, (Anomaly removal MRS-16, GEO Reacquire, and Brush cutting), JSA (Anomaly removal, GEO, and Brush cutting) dtd 07/03/07, Timberline equipment inspection, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/03/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. **846075**
Field Activity: Target Investigations, Anomaly Reacquisition, Real time in trees, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	10
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	5

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations and real time EM-61 in trees, 1 tech with Timberline, 1 tech with GEO
1100-1200 Attended weekly scheduling meeting with USACE

Summary: UXO Team investigated and cleared 8 target sites using a backhoe. Completed 2 grids. Completed 2 tree grids

UXO recovered: One M1A1 mine Fuze
MEC recovered: Eight 2.36 rockets
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: John Sparks went home sick

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None



DAILY LOG	DATE	07	03	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; Holiday traffic, SHAW driving rules</p> <p>0700 Completed daily reports</p> <p>0800 Entered data to data base from Thurs tree grids.</p> <p>1100 Attended weekly scheduling meeting with USACE</p> <p>1230 2007 Burn area, observing operations, no issues/problems</p> <p>1400 MRS-16 observing operations, no problems</p> <p>1630 MRS-16 operations completed for today, gate secured.</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE: <i>Burt Stone</i>	DATE: 07/03/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0645 - DEPART FOR WORKSITE

0715 - ARRIVED WORKSITE, COMPLETED JSA, FUELED TAZ, PERFORMED MAINTENANCE, STARTED EQUIPMENT SAFETY CHECKOUT, CHANGED FUEL FILTER

0840 - SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING

1050 - TAZ STOPS CUTTING, CUTTING HEAD VIBRATING BADLY, STARTED REPLACING BEARING ON CUTTING HEAD DRUM

1130-1215 LUNCH BREAK

1400 - BEARING REPLACEMENT COMPLETE, TAZ STARTS CUTTING AGAIN

1500-1515 AFTERNOON BREAK

1620 - TAZ STOPS CUTTING FOR THE DAY

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 150 FT.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

Jeff Stearnand

DATE:

7/3/07

Weather Conditions for RTGC1

Current time: July 3, 2007 - 16:15 PDT

Most Recent Observations at July 3, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	59.0° F	61.0 at 12:51	50.0 at 6:51	70.0 at 18:51	50.0 at 6:51
Dew Point	53.2° F	54.2 at 9:51	49.2 at 6:51	54.2 at 9:51	46.7 at 16:51
Relative Humidity	81%	97 at 6:51	74 at 13:51	97 at 6:51	48 at 16:51
Wind Speed	15 mph from W	16 at 8:51	7 at 3:51	16 at 8:51	7 at 3:51
Wind Gust	23 mph	24 at 14:51	10 at 4:51	24 at 16:51	10 at 4:51
Pressure	29.02 in	29.10 at 9:51	29.02 at 15:51	29.10 at 9:51	29.01 at 18:51
Sea Level Pressure	29.54 in	29.62 at 9:51	29.54 at 15:51	29.62 at 9:51	29.52 at 18:51
Altimeter	29.54 in	29.62 at 9:51	29.54 at 15:51	29.62 at 9:51	29.53 at 18:51
Solar Radiation	824.0 W/m ² m	1445.0 at 14:51	12.0 at 0:51	1445.0 at 14:51	2.0 at 21:51
Fuel Temperature	66.0° F	71.0 at 12:51	50.0 at 5:51	77.0 at 17:51	50.0 at 5:51
10 hr Fuel Moisture	12 gm	28 at 9:51	12 at 13:51	28 at 9:51	4 at 17:51
Battery voltage	12.90 volt	13.00 at 8:51	12.30 at 4:51	13.00 at 8:51	12.30 at 4:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/03/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: HOLIDAY DRIVING/TRAFFIC/DRINKING

ATTENDEES

NAME PRINTED	SIGNATURE
John Santolano	
MARK ISABELL	
John SPARKS	
Joshua Jenkins	
Joshua King	
VALERIE LONGSTAFFE	
TARA VOLPE	

USE CONTINUATION PAGE

Meeting Conducted by:

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/03/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable; HOLIDAY TRAFFIC/DRIVING/DRINKING***

ATTENDEES

NAME PRINTED

SIGNATURE

JEFF STEINWAND

BOB SCOVILLE

Meeting Conducted by: JEFF STEINWAND

Supervisor:

Manager:



JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 7/3/2007
 Job#: 846075
 Permit#: _____
 Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 7/3/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 7/3/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Chuck Nycum
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		
Potential Hazards		Supervisor's Comments
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 7/3/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
 Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/3/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time: _____
DGM Anomaly removal OE Sub-surface Clearance Operations in Tree line		Supervisor's Comments
Potential Hazards		
Lifting Slip, Trip, and Falls Cuts and abrasions/ overhanging tree branches Poison oak UXO Dust Heavy equipment operations Hot dry working conditions Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Proper lifting technique, weight limit of 60 lbs Observe walking areas Wear work gloves, observe working/walking conditions Mod "D" PPE, Clean PPE/Work boots with alcohol Positive identification before moving any ordnance items Use of Dust Mask Hard hats and reflective vest when spotting for heavy equipment, Eye contact with Stay hydrated, drink plenty of fluids, wear sunscreen Maintain speed, GO SLOW		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 7/3/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input checked="" type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

Equipment Nos: _____

Equipment Type: 325 CL

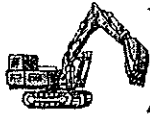
Equipment Hrs: 2301.4



Date: 7/3/07

Location: BLUE LINE

Supervisor: Ed
(NOT ON SITE)



DAILY EQUIPMENT INSPECTION

List Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

ITEM	OK	Add	N/A	Comments
1 Check Engine Oil Level And Engine Compartment For Trash, Debris, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Check Hydraulic Oil Level, Cap And Vent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check Radiator Coolant Level And Radiator Fins For Dirt, Leaves, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check Transmission Oil Level (Dozers) or Swing Case (Excavators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check Oil Level in Frame Joint Bearing, Consult Manual. (Volvo A-40 only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check For Oil or Coolant Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check Wheels / Tires / Tracks For Damage, Cuts And Proper Inflation PSI. _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check Ground Engaging Implements, Cutting Edges, Teeth, Blade, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Inspect Visible Hydraulic Hoses / Lines For Scuffs, Wear, Leaks, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Inspect ROPS, FOPS, For Any Obvious Signs Of Loose Mounts, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Is Radio In Place & Working, Check All Guages, Lights, Controls, Backup Alarms, Horn, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Inspect Operators Compartment For Debris And Fire Extinguisher Charge. Check Floor For Build-up Of Dirt Around Pedals. Inspect Seat(s), Seat Belts, Belt Anchors, Lap Bar, Etc. Clean The Windows And Note Any Cracks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Do a Walk Around Inspection Looking For Obvious Signs Of Future Problem Areas. Check Grab Handles and Step Treads, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check Operation Of All Systems, Boom, Bucket, Dump Bed, Grapple, Shears. Look for Leaks, Damage, Warning Signs, Excess Slack, Obvious Wear, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check Under The Machine For Any Loose Or Hanging Objects, Leaks, Or Anything Out Of The Ordinary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check Fuel Level And Cap Condition, Fill Tank Prior To Beginning Daily Operation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Lube All Moving Parts, Such As Blade, Bucket, Stick, Connecting Links Equalizer bar, Cylinder Pins And Any Point That Is Subject To Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check Breathing Air Systeem (If Used). Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition Before Each Use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Verify The Presence Of The Operations / Maintenance Manual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Check Shears/Grapple For Loose Or Worn Cutting Edges, Teeth And/Or Point. Look For Abnormal Wear, Cracks Or Leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report All Damage To Supervisor Immediately

COMMENTS:

USE LINE NUMBER, BE SPECIFIC, NOTIFY REGIONAL MAINTENANCE COORDINATOR IF IMMEDIATE ATTENTION IS NEEDED.

HAD TO CHANGE FUEL FILTER.

EMPLOYEE NAME: BOB SCOVILLE

(TES)

EMPLOYEE NUMBER: _____

THESE SHEETS ARE TO BE RETAINED ON THE PROJECT FOR REVIEW BY ESG PERSONNEL.

DAILY QUALITY CONTROL REPORTDATE: July 05, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	63	Lo	52		
Still	Moderate	High	W@13mph		
Dry	Moderate	High	73%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
Pickup	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	7	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Real Time DGM Anomaly removal MRS-16 (Tree Grids), GEO reacquire MRS 16

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

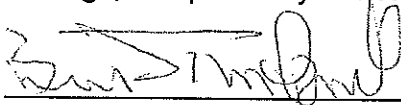
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/05/07, UXOSO FADL dtd 07/05/07, Tailgate safety Meeting dated 07/05/07, (Anomaly removal MRS-16, GEO Reacquire). JSA (Anomaly removal, GEO) dtd 07/05/07, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/05/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, Real time in trees, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	3
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting real time EM-61 in trees, 1 tech with GEO

Summary: UXO Team investigated and cleared 3 tree grids

UXO recovered: None
MEC recovered: None
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: Josh King went home sick. Jeff Steinwand on leave.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None

SIGNATURE: John Tortolano  7/5/2007 page 1 of 1



L6

DAILY LOG	DATE	07	05	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate; Holiday traffic, SHAW driving rules 0700 Completed daily reports 0800 Entered data to data base from tree grids 0930 Josh King departed site due to illness 1000 MRS-16 observing operations, no problems 1430 MRS-16 observing operations, no problems 1630 MRS-16 operations completed for today, gate secured. 1700: COB, no incidents or accidents -----Nothing Follows-----			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: <i>Beit Stuebner</i>		DATE: 07/05/07	

Weather Conditions for RTGC1

Current time: July 5, 2007 - 16:41 PDT

Most Recent Observations at July 5, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	63.0° F	63.0 at 15:51	52.0 at 0:51	64.0 at 17:51	52.0 at 0:51
Dew Point	54.2° F	54.2 at 15:51	50.6 at 0:51	54.2 at 15:51	50.6 at 0:51
Relative Humidity	73%	97 at 5:51	73 at 15:51	97 at 5:51	69 at 17:51
Wind Speed	13 mph from W	13 at 12:51	6 at 0:51	15 at 19:51	6 at 23:51
Wind Gust	17 mph	19 at 14:51	10 at 5:51	20 at 20:51	10 at 5:51
Pressure	28.81 in	28.84 at 8:50	28.80 at 1:51	28.84 at 8:50	28.80 at 19:51
Sea Level Pressure	29.32 in	29.36 at 9:50	29.32 at 15:51	29.36 at 9:50	29.31 at 19:51
Altimeter	29.33 in	29.36 at 8:50	29.32 at 1:51	29.36 at 8:50	29.32 at 19:51
Solar Radiation	1223.0 W/m ²	1309.0 at 14:51	13.0 at 0:51	1309.0 at 14:51	0.0 at 21:51
Fuel Temperature	72.0° F	72.0 at 15:51	51.0 at 2:51	73.0 at 16:51	51.0 at 2:51
10 hr Fuel Moisture	11 gm	20 at 4:51	11 at 14:51	20 at 4:51	9 at 16:51
Battery voltage	12.90 volt	13.00 at 9:50	12.30 at 6:51	13.00 at 9:50	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/05/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire/fill-in of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	<i>Mark L Isbell</i>
Joshua Jenkins	<i>Josh Jenkins</i>
JOHN SPARRIS	<i>John Sparris</i>
Joshua D King	<i>Joshua D King</i>
VALERIE LANGSTAFF	<i>Valerie Langstaff</i>
TARA VOLPE	<i>Tara Volpe</i>
John Tortolero	<i>John Tortolero</i>

USE CONTINUATION PAGE

Meeting Conducted by: *[Signature]*

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/5/2007

Job#: 856075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	
	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		Supervisor's Initials
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		
<i>Michael D. Lewis</i>		
<i>SLF</i>		
<i>John D. Jones</i>		
<i>DAWK</i>		
<i>W. D. Smith</i>		
<i>T. J. E. G.</i>		

JOB SAFETY ANALYSIS

Date: 7/5/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

GEO Physics

Date: 7/5/2007

Job#: 846075

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location	Supervisor of Work: Chuck Nycum
	Safe Haven: Shaw main office	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: Follow route maps	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Main gate MRS-16	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO Fill-in and reacquire		Supervisor's Comments
Potential Hazards		
Slips, Trips, and Falls		
Lifting		
Cuts and abrasions		
Poison oak		
UXO, 200 ft between working groups		
Dust		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Hot, Dry conditions		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Do not pick up any objects YOU DID NOT DROP; 200 ft between working groups		
Use of Dust Mask		
Water intake, stay hydrated		
Crew Name Signatures:		
<i>CH</i>		
<i>T. J. [Signature]</i>		

JOB SAFETY ANALYSIS

Date: 7/5/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Chuck Nycum

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls

- Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - UXO Intrusive 200 ft

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: July 06, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	------	----------	---

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016

CONTRACT NO. DACW05-96-D-0011

PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	67		Lo	51	
Still	Moderate		High	WMW@9mph	
Dry	Moderate		High	61%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
0	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	1	GSA	0
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
Pickup	1	Timberline	0
Excavator 325 (TAZ)	1	Timberline	0
Radios	7	N	50

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Real Time DGM Anomaly removal MRS-16 (Tree Grids),

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

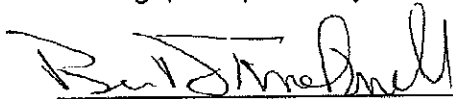
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/06/07, UXOSO FADL dtd 07/06/07, Tailgate safety Meeting dated 07/06/07, (Anomaly removal MRS-16, JSA (Anomaly removal), dtd 07/06/07, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/06/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, Real time in trees, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	10
Josh King	UXO Tech II	3
Josh Jenkins	UXO Tech I	10
John Sparks	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting real time EM-61 in trees, 1 tech with GEO

Summary: UXO Team investigated and cleared 3 tree grids

UXO recovered: None
MEC recovered: None
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: Josh King went home sick. Jeff Steinwand on leave.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None



L6

DAILY LOG	DATE	07	06	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate; 0700 Completed daily reports 0800 Entered data to data base from tree grids 1000 MRS-16 observing operations, no problems 1400 Josh King Demobed from site 1430 MRS-16 observing operations, no problems 1630 MRS-16 operations completed for today, gate secured. 1700: COB, no incidents or accidents -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 07/06/07

Weather Conditions for RTGC1

Current time: July 6, 2007 - 16:04 PDT

Most Recent Observations at July 6, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	67.0° F	69.0 at 14:51	51.0 at 1:51	69.0 at 14:51	51.0 at 1:51
Dew Point	53.1° F	54.5 at 10:51	49.6 at 1:51	54.5 at 10:51	49.6 at 1:51
Relative Humidity	61%	97 at 7:51	58 at 14:51	97 at 7:51	58 at 14:51
Wind Speed	9 mph from WNW	9 at 14:51	1 at 2:51	14 at 16:51	1 at 2:51
Wind Gust	16 mph	16 at 15:51	3 at 4:51	22 at 17:51	3 at 4:51
Pressure	28.85 in	28.86 at 10:51	28.81 at 4:51	28.86 at 10:51	28.80 at 18:51
Sea Level Pressure	29.36 in	29.38 at 10:51	29.33 at 4:51	29.38 at 10:51	29.32 at 18:51
Altimeter	29.37 in	29.38 at 10:51	29.33 at 4:51	29.38 at 10:51	29.32 at 18:51
Solar Radiation	1258.0 W/m*m	1355.0 at 14:51	16.0 at 1:51	1355.0 at 14:51	5.0 at 21:51
Fuel Temperature	75.0° F	78.0 at 12:51	51.0 at 6:51	78.0 at 12:51	51.0 at 6:51
10 hr Fuel Moisture	9 gm	19 at 7:51	9 at 14:51	19 at 7:51	9 at 17:51
Battery voltage	12.90 volt	13.00 at 9:51	12.30 at 6:51	13.00 at 9:51	12.30 at 6:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/06/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire/fill-in of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: _____

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
Mark ISABell	
TARA VOLPE	
Joshua Jenkins	
John SPARKS	
Joshua D King	
VALERIE LANGSTAFF	

USE CONTINUATION PAGE

Meeting Conducted by:

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/6/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting Slip, Trip, and Falls Cuts and abrasions/ overhanging tree branches Poison oak UXO Dust Heavy equipment operations Hot dry working conditions Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs Observe walking areas Wear work gloves, observe working/walking conditions Mod "D" PPE, Clean PPE/Work boots with alcohol Positive identification before moving any ordnance items Use of Dust Mask Hard hats and reflective vest when spotting for heavy equipment, Eye contact with Stay hydrated, drink plenty of fluids, wear sunscreen Maintain speed, GO SLOW		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 7/6/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

- Confined Space**
Know the Following:
- * Possible hazards within the confined space
 - * First signs of exposure
 - * How to summons help
 - * How to track personnel
 - * Entering and exiting the confined space
 - * Maintain contact with all entrants by voice or visual
 - * Do not attempt to rescue unless you are a part of a coordinated effort
 - * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: July 09, 2007

S	M	T	W	THUR	F	S
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DAY

USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L

CONTRACT NO. DACW05-96-D-0011 WIND

PROJECT NO. 846075 HUMIDITY

Sunny	Clear	Overcast	Rain	Fog
Hi	73	Lo	52	
Still	Moderate	High	NE@9mph	
Dry	Moderate	High	51%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
1	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	60

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Real Time and DGM Anomaly removal MRS-16, DGM Reacquire MRS-16, and Brush removal 2007 Burn area.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)
NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).
None

6. Material Received: (Note inspection results and storage provided).
NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:
NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).
See UXOSO FADL

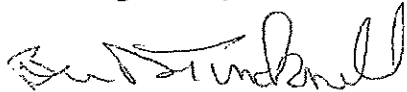
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/09/07, UXOSO FADL dtd 07/09/07, Timberline Escort FADL. Dtd 7/9/07, Tailgate safety Meeting dated 07/09/07, (Anomaly removal MRS-16, and Brush removal), JSA (Anomaly removal and Brush removal), dtd 07/09/07, Timberline equipment inspection, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/09/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations and realtime EM 61 in trees. One Tech supporting Timberline, Two Tech's conducting Reaquire operations for GEO.
Summary: Team investigated and cleared 65 target sites completed 5 grids, and 1 partial tree grid.

UXO recovered: One 75mm Schrapnel Projectile
MEC recovered: Three 2.36" rockets
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note:

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None

SIGNATURE: John Tortolano

7/9/2007

page 1 of 1



L6

DAILY LOG	DATE	07	09	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate; 0700 Completed daily reports 0800 Entered data to data base from tree grids and DGM 1000 MRS-16 observing operations, no problems 1100 2007 Burn area, checked on cut line in vicinity of soccer field. TAZ is more than 400 ft from field, although making considerable amount of dust due to dry conditions. 1430 MRS-16 observing operations, no problems 1630 MRS-16 operations completed for today, gate secured. 1700: COB, no incidents or accidents <hr style="border-top: 1px dashed black;"/> -----Nothing Follows-----	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 07/09/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet	OF		

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0705 - DEPART FOR WORKSITE

0730 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE

0830 - EQUIPMENT SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING

1130-1215 LUNCHBREAK

1500-1515 AFTERNOON BREAK

1615 - TAZ STOPS CUTTING FOR THE DAY

1630 - DEPARTED WORKSITE

TAZ CUT APPROX. 300FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

J.B. Steward

DATE:

7/9/07

Weather Conditions for RTGC1

Current time: July 9, 2007 - 16:18 PDT

Most Recent Observations at July 9, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	73.0° F	73.0 at 15:51	52.0 at 0:51	73.0 at 15:51	50.0 at 22:51
Dew Point	53.8° F	53.8 at 15:51	50.0 at 0:51	53.8 at 15:51	48.1 at 22:51
Relative Humidity	51%	96 at 5:51	51 at 14:51	96 at 5:51	51 at 14:51
Wind Speed	9 mph from NE	9 at 15:51	2 at 6:51	12 at 16:51	2 at 21:51
Wind Gust	14 mph	14 at 15:51	5 at 7:51	20 at 16:51	5 at 7:51
Pressure	28.84 in	28.88 at 11:51	28.84 at 2:51	28.88 at 11:51	28.82 at 18:51
Sea Level Pressure	29.34 in	29.40 at 11:51	29.34 at 15:51	29.40 at 11:51	29.33 at 18:51
Altimeter	29.36 in	29.40 at 11:51	29.36 at 2:51	29.40 at 11:51	29.34 at 18:51
Solar Radiation	1251.0 W/m ² m	1373.0 at 13:51	4.0 at 0:51	1373.0 at 13:51	0.0 at 21:51
Fuel Temperature	80.0° F	80.0 at 15:51	52.0 at 2:51	80.0 at 15:51	49.0 at 22:51
10 hr Fuel Moisture	12 gm	19 at 5:51	12 at 15:51	19 at 5:51	12 at 15:51
Battery voltage	12.80 volt	12.90 at 9:51	12.30 at 5:51	12.90 at 16:51	12.30 at 5:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/09/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire/fill-in of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline, sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: LAST WEEK OF WORK – PAY ATTENTION TO DETAILS

ATTENDEES

NAME PRINTED	SIGNATURE
<i>John Santolano</i>	<i>[Signature]</i>
MARK ISABELL	<i>[Signature]</i>
JOHN SPIRUS	<i>[Signature]</i>
TARA VOLPE	<i>[Signature]</i>
VALERIE LANESOFF	<i>[Signature]</i>

USE CONTINUATION PAGE

Meeting Conducted by: *[Signature]*

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/09/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: **Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; Notify escort of any items not recognizable;**

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 7/9/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE:: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	
	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Escort Vehicle	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 7/19/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/9/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? YES
	Wind Direction: Evacuation Route: Follow route maps	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Job Task (What are You Doing)	
DGM Anomaly removal		Audit the Job Audit Time:
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		Supervisor's Initials
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS**

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: July 10, 2007

S	M	<u>T</u>	W	THUR	F	S
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DAY

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016 TEMP: H/LCONTRACT NO. DACW05-96-D-0011 WINDPROJECT NO. 846075 HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
Hi	66		Lo	53	
Still	Moderate	High	N@6mph		
Dry	Moderate	High	62%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
5	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
1	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	20
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	20
Pickup	1	Timberline	10
Excavator 325 (TAZ)	1	Timberline	10
Radios	7	N	60

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Real Time and DGM Anomaly removal MRS-16, DGM Reacquire MRS-16, and Brush removal 2007 Burn area.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

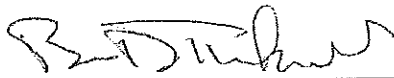
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/10/07, UXOSO FADL dtd 07/10/07, Timberline Escort FADL. Dtd 7/10/07, Tailgate safety Meeting dated 07/10/07, (Anomaly removal MRS-16, and Brush removal), JSA (Anomaly removal and Brush removal), dtd 07/10/07, Timberline equipment inspection, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/10/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal. 846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.
Company Name: Shaw Environmental Inc.

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	0
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
0700 - One UXO Team conducting target investigations. One Tech supporting Timberline, Two Tech's conducting Reacquire operations for GEO.
Summary: Team investigated and cleared 69 target sites completed 2 grids.

UXO recovered: None
MEC recovered: Three 2.36" rockets
Seeds found: None

1700 - Field crew secured for the day.
1730 - 1800 - Daily admin duties were completed.

Note: Mark Isabell called in sick

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the mid 60's.	None



DAILY LOG	DATE	07	10	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; Discussed paying attention to details, last week of work</p> <p>0700 Completed daily reports</p> <p>0800 QC'd 82 DGM digs</p> <p>1000 MRS-16 observing operations, no problems</p> <p>1100 2007 Burn area, checked on cut line in vicinity of soccer field. TAZ is more than 400 ft from field, although making considerable amount of dust due to dry conditions, dust is blowing away from soccer field</p> <p>1300 MRS-16 POM Fire Dept on site, fire risk assessment for Thursday's Demo, Low risk; permission granted for demo, POM FD will be at MRS-16 0900 Thursday, 7/12/07.</p> <p>1430 MRS-16 observing operations, no problems</p> <p>1630 MRS-16 operations completed for today, gate secured.</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 07/10/07

Weather Conditions for RTGC1

Current time: July 10, 2007 - 16:14 PDT

Most Recent Observations at July 10, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	66.0° F	66.0 at 15:51	53.0 at 7:51	70.0 at 16:51	53.0 at 7:51
Dew Point	52.6° F	55.0 at 14:51	51.9 at 7:51	55.0 at 14:51	51.4 at 21:51
Relative Humidity	62%	96 at 6:51	62 at 15:51	96 at 6:51	54 at 16:51
Wind Speed	4 mph from N	6 at 11:51	1 at 9:51	7 at 16:51	1 at 9:51
Wind Gust	12 mph	14 at 13:51	4 at 6:51	18 at 16:51	4 at 6:51
Pressure	28.89 in	28.91 at 11:51	28.85 at 4:51	28.91 at 11:51	28.82 at 17:51
Sea Level Pressure	29.40 in	29.43 at 11:51	29.37 at 4:51	29.43 at 11:51	29.33 at 17:51
Altimeter	29.41 in	29.43 at 11:51	29.37 at 4:51	29.43 at 11:51	29.34 at 17:51
Solar Radiation	797.0 W/m ²	797.0 at 15:51	0.0 at 0:51	1073.0 at 16:51	0.0 at 21:51
Fuel Temperature	75.0° F	75.0 at 15:51	53.0 at 5:51	84.0 at 17:51	53.0 at 5:51
10 hr Fuel Moisture	11 gm	19 at 7:51	11 at 15:51	19 at 7:51	8 at 19:51
Battery voltage	12.90 volt	12.90 at 9:51	12.30 at 4:51	12.90 at 9:51	12.30 at 4:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/10/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted bleach/alcohol prior to performing maintenance; 400 Ft debris throw; blowing dust towards school; Notify escort of any items not recognizable;***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/10/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire/fill-in of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: STAY UP WIND OF BLOWING SAND/DIRT DURING DIGS

ATTENDEES

NAME PRINTED	SIGNATURE
VALERIE LANGSTAFF	<i>V Langstaff</i>
<i>Susanna Senkus</i>	<i>Susanna Senkus</i>
<i>John Shaw</i>	<i>John Shaw</i>
<i>John Tortolano</i>	<i>John Tortolano</i>

USE CONTINUATION PAGE

Meeting Conducted by: _____

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - ~~SAFETY~~ TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0725 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, FUELED TAZ

0830 - EQUIPMENT SAFETY CHECKOUT COMPLETE, TAZ STARTS CUTTING

1130-1215 LUNCHBREAK

1500-1515 AFTERNOON BREAK

1615 - TAZ STOPS CUTTING FOR THE DAY, PERFORMED MAINTENANCE

1635 - DEPARTED WORKSITE

TAZ CUT APPROX. 300FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

John Stennard

DATE:

7/10/07



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

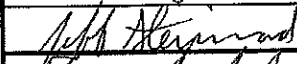
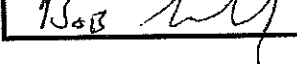
BRUSH Clearing

Date: 7/10/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		Supervisor's Comments
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		Supervisor's Initials
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		
 		

JOB SAFETY ANALYSIS

Date: 7/10/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Shin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <p>Confined Space</p> <p>Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/10/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? YES
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		Supervisor's Initials
Recommended Action or Procedure		
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 7/10/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection

Other _____

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams**
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORT

DATE: July 11, 2007

DAY

S	M	T	<u>W</u>	THUR	F	S
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USACE UXO SAFETY Clinton Huckins

PROJECT Former Fort Ord, Calif. WEATHER

DELIVERY ORDER NO. 0016 TEMP: H/L

CONTRACT NO. DACW05-96-D-0011 WIND

PROJECT NO. 846075 HUMIDITY

Sunny	<u>Clear</u>	Overcast	Rain	Fog
Hi	<u>69</u>	Lo	<u>53</u>	
Still	Moderate	High	<u>WSW@21mph</u>	
Dry	<u>Moderate</u>	High	<u>54%</u>	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech		Shaw	Ft Ord, Calif/Geophysics
2	Equipment operator/Foreman		Timberline	Ft Ord, Calif/Brush crew

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	10
PICK-UP	4	Y	40
PICK-UP	1	GSA	10
Polaris 4 X 4 RTV	1	N	0
Schoenstedts GA-52 c/x	11	N	4
EM-61 MK 2 A	4	N	10
Pickup	2	Timberline	6
Excavator 325 (TAZ)	1	Timberline	3
Radios	7	N	60

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).
Real Time and DGM Anomaly removal MRS-16, and Brush removal 2007 Burn area.

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)
Final QC Inspection 2007 Burn Area Fire Break, work completed to scope

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).
None

6. Material Received: (Note inspection results and storage provided).
NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:
NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).
See UXOSO FADL

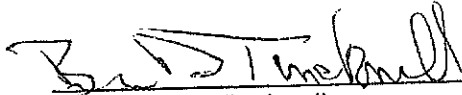
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/11/07, UXOSO FADL dtd 07/11/07, Timberline Escort FADL. Dtd 7/11/07, Tailgate safety Meeting dated 07/11/07, (Anomaly removal MRS-16, and Brush removal), JSA (Anomaly removal and Brush removal), dtd 07/11/07, Timberline equipment inspection, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/11/07
DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting target investigations and realtime EM 61 in trees. One Tech supporting Timberline.

Summary: Team investigated and cleared 127 target sites completed 5 grids, and 1 tree grid completed.

UXO recovered: One M1A1 Mine Fuze
 MEC recovered: Fourteen 2.36" rockets
 Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note: Timberline operations on 2007 Burn unit are complete.

<p>VISITORS ON SITE:</p>	<p>CHANGES FROM PLANS AND SPECIFICATIONS</p>
<p>WEATHER CONDITIONS:</p> <p>Morning in the low 50's. Afternoon in the high 60's.</p>	<p>IMPORTANT TELEPHONE CALLS:</p> <p>None</p>

SIGNATURE: John Tortolano

7/11/2007



DAILY LOG	DATE	07	11	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:</p> <p>0630: Tailgate; Discussed paying attention to details, last week of work</p> <p>0700 Completed daily reports</p> <p>0800 QC'd 69 DGM digs</p> <p>0930 2007 Burn area; completed final QC Inspection, work is completed.</p> <p>1030 MRS-16 observing operations, no problems</p> <p>1430 MRS-16 observing operations, no problems</p> <p>1630 MRS-16 operations completed for today, gate secured.</p> <p>1700: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 07/11/07



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:			
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: BRUSH CUTTING FOR 2007 VEG BURN

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 - TAILGATE SAFETY MEETING

0650 - DEPART FOR WORKSITE

0720 - ARRIVED WORKSITE, COMPLETED JSA, STARTED EQUIPMENT SAFETY CHECKOUT, PERFORMED MAINTENANCE, TOOK TWO MEASUREMENTS TO ENSURE 200FT REQUIREMENT

0800 - EQUIPMENT SAFETY CHECKOUT COMPLETE, TAZ STARTED CUTTING

0915 - TAZ COMPLETES CUT ON BLUE LINE SOUTH OF AREA C

0945 - QC/SAFETY ONSITE TO VERIFY CUT ~~WAS~~ IS CORRECT AS PER THE SCOPE OF WORK

1000 - TAZ STARTS MOVING TO RANGE 25 AREA TO STAGE FOR PICKUP OF THE EQUIPMENT

1035 - TAZ STAGED AT RANGE 25 AREA AND LOCKED UP, SIGNS WERE PICKED UP

1100 - DEPARTED WORKSITE

TAZ CUT APPROX. 70 FT

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE:

SIGNATURE:

Jeff Stearns

DATE:

7/11/07

Weather Conditions for RTGC1

Current time: July 11, 2007 - 16:32 PDT

Most Recent Observations at July 11, 2007 - 15:51 PDT

	15:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	68.0° F	69.0 at 13:51	53.0 at 1:51	69.0 at 13:51	53.0 at 1:51
Dew Point	50.7° F	54.8 at 8:51	50.2 at 14:51	55.1 at 19:51	50.2 at 14:51
Relative Humidity	54%	95 at 1:51	53 at 14:51	95 at 1:51	53 at 14:51
Wind Speed	21 mph from WSW	21 at 15:51	1 at 9:51	21 at 15:51	1 at 9:51
Wind Gust	28 mph	28 at 15:51	4 at 9:51	28 at 15:51	4 at 9:51
Pressure	28.96 in	28.99 at 10:51	28.91 at 3:51	28.99 at 10:51	28.87 at 16:51
Sea Level Pressure	29.47 in	29.50 at 10:51	29.43 at 3:51	29.50 at 10:51	29.38 at 16:51
Altimeter	29.48 in	29.51 at 10:51	29.43 at 3:51	29.51 at 10:51	29.39 at 16:51
Solar Radiation	1237.0 W/m*m	1360.0 at 13:51	3.0 at 0:51	1360.0 at 13:51	0.0 at 21:51
Fuel Temperature	73.0° F	78.0 at 13:51	52.0 at 0:51	78.0 at 13:51	52.0 at 0:51
10 hr Fuel Moisture	10 gm	18 at 1:51	10 at 14:51	18 at 1:51	10 at 16:51
Battery voltage	12.90 volt	12.90 at 9:51	12.30 at 4:51	12.90 at 16:51	12.30 at 4:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: UXO Removal, and GEO reacquire/fill-in of anomalies

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: LAST DAY OF EXCAVATION

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELLI	<i>Mark I Isabelli</i>
John Testalona	<i>[Signature]</i>
JOHN SPARKS	<i>[Signature]</i>
Joshua Senkens	<i>[Signature]</i>
VALERIE LANGSTAFF	<i>Val Langstaff</i>
TARA WOLPE	<i>Tara Wolpe</i>

USE CONTINUATION PAGE

Meeting Conducted by: *R. D. G. U.*

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 07/11/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca. 2007 Burn area, MRA

Type of Work: Brush clearing with heavy equipment; "TAZ"

Chemicals Used: Technu, Bug Spray, Paint, Fuels

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and terrain, Heat stress, Heavy equipment

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment

Other: ***Poison oak - Spray equipment with diluted beach/alcohol prior to performing maintenance; 400 Ft debris throw; blowing dust towards school; Notify escort of any items not recognizable;***

ATTENDEES

NAME PRINTED	SIGNATURE
JEFF STEINWAND	
BOB SCOVILLE	
Ed WORTH	

Meeting Conducted by: JEFF STEINWAND

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

BRUSH Clearing

Date: 7/11/2007

Job#: 846075

Permit#:

Issued By: B Tincknell

Location of Job (Unit/Location on Project): MRA Former Ft Ord, CA		
Required PPE: Mod D with Steel Toe boots Hard Hats and Safety vests 2 pr gloves during equip maintenance	Safety Access / Location Safe Haven: Main Office Wind Direction: N/A Evacuation Route: See Map Assembly Point: Escort Vehicle	Supervisor of Work: Jeff Steinwand JSA Prepared by: B. Tincknell Are other crews in area? NO
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Clearing and Grubbing of vegetative material including poison oak		
Potential Hazards		<u>Supervisor's Comments</u>
UXO Slip, Trips, and Falls Possible hand or eye injury and overhead hazards Operation of heavy equipped mowers Poison oak Lifting Fueling of powered equipment Noise Hot, Sunny conditions Snakes		
Recommended Action or Procedure		<u>Supervisor's Initials</u>
Stay with UXO escort, do not touch any items on ground Keep work area free of trip hazards and maintain awareness; 3 points entering/exiting Safety vest, hearing protection, 400 ft throw radius around TAZ Barrier cream and cotton coveralls, Decon equipment before maintenance Use proper lifting techniques Proper lifting technique, 60 lb limit Keep away from all sources of ignition, wear proper PPE, equipment off, grounding of equip and filling nozzle Hard hat with hearing protection Stay hydrated, wear sunscreen Observe where you walk, check equipment area in morning and after breaks		
Crew Name Signatures:		

SUPERVISOR/FOREMAN Jeff Steinwand

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work: Sharpening of blades/welding <input checked="" type="checkbox"/></p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p>Type of Gloves <input checked="" type="checkbox"/></p> <p>Composition of Gloves <input checked="" type="checkbox"/></p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection <input checked="" type="checkbox"/></p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Safety vest and Hard hats <input checked="" type="checkbox"/></p> <hr/> <p>TOOLS</p> <p>Current Inspection <input checked="" type="checkbox"/></p> <p>Proper Tools for the Job <input checked="" type="checkbox"/></p> <p>Good Tool Condition <input checked="" type="checkbox"/></p> <p>Qualifications _____</p> <p>Other _____</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p>Fire Extinguishers <input checked="" type="checkbox"/></p> <p>Safety Shower _____</p> <p>Evacuation Route <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment <input checked="" type="checkbox"/></p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p> <hr/> <p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p> <hr/> <p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p> <hr/> <p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress <input checked="" type="checkbox"/></p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise <input checked="" type="checkbox"/></p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p>UXO <input checked="" type="checkbox"/></p> <hr/> <p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p>Skin Contamination _____</p> <p>Other _____</p> <hr/> <p>HAZARDS/BODY</p> <p>Fall potential <input checked="" type="checkbox"/></p> <p>Pinch Points _____</p> <p>Slip-Trip Potential <input checked="" type="checkbox"/></p> <p>Other _____</p> <hr/> <p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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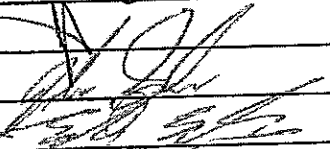
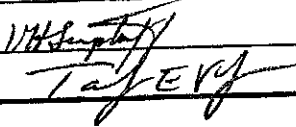
SUPERVISOR/FOREMAN RECOMMENDATION:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/11/2007
 Job#: 856075
 Permit#: _____
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps Assembly Point: Main gate MRS-16	Supervisor of Work: Jack Tortolano JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: _____ Revised: X
Job Task (What are You Doing)		Audit the Job Audit Time:
DGM Anomaly removal		
OE Sub-surface Clearance Operations in Tree line		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions/ overhanging tree branches		
Poison oak		
UXO		
Dust		
Heavy equipment operations		
Hot dry working conditions		
Driving on/off range. Off range as posted. On range 5 - 10 MPH		
Recommended Action or Procedure		Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs		
Observe walking areas		
Wear work gloves, observe working/walking conditions		
Mod "D" PPE, Clean PPE/Work boots with alcohol		
Positive identification before moving any ordnance items		
Use of Dust Mask		
Hard hats and reflective vest when spotting for heavy equipment, Eye contact with		
Stay hydrated, drink plenty of fluids, wear sunscreen		
Maintain speed, GO SLOW		
Crew Name Signatures:   		

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p><input type="checkbox"/> Required</p> <p><input type="checkbox"/> Cold Work</p> <p><input type="checkbox"/> Hot Work</p> <p><input type="checkbox"/> Entry Permit</p> <p><input type="checkbox"/> All Conditions Met</p> <p><input type="checkbox"/> Signed Off when Complete</p> <p><input type="checkbox"/> Other</p> <hr/> <p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves</p> <p><input checked="" type="checkbox"/> Composition of Gloves</p> <p><input type="checkbox"/> Special Purpose Gloves</p> <p><input type="checkbox"/> Tyvek Suit</p> <p><input type="checkbox"/> Acid Suit/Slicker Suit</p> <p><input type="checkbox"/> Rubber boots</p> <p><input type="checkbox"/> Mono Goggles (vented-non-vented)</p> <p><input type="checkbox"/> Face Shield</p> <p><input type="checkbox"/> Respirator</p> <p><input type="checkbox"/> Fresh Air</p> <p><input type="checkbox"/> Ear Protection</p> <p><input type="checkbox"/> Safety Harness</p> <p><input type="checkbox"/> Burning Goggles</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Coveralls</p> <p><input checked="" type="checkbox"/> Reflective vest and hard hats near heavy equipment</p> <p>TOOLS</p> <p><input type="checkbox"/> Current Inspection</p> <p><input type="checkbox"/> Proper Tools for the Job</p> <p><input type="checkbox"/> Good Tool Condition</p> <p><input type="checkbox"/> Qualifications</p> <p><input type="checkbox"/> Other</p> <hr/> <p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers</p> <p><input type="checkbox"/> Safety Shower</p> <p><input checked="" type="checkbox"/> Evacuation Route</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ACCESS</p> <p><input type="checkbox"/> Scaffold (properly inspected)</p> <p><input type="checkbox"/> Ladder (Tied Off)</p> <p><input type="checkbox"/> Manliest</p> <p><input type="checkbox"/> Personnel Basket (Inspected & Approved)</p> <p><input type="checkbox"/> Operator training</p> <p><input type="checkbox"/> Special Provisions</p> <p><input type="checkbox"/> Other</p>	<p>WELDING</p> <p><input type="checkbox"/> Flashburns</p> <p><input type="checkbox"/> Combustibles</p> <p><input type="checkbox"/> Spark Containment</p> <p><input type="checkbox"/> Shields</p> <p><input type="checkbox"/> Grounding</p> <p><input type="checkbox"/> Water Hose</p> <p><input type="checkbox"/> Fire extinguisher</p> <p><input type="checkbox"/> Fire Blanket</p> <p><input type="checkbox"/> Fire Watch</p> <p><input type="checkbox"/> Sewer Covers</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OVERHEAD WORK</p> <p><input type="checkbox"/> Barricades</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Hole Cover</p> <p><input type="checkbox"/> Handrail</p> <p><input type="checkbox"/> Other</p> <hr/> <p>ELECTRICAL</p> <p><input type="checkbox"/> Locked and Tagged Out</p> <p><input type="checkbox"/> Try Start/Stop Switch</p> <p><input type="checkbox"/> GFCI Test</p> <p><input type="checkbox"/> Assured Grounding</p> <p><input type="checkbox"/> Extension Cord Inspection</p> <p><input type="checkbox"/> Other</p> <hr/> <p>LIFTING</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Cherry Picker</p> <p><input type="checkbox"/> Load Chart</p> <p><input type="checkbox"/> Angle</p> <p><input type="checkbox"/> Crane</p> <p><input type="checkbox"/> Chainfall</p> <p><input type="checkbox"/> Proper Rigging Practices</p> <p><input checked="" type="checkbox"/> Manual Lifting</p> <p><input type="checkbox"/> Condition of Equipment</p> <p><input type="checkbox"/> Operator Certificate</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p><input type="checkbox"/> Electrical Shock</p> <p><input checked="" type="checkbox"/> Heat Stress</p> <p><input checked="" type="checkbox"/> Heavy Objects</p> <p><input type="checkbox"/> Hot/Cold Surf or Mat</p> <p><input type="checkbox"/> Inadequate Lighting</p> <p><input type="checkbox"/> Line Breaking</p> <p><input checked="" type="checkbox"/> Noise</p> <p><input type="checkbox"/> Poor Access/Egress</p> <p><input type="checkbox"/> Sharp Objects</p> <p><input type="checkbox"/> Other Cold stress</p> <p><input checked="" type="checkbox"/> UXO</p> <hr/> <p>HAZARDS/CHEMICALS</p> <p><input type="checkbox"/> Chemical Burn Shin/Eyes</p> <p><input checked="" type="checkbox"/> Flammable -Fuels</p> <p><input type="checkbox"/> Ingestion</p> <p><input type="checkbox"/> Inhalation</p> <p><input checked="" type="checkbox"/> Skin Contamination Poison Oak</p> <p><input type="checkbox"/> Other</p> <hr/> <p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential</p> <p><input type="checkbox"/> Pinch Points</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential</p> <p><input type="checkbox"/> Other</p> <hr/> <p>OTHER WORK IN AREA</p> <p><input type="checkbox"/> Others Working Overhead</p> <p><input type="checkbox"/> Type of Work Others Doing</p> <p><input checked="" type="checkbox"/> GEO Teams</p> <p><input type="checkbox"/> PPE Due to Other Work</p> <p><input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> 200 FT BETWEEN TEAMS</p> <hr/> <p>Confined Space Know the Following:</p> <ul style="list-style-type: none"> * Possible hazards within the confined space * First signs of exposure * How to summons help * How to track personnel * Entering and exiting the confined space * Maintain contact with all entrants by voice or visual * Do not attempt to rescue unless you are a part of a coordinated effort * Remain at entry point assume no duties which take you from there
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SUPERVISOR/FOREMAN RECOMMENDATION:

DAILY QUALITY CONTROL REPORTDATE: July 1^A, 2007

DAY

S	M	T	W	THUR	F	S
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USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

TEMP: H/L

WIND

HUMIDITY

	Sunny	Clear	Overcast	Rain	Fog
HI	68		Lo	50	
Still	Moderate	High	W@16mph		
Dry	Moderate	High	52%		

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	0
PICK-UP	4	Y	40
PICK-UP	1	GSA	50
Polaris 4 X 4 RTV	1	N	2
Schoenstedts GA-52 c/x	11	N	1
EM-61 MK 2 A	4	N	0
Radios	7	N	60

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

Explosive venting and MEC/UXO certification, MRS-16 Site clean-up

4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)

NONE

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

NONE

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

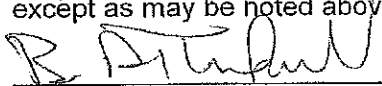
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/12/07, UXOSO FADL dtd 07/12/07, Tailgate safety Meeting dated 07/12/07, (Demolition Operations and site clean-up), JSA (Demolition Operations and site clean-up) dtd 07/12/07, Explosive usage report, DD Form 626, FT Ord weather report.

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/12/07

DATE

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10.5
Valerie Langstaff	Team Leader	10
Mark Isabell	Team Leader	10
Jeff Steinwand	UXO Tech II	10
Tara Volpe	UXO Tech II	10
John Sparks	UXO Tech I	10
Josh Jenkins	UXO Tech I	10

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting explosive venting operations

Summary: Team conducted explosive venting operations, venting approximately 207 MEC/UXO items

UXO recovered: None
 MEC recovered: None
 Seeds found: None

1700 - Field crew secured for the day.
 1730 - 1800 - Daily admin duties were completed.

Note: All intrusive operations complete on MRS 16

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Morning in the low 50's. Afternoon in the high 60's.	None

SIGNATURE: John Tortolano


7/12/2007



L6

DAILY LOG	DATE	07	12	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA		PROJECT NO: 846075	
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report			
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS: 0630: Tailgate; Discussed DEMO OPERATIONS AND EXPLOSIVE SAFETY 0700 Completed daily reports 0840 MRS -16, POM Fire Dept on site, starting DEMO OPS 1200 Demo completed, POM Fire Dept released, no fires or problems 1245 MRS-16 observing operations, no problems, site clean-up 1330 Entered tree grid data from 7/11/07 1600 MRS-16 operations completed for today, gate secured. 1700: COB, no incidents or accidents -----Nothing Follows-----			
VISITORS ON SITE: NONE		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None	
WEATHER CONDITIONS: See Ft Ord weather report		IMPORTANT TELEPHONE CALLS: None	
SHAW PERSONNEL ON SITE: See tailgate			
SIGNATURE: 		DATE: 07/12/07	

Weather Conditions for RTGC1

Current time: July 12, 2007 - 17:03 PDT

Most Recent Observations at July 12, 2007 - 16:51 PDT

	16:51	Max since Midnight	Min since Midnight	24 Hour Max	24 Hour Min
Temperature	68.0° F	68.0 at 13:51	50.0 at 1:51	69.0 at 17:51	50.0 at 1:51
Dew Point	49.7° F	52.6 at 9:51	46.6 at 3:51	52.6 at 9:51	46.6 at 3:51
Relative Humidity	52%	90 at 6:51	52 at 16:51	90 at 6:51	52 at 16:51
Wind Speed	16 mph from W	17 at 15:51	3 at 0:51	18 at 17:51	2 at 22:51
Wind Gust	25 mph	26 at 14:51	5 at 1:51	28 at 17:51	4 at 23:51
Pressure	28.99 in	29.03 at 11:51	28.97 at 3:51	29.03 at 11:51	28.97 at 17:51
Sea Level Pressure	29.50 in	29.54 at 11:51	29.50 at 3:51	29.54 at 11:51	29.48 at 17:51
Altimeter	29.51 in	29.55 at 11:51	29.49 at 3:51	29.55 at 11:51	29.49 at 17:51
Solar Radiation	1067.0 W/m ² m	1351.0 at 13:51	0.0 at 0:51	1351.0 at 13:51	0.0 at 21:51
Fuel Temperature	77.0° F	79.0 at 13:51	48.0 at 3:51	79.0 at 13:51	48.0 at 3:51
10 hr Fuel Moisture	6 gm	15 at 3:51	6 at 16:51	15 at 3:51	6 at 16:51
Battery voltage	12.90 volt	12.90 at 8:51	12.30 at 4:51	12.90 at 17:51	12.30 at 4:51

Precipitation accumulated since midnight: 0.00", in 24 hours: 0.00"



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/12/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: DEMO OPERATIONS, & SCRAP CERTIFICATION AND SITE CLEAN-UP

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Paint, Dust, UXO,

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather, Driving On/Off range, Tree branches

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, Schonstedt, GPS Equipment. EM-61 Gear,

Other: DEMO SAFETY; GLOVES WHEN HANDLING MEC/UXO AND ITEMS THAT HAVE BEEN DEMO'D

ATTENDEES

NAME PRINTED	SIGNATURE
VALERIE LANGSTAFF	<i>Valerie Langstaff</i>
MARK ISABELL	<i>Mark Isabella</i>
TARA VOLPE	<i>Tara Volpe</i>
JEFF STEINWAND	<i>Jeff Steinwand</i>
John Totolano	<i>John Totolano</i>
Sybil Jenkins	<i>Sybil Jenkins</i>

Meeting Conducted by: *B. J. [Signature]*

Supervisor:

Manager:



JOB SAFETY ANALYSIS

DEMOLITION OPERATIONS

Date: 7/12/2007

Job#: 846475

Permit#:

Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16; Former Fort Ord		
Required PPE: Mod "D"	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw Field Office Wind Direction: n/a Eucalyptus to Parker Flats to 8th St to Joe Evacuation Route: Lloyd Way	JSA Prepared by: B. Tincknell Are other crews in area?
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main Gate MRS-16	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Demolition Operations		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Fire		
MSD		
Traffic/Non-essential personnel		
Demolition shot misfire		
Accidental detonation		
Recommended Action or Procedure		Supervisor's Initials
Observe walking area/conditions		
No Demo operations in electrical storms or winds > 15 MPH		
2 ea 10 BC Fire extinguishers on vehicle and NO Smoking material within 100 ft of explosives		
Establish a Frag/Blast radius around each UXO to be disposed of		
Road blocks established, non-essential personnel kept out of Area		
Follow misfire procedures in SOP OE-005 Wait time 60 min		
Initiators and HE kept a minimum of 50 ft apart until needed. With proper storage and transport.		
Crew Name Signatures:		

JOB SAFETY ANALYSIS

Date: 7/12/2007
 Job#: 846075
 Permit#:
 Issued By: B.Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

<p>PERMITS</p> <p>Required _____</p> <p>Cold Work _____</p> <p>Hot Work _____</p> <p>Entry Permit _____</p> <p>All Conditions Met _____</p> <p>Signed Off when Complete _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> BRAC Authorization _____</p>	<p>WELDING</p> <p>Flashburns _____</p> <p>Combustibles _____</p> <p>Spark Containment _____</p> <p>Shields _____</p> <p>Grounding _____</p> <p>Water Hose _____</p> <p>Fire extinguisher _____</p> <p>Fire Blanket _____</p> <p>Fire Watch _____</p> <p>Sewer Covers _____</p> <p>Other _____</p>	<p>HAZARDS (ENVIRONMENTAL)</p> <p>Electrical Shock _____</p> <p>Heat Stress _____</p> <p>Heavy Objects _____</p> <p>Hot/Cold Surf or Mat _____</p> <p>Inadequate Lighting _____</p> <p>Line Breaking _____</p> <p>Noise _____</p> <p>Poor Access/Egress _____</p> <p>Sharp Objects _____</p> <p>Other _____</p> <p><input checked="" type="checkbox"/> UXO _____</p>
<p>PERSONAL PROTECTIVE EQUIPMENT (PPE)</p> <p><input checked="" type="checkbox"/> Type of Gloves _____</p> <p><input checked="" type="checkbox"/> Composition of Gloves _____</p> <p>Special Purpose Gloves _____</p> <p>Tyvek Suit _____</p> <p>Acid Suit/Slicker Suit _____</p> <p>Rubber boots _____</p> <p>Mono Goggles (vented-non-vented) _____</p> <p>Face Shield _____</p> <p>Respirator _____</p> <p>Fresh Air _____</p> <p>Ear Protection _____</p> <p>Safety Harness _____</p> <p>Burning Goggles _____</p> <p>Other _____</p> <p>Coveralls _____</p>	<p>OVERHEAD WORK</p> <p>Barricades _____</p> <p>Signs _____</p> <p>Hole Cover _____</p> <p>Handrail _____</p> <p>Other _____</p>	<p>HAZARDS/CHEMICALS</p> <p>Chemical Burn Skin/Eyes _____</p> <p>Flammable _____</p> <p>Ingestion _____</p> <p>Inhalation _____</p> <p><input checked="" type="checkbox"/> Skin Contamination _____</p> <p>Other _____</p>
<p>TOOLS</p> <p>Current Inspection _____</p> <p>Proper Tools for the Job _____</p> <p>Good Tool Condition _____</p> <p>Qualifications _____</p> <p>Other _____</p>	<p>ELECTRICAL</p> <p>Locked and Tagged Out _____</p> <p>Try Start/Stop Switch _____</p> <p>GFCI Test _____</p> <p>Assured Grounding _____</p> <p>Extension Cord Inspection _____</p> <p>Other _____</p>	<p>HAZARDS/BODY</p> <p><input checked="" type="checkbox"/> Fall potential _____</p> <p>Pinch Points _____</p> <p><input checked="" type="checkbox"/> Slip-Trip Potential _____</p> <p>Other _____</p>
<p>EMERGENCY EQUIPMENT</p> <p><input checked="" type="checkbox"/> Fire Extinguishers _____</p> <p>Safety Shower _____</p> <p><input checked="" type="checkbox"/> Evacuation Route _____</p> <p>Other _____</p>	<p>LIFTING</p> <p>Forklift _____</p> <p>Cherry Picker _____</p> <p>Load Chart _____</p> <p>Angle _____</p> <p>Crane _____</p> <p>Chainfall _____</p> <p>Proper Rigging Practices _____</p> <p>Manual Lifting _____</p> <p>Condition of Equipment _____</p> <p>Operator Certificate _____</p>	<p>OTHER WORK IN AREA</p> <p>Others Working Overhead _____</p> <p>Type of Work Others Doing _____</p> <p>PPE Due to Other Work _____</p> <p>Other _____</p>
<p>ACCESS</p> <p>Scaffold (properly inspected) _____</p> <p>Ladder (Tied Off) _____</p> <p>Manlift _____</p> <p>Personnel Basket (Inspected & Approved) _____</p> <p>Operator training _____</p> <p>Special Provisions _____</p> <p>Other _____</p>	<p>Confined Space</p> <p>Know the Following:</p> <p>* Possible hazards within the confined space</p> <p>* First signs of exposure</p> <p>* How to summons help</p> <p>* How to track personnel</p> <p>* Entering and exiting the confined space</p> <p>* Maintain contact with all entrants by voice or visual</p> <p>* Do not attempt to rescue unless you are a part of a coordinated effort</p> <p>* Remain at entry point assume no duties which take you from there</p>	

SUPERVISOR/FOREMAN RECOMMENDATION:

Form M-11

EXPLOSIVES USAGE RECORD

Team Number: 2 Date: 7/12/07

Team Leader: Mark Isbell Project: MRS 16

EXPLOSIVES ISSUED			
Signature of Team Leader: _____			
Item	Quantity	Lot Number	Checker's Initials
M186 DATA sheet	3 Rolls (150')	DU 1-15	JAT
Lead Line novel	2 Rolls (5000')	08JA07W1	JAT
NOVEL CAPS	14 ea	12DE05W1	JAT
Jet Perforators	4 ea	H 302	JAT
EXPLOSIVES EXPENDED			
Signature of Team Leader: <u>Mark Isbell</u>			
Item	Quantity	Lot Number	Checker's Initials
M186 DATA sheet	3 Rolls (150')	DU 1-15	JAT
Lead Line novel	2 Rolls (5000')	08JA07W1	JAT
NOVEL CAPS	14 ea	12DE05W1	JAT
Jet Perforators	4 ea	H 302	JAT
EXPLOSIVES RETURNED			
Signature of SUXOS: <u>[Signature]</u>			
Item	Quantity	Lot Number	Checker's Initials
Not used			

[Signature]
UXO Supervisor

7/12/07
Date

EXPLOSIVE DEMOLITION OPERATIONS

HOW MANY SHOTS: 3

SIZE AND WEIGHT: 15 < 15 lbs

TIME OF SHOT: 0900 - 1300

LOCATION: MRS 16

DATE: 7/12/07

HOW MANY SHOTS: _____

SIZE AND WEIGHT: _____

TIME OF SHOT: _____

LOCATION: _____

DATE: _____

AT LEAST 30 MINUTES PRIOR TO PLANNED DETONATION:
 LOCATION FOR FIRE TRUCK: MRS 16 gate

CALLED:

			TIME
ENVIRONMENTAL (Lyle Shurtleff)	242-7919 / FAX 393-9188	MSG	0650
PARK RANGER HEADQUARTERS	758-3604		0658
MONTEREY COMMUNICATIONS (non-emergency)	373-1259	MSG	0700
UNIFIED AIR POLLUTION CONTROL OF MONTEREY BAY (ATTN: Ed Kendig)	647-9411 / FAX 647-8501 Ext. 210	MSG	0703
EMERGENCY OPERATIONS CENTER ATTN: RICH SAVKO	242-5784 / FAX 242-7028		0705

MOTOR VEHICLE INSPECTION (TRANSPORTING HAZARDOUS MATERIALS)

(Read Instructions before completing this form.)

This form applies to all vehicles which must be marked or placarded in accordance with Title 49 CFR.

1. GOVERNMENT BILL OF LADING/TRANSPORTATION CONTROL NUMBER

SECTION I - DOCUMENTATION		ORIGIN a.	DESTINATION b.
2. CARRIER/GOVERNMENT ORGANIZATION		Shaw	
3. DATE/TIME OF INSPECTION		7/12/07 0730	
4. LOCATION OF INSPECTION		ESL	
5. OPERATOR(S) NAME(S)		Rirk Busse	
6. OPERATOR(S) LICENSE NUMBER(S)		MO 937841	
7. MEDICAL EXAMINER'S CERTIFICATE*		1/19/08	
8. (X if satisfactory at origin)			9. CVSA DECAL DISPLAYED ON COMMERCIAL EQUIPMENT*
a. MILITARY HAZMAT ENDORSEMENT	<input checked="" type="checkbox"/>	d. ERG OR EQUIVALENT COMMERCIAL:	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
b. VALID LEASE*	<input checked="" type="checkbox"/>	e. DRIVER'S VEHICLE INSPECTION REPORT*	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
c. ROUTE PLAN	<input checked="" type="checkbox"/>	f. COPY OF 49 CFR PART 397	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			b. TRAILER

SECTION II - MECHANICAL INSPECTION
All items shall be checked on empty equipment prior to loading. Items with an asterisk shall be checked on all incoming loaded equipment.

10. TYPE OF VEHICLE(S)				11. VEHICLE NUMBER(S)			
12. PART INSPECTED (X as applicable)	ORIGIN (1)		DESTINATION (2)		COMMENTS (3)		
	SAT	UNSAT	SAT	UNSAT			
a. SPARE ELECTRICAL FUSES	<input checked="" type="checkbox"/>				k. EXHAUST SYSTEM		
b. HORN OPERATIVE	<input checked="" type="checkbox"/>				l. BRAKE SYSTEM*		
c. STEERING SYSTEM	<input checked="" type="checkbox"/>				m. SUSPENSION		
d. WINDSHIELD/WIPERS	<input checked="" type="checkbox"/>				n. COUPLING DEVICES		
e. MIRRORS	<input checked="" type="checkbox"/>				o. CARGO SPACE		
f. WARNING EQUIPMENT	<input checked="" type="checkbox"/>				p. LANDING GEAR*		
g. FIRE EXTINGUISHER*	<input checked="" type="checkbox"/>				q. TIRES, WHEELS, RIMS		
h. ELECTRICAL WIRING	<input checked="" type="checkbox"/>				r. TAILGATE/DOORS*		
i. LIGHTS AND REFLECTORS	<input checked="" type="checkbox"/>				s. TARPULIN*		
j. FUEL SYSTEM*	<input checked="" type="checkbox"/>				t. OTHER (Specify)		
13. INSPECTION RESULTS (X one) ACCEPTED <input checked="" type="checkbox"/>				REJECTED <input type="checkbox"/>			
<i>(If rejected give reason under "Remarks". Equipment will be approved if deficiencies are corrected prior to loading.)</i>							

14. SATELLITE MOTOR SURVEILLANCE SYSTEM: (X one) ACCEPTED REJECTED

15. REMARKS

16. INSPECTOR SIGNATURE (Origin) *Rirk Busse*

17. INSPECTOR SIGNATURE (Destination) *Rirk Busse*

SECTION III - POST LOADING INSPECTION
This section applies to Commercial and Government/Military vehicles. All items will be checked prior to release of loaded equipment and shall be checked on all incoming loaded equipment.

	ORIGIN (1)		DESTINATION (2)		COMMENTS (3)
	SAT	UNSAT	SAT	UNSAT	
18. LOADED IAW APPLICABLE SEGREGATION/COMPATIBILITY TABLE OF 49 CFR	<input checked="" type="checkbox"/>				
19. LOAD PROPERLY SECURED TO PREVENT MOVEMENT	<input checked="" type="checkbox"/>				
20. SEALS APPLIED TO CLOSED VEHICLE; TARPULIN APPLIED ON OPEN EQUIPMENT	<input checked="" type="checkbox"/>				
21. PROPER PLACARDS APPLIED	<input checked="" type="checkbox"/>				
22. SHIPPING PAPERS/DD FORM 836 FOR GOVERNMENT VEHICLE SHIPMENTS	<input checked="" type="checkbox"/>				
23. COPY OF DD FORM 626 FOR DRIVER	<input checked="" type="checkbox"/>				
24. SHIPPED UNDER DOT EXEMPTION 86B	<input checked="" type="checkbox"/>				

25. INSPECTOR SIGNATURE (Origin) *Rirk Busse*

26. DRIVER(S) SIGNATURE (Origin) *Rirk Busse*

27. INSPECTOR SIGNATURE (Destination) *Rirk Busse*

28. DRIVER(S) SIGNATURE (Destination) *Rirk Busse*

DAILY QUALITY CONTROL REPORTDATE: July 13, 2007

DAY

S	M	T	W	THUR	F	S
---	---	---	---	------	----------	---

USACE UXO SAFETY Clinton HuckinsPROJECT Former Fort Ord, Calif. WEATHERDELIVERY ORDER NO. 0016CONTRACT NO. DACW05-96-D-0011PROJECT NO. 846075

Sunny	Clear	Overcast	Rain	Fog
Hi	66	Lo	52	
Still	Moderate	High	W@14mph	
Dry	Moderate	High	52%	

1. Contractor/Subcontractor Personnel and Areas of Responsibility:

Number	Trade	Hours	Employer	Location & Description of Work
1	SUXOS	KEPT	Shaw	Fort Ord, Calif./UXO
6	UXO	BY	Shaw	Fort Ord, Calif./UXO
0	GIS/GPS	THE	Shaw	Fort Ord, Calif./GPS
0	Labor/Operator	PROJ	Shaw	Fort Ord, Calif./Operator
1	UXOS/QC	MGT	Shaw	Fort Ord, Calif./QC
0	Geo Tech		Shaw	Ft Ord, Calif/Geophysics

2. Operating Equipment (Not hand tools):

Equipment	Quantity	Rental Y/N	Total Hours
GPS	5	N	0
PICK-UP	4	Y	25
Radios	7	N	20

3. Work Performed Today: (Indicate location and description of work performed by prime and/or subcontractors. When network analysis is used, identify work by NAS activity number).

MRS-16 Site clean-up4. Control Activities Performed: (Specify feature of work/NAS number and indicate whether P for Preparatory, I for Initial, or F for Follow-Up Phase. For Preparatory Inspections: Identify feature of work and attach completed checklist, list RFIs issued and responses. For Initial Inspections: Identify feature of work and attach completed checklist. For Follow-Up Inspections: List inspection milestones reached (hold/witness points), inspections performed, results of inspection compared to specification requirements, CARs issued/closed, and corrective actions taken.)**NONE**

5. Tests Performed and Test Results: (Identify test requirements by paragraph number in specifications and/or sheet number in plans).

None

6. Material Received: (Note inspection results and storage provided).

3 Enterprise Rental Trucks taken off rent and picked up by vendor.

7. Submittals Reviewed:

Submittal No.	Spec/Plan Reference	By Whom	Action
NONE			

8. Off-site Surveillance Activities, Including Action Taken:

NONE

9. Job Safety: (List items checked results, instructions and corrective actions taken).

See UXOSO FADL

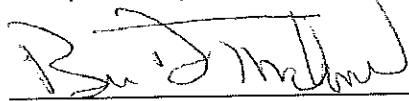
10. Remarks: (Instructions received or given. Conflict(s) in Plans and/or specifications. Delays encountered).

NONE

11. List of Attachments: (List all attachments to this report include dates and reference number where applicable. Attachments are to include copies of inspection checklists, test reports, data reports, and field measurement/calculation sheets.)

SUXOS FADL, dtd 7/13/07, UXOSO FADL dtd 07/3/07, Tailgate safety Meeting dated 07/13/07, (DEMOB Operations and site clean-up), JSA (site clean-up) dtd 07/13/07,

Contractor's Verification: On behalf of Shaw INC., I certify 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, to the best of my knowledge, except as may be noted above.



Bruce D. Tincknell
SHAW-UXOQC Specialist

07/13/07

DATE



L6

DAILY LOG	DATE	07	13	07
	NO.			
	SHEET	1	OF	1

UXO SAFETY/QC DAILY LOG

PROJECT NAME: MRS-16; Fort Ord, CA	PROJECT NO: 846075
FIELD ACTIVITY SUBJECT: UXO Safety and QC Report	
<p>DESCRIPTION OF DAILY ACTIVITIES AND EVENTS;</p> <p>0630: Tailgate; Discussed DEMOLIZATION AND DRIVING; No field work scheduled for today, equipment and vehicle clean-up</p> <p>0700 Completed daily reports</p> <p>0830 Entered data from demo operation onto data base</p> <p>1500: COB, no incidents or accidents</p> <p style="text-align: center;">-----Nothing Follows-----</p>	
VISITORS ON SITE: NONE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: None
WEATHER CONDITIONS: See Ft Ord weather report	IMPORTANT TELEPHONE CALLS: None
SHAW PERSONNEL ON SITE: See tailgate	
SIGNATURE:	DATE: 07/13/07

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	8
Bruce Tincknell	QC/Safety	8
Valerie Langstaff	Team Leader	3
Mark Isabell	Team Leader	3
Jeff Steinwand	UXO Tech II	2
Tara Volpe	UXO Tech II	3
John Sparks	UXO Tech I	2
Josh Jenkins	UXO Tech I	3

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - One UXO Team conducting site remediation and closure tasks

Summary: Some site remediation was conducted and tools, equipment, and vehicles cleaned

UXO recovered: None
 MEC recovered: None
 Seeds found: None

0930 - Field crew secured for the day.
 1530 - 1600 - Daily/weekly admin duties were completed.

Note: All field operations complete on MRS 16. All field personnel have been released for demob. Site management will remain until 17 Jul 2007 for munitions debris shipment to FACT International and finish data base and QC matters

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: Morning in the low 50's. Afternoon in the high 60's.	IMPORTANT TELEPHONE CALLS: None

SIGNATURE: John Tortolano

7/13/2007

page 1 of 1



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 6/13/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS 16 Former Fort Ord, Ca.

Type of Work: DEMOBILIZATION AND SITE CLEAN-UP

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline; sunscreen

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D

Chemical Hazards: Poison OAK, Dust,

Physical Hazards: Slip, Trips and Falls, Traffic, equipment, lifting, adverse weather,

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 831-242-7700

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers,

Other: SAFE DRIVING - HEAVY LIFTING -

ATTENDEES

NAME PRINTED	SIGNATURE
MARK ISABELL	Mark Isbell
TARA VOLPE	Tara Volpe
JEFF STEINWAND	Jeff Steinwand
VALERIE LANGSTAFF	Valerie Langstaff
JOHN SPARKS	John Sparks
Suzanne Sealers	Suzanne Sealers

Meeting Conducted by: [Signature]

Supervisor:

Manager:



JOB SAFETY ANALYSIS

OE SUB-SURFACE CLEARANCE

Date: 7/13/2007
 Job#: 856075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: <p style="text-align: center;">MOD "D"</p>	Safety Access / Location	Supervisor of Work: Jack Tortolano
	Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	JSA Prepared by: B. Tincknell Are other crews in area? YES
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>

Job Task (What are You Doing)	Audit the Job Audit Time:
SITE CLEAN-UP	
DEMOBILIZATION	
Potential Hazards	Supervisor's Comments
Lifting	
Slip, Trip, and Falls	
Cuts and abrasions/ overhanging tree branches	
Poison oak	
Dust	
Recommended Action or Procedure	Supervisor's Initials
Proper lifting technique, weight limit of 60 lbs	
Wear work gloves, watch for bugs - spiders	
Mod "D" PPE, Clean PPE/Work boots with alcohol	
Maintain speed, GO SLOW	

Crew Name Signatures:		
<i>Mark Seall</i>		
<i>T. E. Ry</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



JOB SAFETY ANALYSIS

Date: 7/13/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Skin/Eyes
 - Flammable -Fuels
 - Ingestion
 - Inhalation
 - Skin Contamination Poison Oak
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - GEO Teams
 - PPE Due to Other Work
 - Other
 - 200 FT BETWEEN TEAMS

Confined Space
Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:

FIELD ACTIVITY DAILY LOG

Project Name: Ft. Ord - MRS-16 MEC Removal.	846075
Field Activity: Target Investigations, Anomaly Reacquisition, and Misc. UXO Support.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Jack Tortolano	SUXOS	10.5
Bruce Tincknell	QC/Safety	10
Valerie Langstaff	Team Leader	0
Mark Isabell	Team Leader	0
Jeff Steinwand	UXO Tech II	0
Tara Volpe	UXO Tech II	0
John Sparks	UXO Tech I	0
Josh Jenkins	UXO Tech I	0

Today's Activities:

0630 - Attended Tailgate Safety meeting and operation brief.
 0700 - Spent the day removing munitions debris (seeds not required by USACE) certifying for shipment to FACT International

Summary:

UXO recovered: None
 MEC recovered: None
 Seeds found: None

1530 - 1600 - Daily admin duties were completed.

Note:

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: Morning in the low 50's. Afternoon in the high 60's.	IMPORTANT TELEPHONE CALLS: None

SIGNATURE: John Tortolano

7/15/2007



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 7/17/2007 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: MRS-16 Former Fort Ord, Ca. and Range 36A

Type of Work: MD shipment

Chemicals Used: Technu, Bug Spray, Paint, Diesel Fuel, Gasoline

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: MOD D With Optional Dust Mask

Chemical Hazards: Dust, UXO

Physical Hazards: Slip, Trips and Falls, UXO, Slopes and Terrain, traffic, noise, equipment, lifting, adverse weather

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the advent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: 408/ 625-4900 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, , OFF-road fork lift;

Other: Spotters and personnel working with heavy equipment need to wear reflective vests and hard hats

ATTENDEES

NAME PRINTED	SIGNATURE
John Tortolano	
Vincent Chubb	

Meeting Conducted by:

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Date: 7/17/2007
 Job#: 846075
 Permit#:
 Issued By: B. Tincknell

Location of Job (Unit/Location on Project): MRS 16 Former Fort Ord		
Required PPE: MOD "D"	Safety Access / Location Safe Haven: Shaw main office Wind Direction: Evacuation Route: Follow route maps	Supervisor of Work: Jack Tortolano JSA Prepared by: Bruce Tincknell Are other crews in area? yes
	Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Main gate MRS-16
Job Task (What are You Doing)		Audit the Job Audit Time:
Load out of MD		
Potential Hazards		Supervisor's Comments
Lifting		
Slip, Trip, and Falls		
Cuts and abrasions		
Dust		
Heavy equipment operations		
Driving		
Recommended Action or Procedure		Supervisor's Initials
Observe walking areas		
Proper lifting technique, weight limit of 60 lbs		
Wear work gloves		
Mod "D" PPE		
Stay with UXO Personnel, Do not pick up any objects		
Hard hats and reflective vest when spotting for heavy equipment		
Eye contact with equipment operator		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

Date: 7/17/2007
 Job#: 846075
 Permit#:
 Issued By: B Tincknell

SUPERVISOR/FOREMAN Jack Tortolano

Consider the following and check the items which apply to the job, then review with the work crew.

- PERMITS**
- Required
 - Cold Work
 - Hot Work
 - Entry Permit
 - All Conditions Met
 - Signed Off when Complete
 - Other

- PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Type of Gloves
 - Composition of Gloves
 - Special Purpose Gloves
 - Tyvek Suit
 - Acid Suit/Slicker Suit
 - Rubber boots
 - Mono Goggles (vented-non-vented)
 - Face Shield
 - Respirator
 - Fresh Air
 - Ear Protection
 - Safety Harness
 - Burning Goggles
 - Other
 - Coveralls
 - Reflective vest and hard hats near heavy equipment

- TOOLS**
- Current Inspection
 - Proper Tools for the Job
 - Good Tool Condition
 - Qualifications
 - Other

- EMERGENCY EQUIPMENT**
- Fire Extinguishers
 - Safety Shower
 - Evacuation Route
 - Other

- ACCESS**
- Scaffold (properly inspected)
 - Ladder (Tied Off)
 - Manliest
 - Personnel Basket (Inspected & Approved)
 - Operator training
 - Special Provisions
 - Other

- WELDING**
- Flashburns
 - Combustibles
 - Spark Containment
 - Shields
 - Grounding
 - Water Hose
 - Fire extinguisher
 - Fire Blanket
 - Fire Watch
 - Sewer Covers
 - Other

- OVERHEAD WORK**
- Barricades
 - Signs
 - Hole Cover
 - Handrail
 - Other

- ELECTRICAL**
- Locked and Tagged Out
 - Try Start/Stop Switch
 - GFCI Test
 - Assured Grounding
 - Extension Cord Inspection
 - Other

- LIFTING**
- Forklift
 - Cherry Picker
 - Load Chart
 - Angle
 - Crane
 - Chainfall
 - Proper Rigging Practices
 - Manual Lifting
 - Condition of Equipment
 - Operator Certificate

- HAZARDS (ENVIRONMENTAL)**
- Electrical Shock
 - Heat Stress
 - Heavy Objects
 - Hot/Cold Surf or Mat
 - Inadequate Lighting
 - Line Breaking
 - Noise
 - Poor Access/Egress
 - Sharp Objects
 - Other Cold stress
 - UXO

- HAZARDS/CHEMICALS**
- Chemical Burn Shin/Eyes
 - Flammable
 - Ingestion
 - Inhalation
 - Skin Contamination
 - Other

- HAZARDS/BODY**
- Fall potential
 - Pinch Points
 - Slip-Trip Potential
 - Other

- OTHER WORK IN AREA**
- Others Working Overhead
 - Type of Work Others Doing
 - PPE Due to Other Work
 - Other

Confined Space
 Know the Following:

- * Possible hazards within the confined space
- * First signs of exposure
- * How to summons help
- * How to track personnel
- * Entering and exiting the confined space
- * Maintain contact with all entrants by voice or visual
- * Do not attempt to rescue unless you are a part of a coordinated effort
- * Remain at entry point assume no duties which take you from there

SUPERVISOR/FOREMAN RECOMMENDATION:



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 47 F MAX. 65 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Shaw performed Geophysical Proveout (GPO) resurvey at Badger Flats with new EM61s. Following completion of GPO resurvey, reacquired DGM anomalies at MRS-16. Personnel on site:

- Michael Lightner, Geophysicist
- Sally Lamb, Geophysicist
- Steve Bennett, Field Laborer
- Vincent Chubbs, Field Laborer
- Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		

TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Tuesday, March 11, 2008
Report: 3/11/08

Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

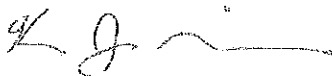
Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.



Task Manager

Attachments:
H&S FADL
Geo FADL
Tailgate H&S log



FIELD ACTIVITY DAILY LOG

Daily Log	Date	3	11	2008
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA	Project Number: 783751
FIELD ACTIVITY SUBJECT: MRS 16, OUCTP Gen H&S	Project Number: 846075

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

- 6:15 Prepare for operation at Badger flats, GPO as per Kevin after yesterday's Prep Meeting. Mike and Sally on site doing same.
 - 6:55 Depart office, Radio check
 - 7:15 Arrive at Badger Flats. Notified COE Huck. Tailgate JSA's, Site specific safety brief. Begin operation, GPO.
 - 7:30 COE Huck on site.
 - 8:05 COE off site, continue GPO with Sally and Mike
 - 10:05 Complete GPO
 - 10:20 Depart site GPO complete
 - 10:30 Arrive at office. Paperwork. Supply wrist supports to Sally. She said the EM-61 is hard on the wrists
Meet with Kevin and brief him on Op.
 - 11:15 Vince and Mike out to MRS 16. See Mike's FADL for info.
 - 13:00 Out to OUCTP with labels for purge water containers. Label Hydrogen Peroxide and Lactate purge water containers.
 - 14:00 Over to MRS 16 to take photos of reacquisition operation. Site check.
 - 15:30 Back at office transfer photos to MRS 16 2008 folder. Paper work.
 - 16:40 GEO crew clear MRS 16 Unloading equip.
 - 17:00 COB
- NOTHING FOLLOWS

VISITORS ON SITE: COE	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
--------------------------	--

WEATHER Ptly Foggy 38-74 degrees	IMPORTANT TELEPHONE CALLS:
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SHAW PERSONNEL ON SITE:	See Tailgate
-------------------------	--------------

SIGNATURE: Val Valdez	DATE: 03/11/08
-----------------------	----------------

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: target reacquisition

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

6:10a arrive on site. Prepare for surveys at Badger Flats, GPO at request of Kevin et al - determined during prep meeting.

6:55a depart for GPO site; Radio check

7:15a arrive at Badger Flats for GPO. Tailgate and safety meeting with V. Valdez. Equipment set-up and warm-up

7:30a begin surveys over GPO - 100 x 50 ft eastern sections of known plot, k1 for both EM61s

8:00a call from Marty Miele to discuss GPO operation at badger flats

8:15a continue surveys

10:00a complete GPO

10:20a depart badger flats

10:30a arrive office. Sally begins processing of GPO data
Mike prepares for reaq on MRS-16 on fence grids

11:15a Mike and Vince head out to MRS-16

1:15p Sally finishes GPO processing; Steve and Sally head to

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
COE	MRS 16
	SPECIAL ORDERS AND IMPORTANT DECISIONS:
	perform surveys over known GPO plot for both EM61's in morning

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
pleasant; sunny	

SHAW PERSONNEL ON SITE: S. Lamb, M. Lightner, V. Cubbs, S. Bennett

SIGNATURE:  DATE: 3/11/08

Daily Log	Date:	3	11	08
	No.			
	Sheet	2	of	2

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *target reaq*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS

14:00 - HS VAG on site
16:15 - post-calibrations for both Geo teams
16:30 GED crews clear MRS-16
16:45 - unload geophysical equipment; upload pre/post calibration data

17:45 - leave site.

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: _____ IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: *S. Lamb, M. Lightner, V. Chubb, S. Bennett*

SIGNATURE: *[Signature]* DATE: *3/11/08*



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/11/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner	
Vincent Chubb	
	Sally Lamb
Steven Bennett	

Meeting Conducted by: Mike Lightner

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Driving

Date: 3/11/08
 5/14/2006
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location Safe Haven: Wind Direction: Evacuation Route: Assembly Point:	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		JTD
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		



Shaw™ Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Geophysical MRS 16

Date: 3/11/08
 Job#: 846075
 Permit#: _____
 Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: <i>Truck</i> Wind Direction: <i>NE</i> Evacuation Route: See Map Assembly Point: At Gate on Eucalyptus	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation		
1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 45 F MAX. 63 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Reacquired DGM anomalies at MRS-16. Personnel on site:

Michael Lightner, Geophysicist

Sally Lamb, Geophysicist

Steve Bennett, Field Laborer

Vincent Chubbs, Field Laborer

Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		



Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Task Manager

Attachments:
H&S FADL
Geo FADL
Tailgate H&S log

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: target reacquisition

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

6:25 arrive site, prepare for target reacquisition at MRS-16
 7:00 depart for MRS-16; radio check
 7:10 arrive MRS-16 calibration area, warm-up and pre-calibrations for EM61s
 7:20 COE truck on site
 7:30 teams head to respective grids for reaq
 13:00 Sally and Steve head in to retrieve more target data uploaded to PDA; coincide with lunch
 13:30 - Sally, Steve head back to MRS-16
 13:45 - COE truck on site
 14:15 - COE truck off site
 14:30 - Kevin and Tom on site
 14:45 - Kevin and Tom off site
 16:15 - post-calibrations for GEO teams
 16:25 - GEO ~~EM~~ teams clear MRS-16
 16:45 - unload geophysical equipment; upload calibration data; obtain FADL sheets from Kevin
 17:05 - leave site

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
COE	SPECIAL ORDERS AND IMPORTANT DECISIONS:
Kevin PM, Tom	

WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
pleasant, sunny	

SHAW PERSONNEL ON SITE: S. Lamb, M. Lightner, V. Chubb, S. Bennett

SIGNATURE: _____ DATE: 3/12/08

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 9/12/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

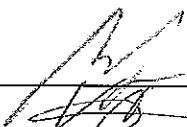
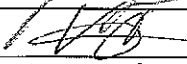
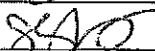
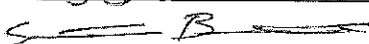
Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner	
Vincent Chubb	
Sally Lamb	
Steven Bennett	

Meeting Conducted by: Mike Lightner

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

3/12/08
~~5/11/2006~~

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: Wind Direction: Evacuation Route:	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Geophysical MRS 16

Date:

3/12/08

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: <u>TRUCK</u> Wind Direction: <u>NE</u> Evacuation Route: See Map	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: At Gate on Eucalyptus	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:	 	



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 43 F MAX. 65 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Reacquired DGM anomalies at MRS-16. Personnel on site:

- Michael Lightner, Geophysicist
- Sally Lamb, Geophysicist
- Steve Bennett, Field Laborer
- Vincent Chubbs, Field Laborer
- Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		



Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Thursday, March 13, 2008
Report: 3/13/08

Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Task Manager

Attachments:
Geo FADL
Tailgate H&S log

Daily Log	Date:	3	13	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS, *target reacquisition*

6:30 arrive site; prepare for target reacquisition at MRS-16

7:00 depart for MRS-16; radio check for both teams

7:15 arrive calibration area to warm-up and perform pre-calibrations for both EM61's

7:30 - Teams head out to respective grids

12:00 - Lunch - Sally + Mike ~~retest~~ retest Leica systems against each other. Work fine

12:30 - Resume reaq surveys

14:00 - HS Val on site

14:30 - HS val off site

15:00 - COE truck on site

15:30 - COE off site

16:10 - Head to calibration area for post-calibrations

16:25 - GEO crews clear MRS-16

16:35 - unload geophysical equipment, upload calibration data. sync PDA's

17:20 - leave site

VISITORS ON SITE: *COE*
H/S Shaw

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: *fog, sprinkling morning*
pleasant sunny afternoon

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: *S. Lamb, M. Lightner, V. Chubbbs, S. Bennett*

SIGNATURE: *[Signature]* DATE: *3/13/08*



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/13/98 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner	
Vincent Chubb	
Steven Bennett	
Sally Lamb	

Meeting Conducted by: Mike Lightner

Supervisor: _____ Manager: _____

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Geophysical MRS 16

Date:

3/13/08

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven:	JSA Prepared by: Valdez Are other crews in area?
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Wind Direction: Evacuation Route: See Map	
	Assembly Point: At Gate on Eucalyptus	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

L19
20/13/08
5/14/2008

Date:

Job#:

Permit#:

Issued By:

846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: Wind Direction: Evacuation Route:	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards: large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Friday, March 14, 2008
Report: 3/14/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 43 F MAX. 65 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Reacquired DGM anomalies at MRS-16. Personnel on site:

Michael Lightner, Geophysicist
Sally Lamb, Geophysicist
Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		

Materials Received:



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Friday, March 14, 2008
Report: 3/14/08

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

A handwritten signature in black ink, appearing to read "K. J. ...", is written over a horizontal line.

Task Manager

Attachments:
Geo FADL
Tailgate H&S log

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: target reacquisition

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

6:30 arrive site; prepare for target reacquisition; load truck. Spoke with H/S Val re: MRS-16 clearance

7:00 gas fill-up

7:30 arrive MRS-16 calibration area; pre-calibrations for EM61; warm-up EM61

11:30 Lunch

12:00- Resume reaq

13:45 - Finish 2 grids with reaq; load equipment and head to calibration area

14:00 - post-calibrations

14:15 - clear MRS-16 - contact H/S Val re: leaving site.

14:25 - unload equipment; Speak with Kevin and Tom regarding site status and real-time survey / ~~at~~ fill-in flagging preparation

14:45 - upload / calibration data; sync PDA, check emails etc.

15:20 - leave site

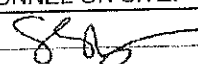
VISITORS ON SITE: Kevin PM

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: sunny, pleasant

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: S. Lamb, M. Lightner

SIGNATURE:  DATE: 3/14/08



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/14/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED

SIGNATURE

Sally Lamb
Mike Lighter

Meeting Conducted by: Mike Lighter

Supervisor: _____ Manager: _____

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Geophysical MRS 16

Date:

3/14/08

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven:	JSA Prepared by: Valdez Are other crews in area?
	Wind Direction: Evacuation Route: See Map	
<u>Pre-Job Preparation</u> 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: At Gate on Eucalyptus	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

3/14/08
5/11/2006

Date:

Job#:

Permit#:

Issued By:

846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work:
	Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
		Supervisor's Comments
Potential Hazards		
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Monday, March 17, 2008
Report: 3/17/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 41 F MAX. 63 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Reacquired DGM anomalies at MRS-16. Personnel on site:

Michael Lightner, Geophysicist

Colin Chang, Geophysicist

Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Monday, March 17, 2008
Report: 3/17/08

Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Task Manager

Attachments:
Geo FADL
Tailgate H&S log

Daily Log	Date:	3	17	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Geophysical target reacquisation*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 Arrive on site, start gathering equipment. Met geo, Colin Chang, on site
 0700 Leave for MRS-16
 0710 Arrive MRS-16, start EM-fl, give tailgate safety
 0730 Calibrate EM-fls
 0800 Start reacquiring targets - Huck on site
 0830 Huck off site
 0900 Kevin on site to deliver target list of First Tee to Colin
 0915 Colin leaves MRS-16 for First Tee to reacq targets
 1200 Colin back on MRS-16
 1215 Lunch
 1245 Back to reacq'ing
 1530 Huck on site
 1545 Huck off site; finished w/targets for today, go to calibrate
 1615 Back to office to unload equip, download data
~~1645~~
 1700 Done for the day

VISITORS ON SITE: *Huck, Kevin* CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: *Colin pulled off MRS-16 to reacq at First Tee*

WEATHER CONDITIONS: *Sunny* IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: *M. Lightner, C. Chang, V. Charles, S. Bennett*

SIGNATURE: *[Signature]* DATE: *3/17/08*



JOB SAFETY ANALYSIS

Geophysical MRS 16

Date: 3/17/08
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Safe Haven: Wind Direction: Evacuation Route: See Map Assembly Point: At Gate on Eucalyptus	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:	 	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/17/09 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED

SIGNATURE

Mike Lightner	
Celia Chang	
Vincent Chubb's	
Steven Bennett	

Meeting Conducted by: Mike Lightner

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Driving

Date: ^{3/17/08}~~5/11/2008~~
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: Wind Direction: Evacuation Route:	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		JTB
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Tuesday, March 18, 2008
Report: 3/18/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 41 F MAX. 63 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Reacquired DGM anomalies at MRS-16. Operation completed at 1325. Set up Leicas for delineation of Real Time EM61 areas. Personnel on site:

Michael Lightner, Geophysicist

Colin Chang, Geophysicist

Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.		To be resolved once UXO Field crews arrive.	



Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Task Manager

Attachments:

Geo FADL
Tailgate H&S log

Daily Log	Date:	3	18	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075


FIELD ACTIVITY SUBJECT: Geophysical Target Reacquisition

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load up gear
 0730 Communication via e-mail w/ Linda Hughes about obtaining data to map real-time EM-61 areas
 0730 Leave for MRS-16
 0745 Start EM-61 warm-up, give tailgate safety
 0800 Calibrate EM-61
 0810 Start reeq
 1200 Lunch
 1215 Back to reeq
~~1250~~
 1325 Done w/ reeq, go to calibrate EM-61
 1340 Leave MRS-16 for office
 1350 Back to unload equip. & download data
 1430 Talking w/ Kevin, Eric, Linda about real-time perimeters
 1600 Finished figuring out real-time. Colin leaves for the day. I'm staying to do expenses
 1630 Going home

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Foggy, then sunny

SHAW PERSONNEL ON SITE: M. Lightner, C. Chang
 SIGNATURE:  DATE: 3/18/08



TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 3/19/08 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca.
 Type of Work: Geophysics for MRS 16
 Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner Colin Chang	

Meeting Conducted by: Mike Lightner
 Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

3/18/08
1511/2006

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: <i>Truck</i> Wind Direction: <i>NE</i> Evacuation Route: <i>SRR Map</i>	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: <i>Shaw office</i>	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	<i>[Signature]</i> <i>[Signature]</i>	



Shaw™ Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Geophysical MRS 16

Date:

3/18/09

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Safe Haven: <i>Truck</i> Wind Direction: <i>NE</i> Evacuation Route: See Map Assembly Point: At Gate on Eucalyptus	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		
<i>[Handwritten Signature]</i>		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Wednesday, March 19, 2008
Report: 3/19/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 42 F MAX. 66 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Delineation of Real Time EM61 areas with flags. Personnel on site:

Michael Lightner, Geophysicist
Colin Chang, Geophysicist
Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Wednesday, March 19, 2008
Report: 3/19/08

Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Task Manager

Attachments:
Geo FADL
Tailgate H&S log

Daily Log	Date:	3	19	08
	No.			
	Sheet	1	Of	

PROJECT NAME: FORT ORD, CA Project Number: 846075

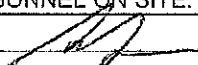
FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site for conference call w/ Marty & Kevin
 0700 Can call over, preparing data for flagging real-time boundaries
 0800 Go to gather ~~equip~~ GPS equip. & go to MRS-16
 0830 Arrive @ MRS-16 - start flagging
 1100 Go to office to talk to Kevin & Eric, and pick up more flags that just arrived
 1130 Head back to MRS-16
 1200 Lunch
 1230 Back to flagging
 1550 Done flagging for the day. Load up, head back to office
 1600 Back at office, will unload equipment, organize data for tomorrow
 1630 Leave for the day

VISITORS ON SITE: Kevin, Eric CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Sunny IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: M. Lightfoot, C. Chang
 SIGNATURE:  DATE: 3/19/08



JOB SAFETY ANALYSIS

Geophysical MRS 16

Date: 3/19/08
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Wind Direction: Evacuation Route: See Map	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: At Gate on Eucalyptus	
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/19/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner Colin Chang	

Meeting Conducted by: Mike Lightner

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

3/11/08
5/11/2006

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: <i>Truck</i> Wind Direction: <i>NE</i> Evacuation Route: <i>See Map</i> Assembly Point: <i>Eucalyptus Gate</i>	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g., Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	<i>[Signature]</i>	



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 41 F MAX. 64 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Delineation of Real Time EM61 areas with flags. Personnel on site:

Michael Lightner, Geophysicist (5 hrs)

Colin Chang, Geophysicist (5 hrs)

Val Valdez, Health and Safety

Test or control activities:

Follow up inspections were performed for all activities.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	To be resolved once UXO Field crews arrive.		



Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted of all work sites and no corrections were noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

None.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Task Manager

Attachments:

Geo FADL
Tailgate H&S log

Daily Log	Date:	3	20	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to prep data for flagging remaining real-time areas
 0730 Go to gather equip. + head to MRS-16
 0800 Arrive @ MRS-16, start flagging
 1030 Done flagging, back to office
 1120 Equip. put away, work on some expense reports, then leave for the day
 1130 Going home for the day

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny

SHAW PERSONNEL ON SITE: Mr. Lightfoot, C. Kwang

SIGNATURE:  DATE: 3-20-08



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

3/20/08
5/14/2006

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: <i>Truck</i> Wind Direction: <i>NE</i> Evacuation Route: <i>see map</i> Assembly Point: <i>Eucalyptus Gate</i>	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g., Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	<i>[Signature]</i>	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/20/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED

SIGNATURE

<u>Mike Lightner</u>	<u>[Signature]</u>
<u>Colin Chang</u>	

Meeting Conducted by: Mike Lightner

Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Geophysical MRS 16

Date: 3/20/08
 Job#: 846075
 Permit#: _____
 Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: <i>Truck</i> Wind Direction: <i>NE</i> Evacuation Route: <i>NE</i> See Map Assembly Point: At Gate on Eucalyptus	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: ~~Thursday~~ Tuesday, March 25, 2008
Report: 3/25/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 41 F MAX. 68 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (10)

Michael Lightner, Geophysicist (10 hrs)

Colin Chang, Geophysicist (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Hanson, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kancker, UXO Tech I (10)

Test or control activities:

Preparatory Phase Inspection meeting conducted. Plans of action to continue field operations were resolved. Tools and equipment are serviceable and adequate.

Initial Phase Inspection was performed for implementing Field Work Variance TII-021;

DGM digs and PDA field data entry and real time operations with EM-61.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Thursday, March 25, 2008
Report: 3/25/08

Materials Received:

None.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted on equipment and work work site and no corrections were noted.

Adequate protections for poison oak are in place and being used.

Safe separation distance between teams is adequate for number of personnel on site.

Initial UXO brief and site walk.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Charlie Hutchison
UXOQC/SO

Attachments:

2- inspection heck lists

Tailgate, JSA'

3 Field daily activity logs

Field Work Variance TII-024



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 3/25/08 Time: 06:30 - 10:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca.
 Type of Work: UXO Operations MRS 16
 Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph, INITIAL UXO BRIEF

ATTENDEES

NAME PRINTED	SIGNATURE
<i>Charlie Hutchinson</i>	<i>[Signature]</i>
JEFF STEINWAND	<i>[Signature]</i>
<i>John A Kander</i>	<i>[Signature]</i>
Tim MATRISEN	<i>[Signature]</i>
<i>Tim Hanson</i>	<i>[Signature]</i>
<i>Colin Chang</i>	<i>[Signature]</i>
<i>Mike Lightner</i>	<i>[Signature]</i>

Meeting Conducted by: V. Valdez
 Supervisor: _____ Manager: _____



JOB SAFETY ANALYSIS

Driving

Date: 3/25/08 ^{L19}
 Job#: 846075
 Permit#: 54412006
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: <u>Waldez</u>
	Safe Haven: <u>gate</u> Wind Direction: <u>from west</u> Evacuation Route:	JSA Prepared by: <u>James Truman</u> Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: <u>office</u>	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	<u>[Signature]</u>	<u>[Signature]</u>
<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>



Shaw Environmental, Inc.

PREPARATORY INSPECTION OUTLINE (PART I)

TERC II - K.2

Contract No.: DACW 05-96-D-0011
Task Order No. 0016
Fort Ord, California

Date: 3/25/08

Title and No. of Technical Section: Final Work Plan, MRS-16 Munitions and Explosives of Concern Removal

Former Fort Ord, California

Section 2.0 Technical Management Plan

FWV 024

Reference Contract Drawings: GridOpsPlanned 2008 03 05 WithTargets

A. Planned Attendants:

Table with 3 columns: Name, Position, Company. Lists 15 attendees including Maynardo Aala, Lyle Shurtleff, Clinton Huckins, etc.

B. Submittals required to begin work:

Table with 3 columns: Item, Submittal No., Action Code. Lists 5 submittals including Final WP MRS-16 MEC Removal, SSHP, Associated Activity Hazard Analysis, and FWV 024.

I hereby certify, that to the best of my knowledge and belief, that the above required materials delivered to the job site are the same as those submitted and approved.

Contractor Quality Control Systems Manager



Shaw Environmental, Inc.

(continued):

PREPARATORY INSPECTION OUTLINE
(PART I)

TERC II - K.2

Contract No.: DACW 05-96-D-0011
Task Order No. 0016
Fort Ord, California

Date: 3/25/08

C. Equipment to be used in executing work:

- 1) Leica GPS Units
- 2) EM61s
- 3) Pickup trucks
- 4) Schonstedts
- 5) Shovels

D. Work areas examined to ascertain that all preliminary work has been completed: Yes

E. Methods and procedures for performing Quality Control, including specific testing requirements:
Three-phase inspections, as required.
Yes

The above methods and procedures have been identified from the project plans and will be performed as specified for the Definable Feature of Work.

Contractor Quality Control Systems Manager

Form QC-4

INITIAL PHASE INSPECTION CHECK LIST

Contract No.: DACW 05-96-D-0011
Task Order No. 016
Fort Ord, California

TERC II - K.3
Date: 3/25/08

Title and No. of Technical Section: Field Work Variance T11-024, MRS-16

Description and Location of Work Inspected: MRS-16

Reference Contract Drawings: WorkPlan, MRS-16 MEC Removal

A. Key Personnel Present:

	<u>Name</u>	<u>Position</u>	<u>Company</u>
1)	<u>Vai Valdez</u>	<u>Tranleader, HSD</u>	<u>SHAW</u>
2)	<u>Tim Matheson</u>	<u>SURUS</u>	<u>SHAW</u>
3)	<u>MIKE Lighter</u>	<u>Geophysicist</u>	<u>SHAW</u>
4)	<u>C. HUTCHINSON</u>	<u>BESS</u>	<u>USACE</u>

B. Materials being used are in strict compliance with the contract plans and specifications: Yes No

If not, explain: _____

C. Procedures and/or work methods witnessed are in strict compliance with the contract specifications: Yes No

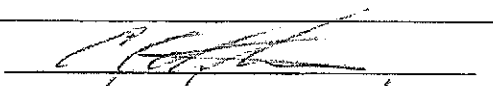
If not, explain: _____

D. Workmanship is acceptable: Yes No

State where improvement is needed: PDA data entry for hot rocks
or soil could be streamlined!

E. Workmanship is free of safety violations: Yes No

If no, corrective action taken: _____


Contractor Quality Control Representative
Charlie Hutchinson

Daily Log	Date:	3	25	08	F1
	No.				
	Sheet	or			

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equipment
 0700 Begin meeting w/ UXO people, Kevin, Huck, Peter
 0915 Gather last minutes supplies while Linda gets PDA's ready
 1000 Leave for MRS-16
 1010 Start EM-61 warmup
 1030 Calibrate EM-61's
 1045 Tailgate safety, then go to grids to start working
 1130 Start digging after quick lunch
 1645 Calibrate EM-61's
 1700 Back to office to unload & dump data
 1730 Leave for day

VISITORS ON SITE: T. Mathison, C. Hutchinson, Huck
 CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Sunny
 IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: M. Lightner, C. Chung, J. Steinwand, V. Valdez, J. Caniver, T. Herron

SIGNATURE: *[Signature]* DATE: 3-25-08



FIELD ACTIVITY DAILY LOG

K1

Daily Log	Date:	3	25	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Prep Meeting N&M Target Digs*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 Prep Meeting; UXO and Geo crews attended
1030 Tailgate meeting, initial UXO brief,
Teams working in separate grids
1130 Liaison - fire dept -
1200 Office - review work plans and submittals
1600 Visit trans; O&S onsite, no items of
concern sat; photos reviewed MRS 16
Habitat check / ctf with crews
1700 done to the day

[Large diagonal scribble across the page]

VISITORS ON SITE: *C. Hutchins* CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: *Sunny, Afternoon fog* IMPORTANT TELEPHONE CALLS: *NONE*

SHAW PERSONNEL ON SITE: *UXO and Geo Crew, SUXOS, UXOQC/50*
 SIGNATURE: *[Signature]* DATE: *3/25/08*
UXOQC

FIELD WORK VARIANCE

Project Name/Number	Fort Ord / 846075	CTO/WAD	CTO 16 / WAD 06
Applicable Document:	Final Work Plan, MRS-16	Date:	03/06/08
Munitions and Explosives of Concern Removal, Former Fort Ord, California, August 2006, Revision 1			

Problem Description:

MRS-16 MEC Removal work was not completed due to insufficient funding prior to completion of all work. Additional funding has been secured to complete work.

Recommended solution:

Intent of work is to remove fencing from the site. This work does not include the saturated area in the western portion of the site. Complete work inside and at fenceline as detailed below:

- 1) Complete reacquisition and excavation of anomalies resulting from Digital Geophysical Mapping (DGM) performed previously.
- 2) Investigate latrine and trash pit delineated during previous work at the site.
- 3) Conduct EM61 real time work in areas where DGM is not feasible to include areas with significant tree cover and site fenceline once fence is removed.
- 4) Conduct "mag and dig" operations using Schonstedt GA52-C/x magnetometers in areas where EM61 real time work is not feasible due to terrain conditions and proximity to obstructions (tree trunks, stones, mounds, etc.).
- 5) Remove fence around the site at an appropriate time. Current intent is to leave fencing in place until removal of fencing is required to complete work at the site.

Some areas at the site have significant populations of Sand Gilia and Monterey Spineflower which preclude work at this time. These areas are currently being delineated and will be addressed in June 2008 when impact to these populations is reduced.

Impact on present and completed work:

Will allow completion of MEC Removal work inside and along MRS-16 fenceline.

Requested by: Kevin Siemann

Recommended revisions to the plan:

A total of 1445 DGM anomalies will be reacquired and subsequently excavated if reacquisition is successful. Two reacquisition teams consisting of one local field laborer and one geophysicist each will reacquire the anomalies. Production goals for reacquisition are 100 reacquired anomalies per day per team. Subsequent to the reacquisition phase of the project, two excavation/EM61 real time teams will excavate anomalies and perform EM61 real time operations. Production goals for excavation are 75 excavated anomalies per day per team. This goal is based on the assumption that the majority of reacquired anomalies will require only one dig. Excavation/EM61 real time teams will consist of the following personnel on each team: one geophysicist, one UXO Tech III, and one UXO Tech I or II. Production goals for EM61 real time is completion of one grid (area) per day per team.

Data collection for DGM anomaly excavation and EM61 real time work will be different as defined below.

For DGM targets that are reacquired and dug, all standard data fields will be collected for every dig. This will include item length, diameter, metal type (ferrous vs. non-ferrous) as well as estimated thickness from each dig (measurements are visual estimates). For the previous DGM grids, dimensions and weight were collected only for suspected MEC. This change was requested by the USACE geophysicist, as discussed in a team conference call 2/14/08.

For Real Time EM61 grids/areas, a record will be entered into PDAs that will record the following items by grid:

Grid
Team

Number of Digs
Total lbs of Munitions Debris
Total lbs of Other Debris
Grid Op Complete (Y/N)
Date

Additionally, for EM61 real time grids/areas, an "item" record will be created *only* for MEC or QA Seed items that are found. This will include all of the standard data fields, including coordinates (or offsets), length, diameter and weight.

Every excavation, either resulting from DGM or EM61 real time work, will be QC'd following excavation using the EM61. If QC check results in an EM61 reading below 14 mV, excavation will be considered complete. If QC check results in an EM61 reading at or above 14 mV, subsequent excavation will occur. This process will continue until QC check of excavation results in an EM61 reading below 14 mV.

Subsequent to completion of subsurface work at the site, a final QC visual inspection of the site will be performed prior to demobilization.

Specific individual grids and actions required are included on the attached spreadsheet.

Clarification Minor Change Major Change

Affects Budget Yes X No
Affects Schedule Yes X No

Signature [Signature]
Technical
Reviewer

State Approvals:

Signature [Signature] Date 3/6/08

Signature UXOQCS Date

Project Manager
Peter Kelsall
Digitally signed by Peter Kelsall
DN: cn = Peter Kelsall, c =
US, o = Shaw E&I
Date: 2008.03.06 13:20:32 -
07'00'

USACE Approval: If Major Change:

Signature [Signature] Date 3/6/08
OE Safety Specialist

Signature [Signature] Date 3/6/08
USACE COR or TM



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Wednesday, March 26, 2008
Report: 3/26/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 50 F MAX. 61 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Test or control activities:

Follow on Inspection of DGM digs and EM61 QC. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	

TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Wednesday, March 26, 2008
Report: 3/26/08

Materials Received:

Hoppers (bins) and locks for securing clearance MD range debris are serviceable.

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Per OESS suggestion wheel chocks are in place for port-a-pot trailer.

Adequate protections for poison oak are in place and being used.

Safe separation distance between teams is adequate for number of personnel on site.

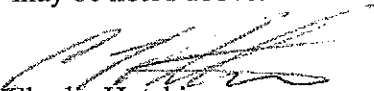
SUXOS conducted a Tier 2 Leadership Safety Assessment. No problems noted.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.



Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs
- 1 Grid operations summary



Follow-up Quality Control Inspection Checklist

Report No. 01
Date: 3/26/08

Feature of Work:	<u>Hand Excavation: DGM Targets and EM61 QC</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No.	<u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions) <i>implement TII-024</i>	X		
12. Personnel Present: <i>Mathisen, UXD & Geo Crews</i>			
13. Government Representative: Clinton Huckins			

Remarks: *Teams are at stop work (digging, handling items) for passers by and visitors per exclusion zone. SAT Portapot has checks on trailer wheel.*

Inspected By: Charlie Hutchison Date: 3/26/08
SHAW UXOQC/SO

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:
0630 - Attended Safety Tailgate Meeting and operation brief.
Approx. 0700 - At work site MRS-16. Continued to investigate targets.
1150 - Inspected several soil mounds location on the north side of the work site near Parker Flats Road. These mounds have numerous targets that need to be investigated and cleared, but the UXO Team is having problems clearing each target due encountering a constant mV reading of 30 or higher on the EM-61. It appears that these mounds may contain a large amount of hot rocks mixed in with MD. It was determined that mechanical equipment will be used to remove the soil from around each target location identified in the mounds and spread the soil out in a 2 to 3 inch layer in order to reduce the magnetic density of the materials in the soil. The soil will then be visually inspected for MEC/MD, and the target location and spoils will be checked with the EM-61 to ensure the target location is clear.
1500 - Conducted a site specific Tier 2 Leadership Safety Assessment Report. No problems encountered.
1645 - Secured MD and cultural debris that was collected throughout the day.
1700 - Secured field operations.

VISITORS ON SITE: Approx. 1500 - peter Kelsall, Kevin Siemann, and two USACE representatives on site for an initial site assessment.	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: nice all day.	IMPORTANT TELEPHONE CALLS:

Daily Log	Date:	3	26	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Excavation AL

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 on site - go to load equip. + head to MRS-16

0700 Begin EM-61 warmup, do tailgate safety

0715 Calibrate EM-61's, WHO's start digging

0735 Start QC'ing holes

0945 Break

1000 Back to work

1120 Lunch

1150 Back to work

1505 Afternoon break, Corps reps on site

1520 Back to work

1610 Leave to calibrate EM-61's

1635 Leave MRS-16 to unload equip. + download data

1715 Leave for the day

VISITORS ON SITE: Jim, Huck, Charlie, CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
Corps reps SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Sunny IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: M. Lightner, C. Chang

SIGNATURE:  DATE: 3-26-08



FIELD ACTIVITY DAILY LOG

K1

Daily Log	Date:	3	26	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Admin, Safety Council, Mec Removal visit

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 Tailgate meeting
 0700 observed GAS 2 sat test plot
 0715 Admin, BESS suggested using chocks on trailer -
 1130 Safety Council meeting
 1200 Learning about database - SHAW-MEC
 1430 Onsite, observed team procedures, checked mounds and hot rock for delays, work on PPA for hot rock/soil entries is cumbersome
 1500 visitors, break for crew activities, discussed hot rocks, showed effect effect on magnetometers -
 1515 crews at work again, I'm helping Harren's team with pinpointing anomalies -
 1630 placed wheel chocks on portapot trailer, observed scrap sort, bin and lock procedures
 1700 done for the day

[Signature] 3/26/08

VISITORS ON SITE: BRAC-Chieko Nguyen CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER
 USACE-Cary Stiebel SPECIAL ORDERS AND IMPORTANT DECISIONS: Hot rock entries into PDA resolved

WEATHER CONDITIONS: sunny, windy IMPORTANT TELEPHONE CALLS: none

SHAW PERSONNEL ON SITE: See tailgate
 SIGNATURE: *[Signature]* DATE: 3/26/08



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/26/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED

SIGNATURE

Mike Lightner
Colin Chang

Meeting Conducted by: Mike Lightner

Supervisor: _____

Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

UXO Operations

Date: 3/25/08
 Job#: 846075
 Permit#: _____
 Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Parking pad Wind Direction: Evacuation Route: See map	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Parking pad	
Job Task (What are You Doing)		Audit the Job Audit Time:
Digging anomalies		
Potential Hazards		Supervisor's Comments
Slips trips and falls		
Biological hazards: insects, snakes, poison oak, sun exposure		
UXO		
Strains and sprains		
Recommended Action or Procedure		Supervisor's Initials
Watch where you walk, keep work area clear		
Use pre-exposure lotion, sunscreen, work gloves		
Proper ID of UXO		
Proper lifting techniques, get help over 60lbs		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:
Job#:
Permit#:
Issued By:

3/7/08
57442006
846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location Safe Haven: Wind Direction: Evacuation Route: Assembly Point:	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		

OryFortOrdGridOpsSummary

Op Date	Reacs	Anomalies Dug	Post Dig QC	Lbs MD (DGM Digs)	Lbs OD (DGM Digs)	Real Time EM61 Digs	Lbs MD (Real Time EM61)	Lbs OD (Real Time EM61)	Number of MEC Items	Number of UXO Items
3/25/2008		99	93	17.75	21.85					
3/18/2008	99									
3/17/2008	250									
3/14/2008	161									
3/13/2008	269									
3/12/2008	259									
3/11/2008	84									



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 45 F MAX. 57 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Test or control activities:

Follow on Inspection of DGM digs and EM61 QC. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

None

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. No problems.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. On going discussion for getting equipment to excavate picks on mounded soils.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

Daily Log	Date:	3	27	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Excavation QC

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS

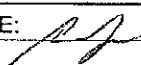
0630 On site to load equip. then head to MRS-16
 0700 At MRS-16, begin EM-61 warm-up
 0715 Calibrate EM-61's
 0745 Start QC
 0945 Break
 1000 Back to work
 1130 Lunch
 1200 Back to work
 1500 Break
 1515 Back to work
 1615 Go to calibrate EM-61's
 1630 Leave MRS-16 for office
 1645 Equip. unloaded, go to download data
 1700 leave for day

VISITORS ON SITE: Charlie, Tim, Hank CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

Sunny

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner

SIGNATURE:  DATE: 3-27-08

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - Attended Safety Tailgate Meeting and operation brief.

0645 - Received additional training on the PDA's.

0710 - Continued to investigate targets.

0900 to 1030 - In the field. All appears to be going well. UXO Teams are on track for completing over 75 target investigations per team per day.

1500 - 1645 - Back in the field. Visited each UXO Team and observed their target investigation procedures. No safety or procedural problems were noted.


1700 - Certified and stored MD and Cultural Debris in lockable containers.

1715 - Done for the day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Nice all day.	

DATE	3/27/2008
NO.	4
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 DGM excavations and EM61 QC		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted, Discussed composite toe boots PPE, and weekend driving.		
0700 observed schonstedt testing at test pit.		
0730 working on daily report..		
0800 Observing operations. No problems.		
1000 QC meeting with Tim M, Peter K, Kevin S, and Tom .		
1050 PDA issue with team 2, field work continuing		
1130 with team 1 issue is large excavation over the mV value, no metal found, wide and 34" deep		
OESS had team stop, suggested using mech equipment to dig deep. No problem with that.		
second issue is targets near buried cable, background is 30mV near cable but no peaks		
there isn't any peak under or within 18" of pin flags, excavated 2 dry holes, no metal nearby,		
expect the other picks will be similar results. Hold off further digs on C3A4C6		
#'s 10,12,13,14,15,and 17 for further guidance.		
1300 meet with Linda on PDA downloads and SHAW MEC program		
1500 Site walk, getting my bearings.		
1600 Team 2 has bogged down in small arms ammo and M1 cartridge clips. Time consuming but		
apparently clearing the excavation.		
1620 Team 1 requested assistance and guidance; OESS promptly provided.		
1645 observed the scrap sort, secured items in lockable hoppers, no problems noted.		
1720 Done for the day.		
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		IMPLEMENTING VARIANCE TII-024
Sunny, Windy in PM Low 45 high 57		IMPORTANT TELEPHONE CALLS
		None
SIGNATURE:  Charlie Hutchinson		DATE: 3/27/2008

Follow-up Quality Control Inspection Checklist

Report No. 02
Date: 3/27/08

Feature of Work: <u>Hand Excavation: DGM Targets and EM61 QC</u>	Project No. <u>846075</u>
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting <i>* Geo crew in the field tailgate</i>	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: <i>Mathison, Valdez, Harron</i>	X		
13. Government Representative: Clinton Huckins	X		

Remarks: *Small Arms and M1 clips slowing production, carry on clear holes if reasonable.*

Inspected By: Charlie Hutchison
SHAW UXOQC/SO

Date: 3/27/08



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/27/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: UXO Operations MRS 16

Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph, EMG

ATTENDEES

NAME PRINTED	SIGNATURE
<i>Charlie Hutchinson</i> JEFF STEINWAND	<i>[Signature]</i>
<i>Tim MAT hisen</i> Valdeaz	<i>[Signature]</i>
<i>Tim Haanor</i> John A Kemker	<i>[Signature]</i>

Meeting Conducted by: V. Valdez *[Signature]*

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:
Job#:
Permit#:
Issued By:

L19
3/27/08
5/11/2006
846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A* <i>Level D</i>	Safety Access / Location	Supervisor of Work: <i>Hutchison</i>
	Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards: large debris on road, wet roads reducing friction, animals crossing road (e.g. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		<i>JMT</i>
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	



JOB SAFETY ANALYSIS

UXO Operations

Date: 3/27/08
 Job#: 846075
 Permit#: _____
 Issued By: _____

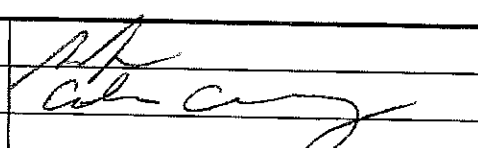
Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Parking pad Wind Direction: Evacuation Route: See map	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Parking pad	
Job Task (What are You Doing)		Audit the Job Audit Time:
Digging anomalies		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Slips trips and falls		
Biological hazards: insects, snakes, poison oak, sun exposure		
UXO		
Strains and sprains		
Recommended Action or Procedure		
Watch where you walk, keep work area clear		
Use pre-exposure lotion, sunscreen, work gloves		
Proper ID of UXO		
Proper lifting techniques, get help over 60lbs		
Crew Name Signatures:	 	



JOB SAFETY ANALYSIS

Geophysical MRS 16

Date: 3/27/08
 Job#: 846075
 Permit#: _____
 Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Wind Direction: Evacuation Route: See Map Assembly Point: At Gate on Eucalyptus	JSA Prepared by: Valdez Are other crews in area? New: <input checked="" type="checkbox"/> <input type="checkbox"/> Revised: <input type="checkbox"/> <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
GEO- Anomaly re-acquisition		
Potential Hazards		Supervisor's Comments
Slips, trips, and falls		
Poison Oak		
Other Bio hazards		
Strains, sprains		
Recommended Action or Procedure		Supervisor's Initials
Keep work area clear, watch your footing		
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent		
Stretch. Take breaks as needed		
Crew Name Signatures:		
		



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/27/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Mike Lightner Colin Shuang	

Meeting Conducted by: _____

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

Job#:

Permit#:

Issued By:

3/27/08
5/11/2008
846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location Safe Haven: Wind Direction: Evacuation Route: Assembly Point:	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g., Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Friday, March 28, 2008
Report: 3/28/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 44 F MAX. 57 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kancker, UXO Tech I (10)

Test or control activities:

Follow on Inspection of DGM digs and EM61 QC. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Friday, March 28, 2008
Report: 3/28/08

Materials Received:

None

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Radiographics performed today, film badges issued to users. 3 suspect rockets were positively ID/d as practice. Safety inspections were conducted at work site. No problems.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. 6 pin flags in C3A4C6 are not near an identifiable anomaly, wait and review data prior to digging.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Charlie Hutchison
UXOQC/SO

Attachments:

1- inspection check list

Tailgate, JSAs

3 Field daily activity logs

1- Time tracksheet



Follow-up Quality Control Inspection Checklist			
		Report No.	03
		Date:	03/28/08
Feature of Work:	Hand Excavation: DGM Targets and EM61 QC	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No.	N/A
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Mathisen, UXO and Geophysics crew.	X		
13. Observed radiographics, safety procedures in place and followed.	X		
14. Government Representative: Clinton Huckins			
Remarks: 3 M6 rockets investigated, all were practice.			
Inspected By: <u>Charlie Hutchison</u> SHAW UXOQC/SO		Date: 03/28/08	



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	3	28	08
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Excavation QC

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip., then head to MRS-16
 0700 At MRS-16, begin EM-61 warmup
 0720 Calibrate EM-61s
 0745 Start QC
 0930 Break
 0945 Back to QC
 1130 Lunch
 1200 Tim, Charlie on site to X-ray items
 1255 Done X-raying & QC'ing targets, back to work
 1500 Break
 1515 Back to work
 1610 Go to calibrate EM-61s
 1645 Back @ office to unload equip. & data
 1700 Leave for the day

VISITORS ON SITE: Tim, Charlie, Huck CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:


WEATHER CONDITIONS: Sunny IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: M. Lightner, L. Cheng

SIGNATURE: DATE: 3-28-08

DATE	3/28/2008
NO.	5
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 DGM excavations and EM61 QC		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted, Discussed UV and munitions ID.		
0700 observed schonstedt testing at test pit.		
0730 working on daily report.		
1030 in field observing operations.		
1200 lunch		
1230 discussed the radiograph and safe use. Film badges issued for users.		
1300 3 MPPEH items were correctly identified as practice rockets,		
1330 site walk, working on housekeeping		
1500 Holding off further digs on C3A4C6 #'s 10,12,13,14,15,and 17 for further guidance. one QC seed found today.		
1620 EM61 QC'd clear the large excavation discovered an aluminum soda can.		
1630 observing scrap sort. Holding a bucket a mixed of brass and live small arms for screen		
1700 done for the day.		
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:	IMPLEMENTING VARIANCE TII-024	
Sunny, Windy in PM Low 44 high 57	IMPORTANT TELEPHONE CALLS	
	None	
SIGNATURE:  Charlie Hutchison	DATE: 3/28/2008	

DATE	3/28/2008
NO.	4
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:
 0630 - Attended Safety Tailgate Meeting and operation brief.

Note: Attending a Safety Tailgate Meeting and operation brief at the beginning of each work shift is standard policy. This Safety Meeting and operation brief will not be mentioned in future FADL's.

0700 - UXO Teams continued to investigate targets.
 0930 - 1030 - In the field visiting each UXO Team. All is going well.
 1200 - 1330 - Inspected three 2.36 inch Rockets to determine their condition. The x-ray unit was used to clarify the inter contents of each Rocket. The developed x-ray film clearly identified that each Rocket was inert/practice. All three Rockets were classified as MD.
 1430 - 1530 - Out in the field to check on MRS-16 production rates. The clearance teams are meeting or will exceed daily production goals.
 1645 - Certified MD and cultural debris and secured in containers.
 1700 - Secured field operations.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
Nice all day.	

SIGNATURE: Tim Mathisen	3/28/2008	page 1 of 1
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Shaw Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/28/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: UXO Operations MRS 16

Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
<i>Charles Henderson</i>	<i>[Signature]</i>
<i>John A Kenderes</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>
<i>V. Valdez</i>	<i>[Signature]</i>
<i>JEFF STEINWAND</i>	<i>[Signature]</i>

Meeting Conducted by: V. Valdez

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3-28-08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: Geophysics for MRS 16

Chemicals Used: Fuels,

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions. Bio Hazards. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED

SIGNATURE

Mike Lightner
Colin Chang

Meeting Conducted by: Mike Lightner

Supervisor: _____ Manager: _____



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 3/26/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: UXO Operations MRS 16

Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph

ATTENDEES

NAME PRINTED

SIGNATURE

NAME PRINTED	SIGNATURE
<i>[Signature]</i>	<i>[Signature]</i>
<i>[Signature]</i>	<i>[Signature]</i>
John A Kenderer	<i>[Signature]</i>
Jim Mathisen	<i>[Signature]</i>
Tim Hender	<i>[Signature]</i>
JEFF STEINWARD	<i>[Signature]</i>

Meeting Conducted by: V. Valdez

Supervisor: _____

Manager: _____

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

UXO Operations

Date: 3/28/08
Job#: 846075
Permit#: _____
Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Parking pad Wind Direction: Evacuation Route: See map	JSA Prepared by: Valdez Are other crews in area?
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Parking pad	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Digging anomalies		
Potential Hazards		Supervisor's Comments
Slips trips and falls		
Biological hazards: insects, snakes, poison oak, sun exposure		
UXO		
Strains and sprains		
Recommended Action or Procedure		Supervisor's Initials
Watch where you walk, keep work area clear		
Use pre-exposure lotion, sunscreen, work gloves		
Proper ID of UXO		
Proper lifting techniques, get help over 60lbs		
Crew Name Signatures:		

JSA #4



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date: ^{L19} 3/28/08
 5/11/2006
 Job#: 846075
 Permit#:
 Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		Supervisor of Work:	
Required PPE:	Safety Access / Location Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: <i>James Truman</i> Are other crews in area? No	
N/A		New: Revised: <input checked="" type="checkbox"/>	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		Assembly Point:	
Job Task (What are You Doing)		Audit the Job Audit Time:	
Transportation vehicle operation at Fort Ord onsite			
Transportation vehicle operation traveling to and from the Fort Ord Site			
Potential Hazards		Supervisor's Comments	
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers			
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations			
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers			
Other hazards: using cell phones when refueling vehicles.			
Fog and other inclement weather			
Pedestrians and bicycles on road			
Recommended Action or Procedure		Supervisor's Initials	
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)			
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle			
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards			
All drivers shall have a valid state issued drivers license			
Remember that it's the " Law" to have lights on when operating windshield wipers!			
Approach blind corners at safe speed.			
Crew Name Signatures:			
<i>[Signatures]</i>			

JSA # _____



JOB SAFETY ANALYSIS

Geophysical MRS 16

Date: _____
 Job#: _____
 Permit#: _____
 Issued By: _____

3/28/08
846075

Location of Job (Unit/Location on Project): Former Fort Ord		JSA Prepared by: Valdez Are other crews in area?	
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Wind Direction: Evacuation Route: See Map	New: <input checked="" type="checkbox"/>	Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: At Gate on Eucalyptus		
Job Task (What are You Doing)		Audit the Job Audit Time:	
GEO- Anomaly re-acquisition		Supervisor's Comments	
Potential Hazards		Supervisor's Initials	
Slips, trips, and falls		Supervisor's Initials	
Poison Oak			
Other Bio hazards			
Strains, sprains			
Recommended Action or Procedure		Supervisor's Initials	
Keep work area clear, watch your footing			
Tyvek, pr-exposure lotion, Tec-nu wash, nitriles. Insect repellent			
Stretch. Take breaks as needed			
Crew Name Signatures:			

JSA #4



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

7/28/08
5/11/2006

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		Supervisor of Work:	
Required PPE: N/A	Safety Access / Location Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: James Truman Are other crews in area? No	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New:	
		Revised:	x
Job Task (What are You Doing)		Audit the Job Audit Time:	
Transportation vehicle operation at Fort Ord onsite			
Transportation vehicle operation traveling to and from the Fort Ord Site			
Potential Hazards		Supervisor's Comments	
Physical hazards: large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers			
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations			
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers			
Other hazards: using cell phones when refueling vehicles.			
Fog and other inclement weather			
Pedestrians and bicycles on road			
Recommended Action or Procedure		Supervisor's Initials	
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)			
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle			
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards			
All drivers shall have a valid state issued drivers license			
Remember that it's the " Law" to have lights on when operating windshield wipers!			
Approach blind corners at safe speed.			
Crew Name Signatures:			

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

UXO Operations

Date: 3/26/08
Job#: 846075
Permit#: _____
Issued By: _____

Location of Job (Unit/Location on Project): Former Fort Ord		
Steel toed or composite boots, safety glasses, gloves, respirators when if or an needed	Safe Haven: Parking pad Wind Direction: Evacuation Route: See map	JSA Prepared by: Valdez Are other crews in area?
	Assembly Point: Parking pad	New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job Audit Time:
Digging anomalies <u>OLM</u>		
Potential Hazards		Supervisor's Comments
Slips trips and falls Biological hazards: insects, snakes, poison oak, sun exposure UXO Strains and sprains		
Recommended Action or Procedure		Supervisor's Initials
Watch where you walk, keep work area clear Use pre-exposure lotion, sunscreen, work gloves Proper ID of UXO Proper lifting techniques, get help over 60lbs		
Crew Name Signatures:	<u>[Signature]</u> <u>[Signature]</u>	<u>[Signature]</u>

JSA #4

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

3/26/08
3/11/2006

Job#:

846075

Permit#:

Issued By:

Location of Job (Unit/Location on Project): Former Fort Ord		Supervisor of Work:	
Required PPE:	Safety Access / Location Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: James Truman Are other crews in area? No	
N/A			
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New:	
		Revised:	x
Job Task (What are You Doing)		Audit the Job Audit Time:	
Transportation vehicle operation at Fort Ord onsite			
Transportation vehicle operation traveling to and from the Fort Ord Site			
Potential Hazards		Supervisor's Comments	
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g.. Deer), other drivers			
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations			
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers			
Other hazards: using cell phones when refueling vehicles.			
Fog and other inclement weather			
Pedestrians and bicycles on road			
Recommended Action or Procedure		Supervisor's Initials	
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)			
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle			
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards			
All drivers shall have a valid state issued drivers license			
Remember that it's the " Law" to have lights on when operating windshield wipers!			
Approach blind corners at safe speed.			
Crew Name Signatures:			
1-1-			



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Monday, March 31, 2008
Report: 3/31/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 47 F MAX. 64 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Test or control activities:

Follow on Inspection of DGM digs and EM61 QC. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Monday, March 31, 2008
Report: 3/31/08

Materials Received:

None

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Used a backhoe to excavate some DGM targets. No problems.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Using backhoe to excavate mounds

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

A handwritten signature in black ink, appearing to read "Charlie Hutchison".

Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

DATE	3/31/2008
NO.	5
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site at the office.
 0700 - Continued with target investigations.
 0900 - 1000 - Attended project planning meeting with Kevin and Peter to discuss MRS-16 saturated area.
 1000 1100 - In the field to check on the crew. UXO target investigations teams are moving forward and doing a good job.
 1300 - 1500 - Attending meeting with USACE to discuss out saturated area alternatives.
 1500 - In the field. All is going well.
 1645 - Certified and stored MD and cultural debris.
 1700 - Secured for the day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	3	31	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Excavation QC

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip., then head MRF-16
 0700 At MRF-16, start EM-61 w/u (warmup)
 0715 ~~turn on~~ calibrate EM-61s
 0735 Start QC
 0930 Break
 0945 Back to work
 1115 Lunch
 1145 Back to work
 1345 Finished all targets & PDA, go to help other team
 1500 Break
 1515 Down to start backhoe dig
 1500 Go to calibrate EM-61s
 1615 ~~the~~ M6 Back to the office
 1645 Gear unloaded, go to download data
 1700 Leave for the day

VISITORS ON SITE: Hucks, Charlie, Tim CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

Sunny

SHAW PERSONNEL ON SITE: M. Lightfoot, C. Cheng

SIGNATURE:

DATE: 3/31/08

Form G-6



Shaw Environmental, Inc.

FIELD ACTIVITY DAILY LOG

K1

Daily Log	Date:	3	31	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *DGM digs; hand and heavy equip*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 Tailgate meeting - UXO
0700 Tailgate meeting - Geophysicists
0720 Office for equipment
0800 observing operations - no problems
0930 Admin
0930 getting PPE for backhoe operation
1430 escort backhoe's stove to site
1445 new JSA, reviewed safety and procedures
1600 scrap sort - small arms
1700 dump for the day

VISITORS ON SITE: *none* CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: *use backhoe*

WEATHER CONDITIONS: *47-64° partly cloudy* IMPORTANT TELEPHONE CALLS: *none*

SHAW PERSONNEL ON SITE: *UXO crew, Geobrow*

SIGNATURE: *[Signature]* DATE: *3/31/08*



Follow-up Quality Control Inspection Checklist			
		Report No. <u>4</u>	
		Date: <u>3/31/08</u>	
Feature of Work: <u>Hand Excavation: DGM Targets and EM61 QC</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: <u>Mathison, UXD & Geophysicists, Steve, operators</u>	X		
13. <u>Used backhoe and operator to dig mounds</u>	X		
14. Government Representative: Clinton Huckins			
Remarks: <u>sorted brass from live small arms today</u>			
Inspected By: <u>Charlie Hutchison</u> SHAW UXOQC/SO		Date: <u>3/31/08</u>	



TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 3/31/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, Site walk, UXO Surface Sweep, GPS Surveying, Housekeeping UXO Ops MRS-16
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals, thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other GA-52's, EM61s, radiograph..

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kancker	
Colin Chang	
Mike <i>Lightner</i>	
Charlie Hutchison	
Steven Bennett	

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: 3/31/08
 Job#: 8460 846075
 Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): <u>MRS 16</u>		Supervisor of Work: Mathisen	
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location		JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office		
	Wind Direction: From west		
Evacuation Route: return to office		New: <input type="checkbox"/>	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		Revised: <input checked="" type="checkbox"/>	
Job Task (What are You Doing)		Audit the Job Audit Time:	
Hand Excavation of MEC		Supervisor's Comments	
Sort scrap			
QC anomalies			
Potential Hazards		Supervisor's Initials	
Slips, Trips and Falls			
Biological hazards, insects, snakes, poison oak, UV			
UXO			
Heavy lifting			
strains and sprains			
Accidental detonation			
Recommended Action or Procedures			
Observe walking area/conditions			
Work stops during periods of lightning/severe weather			
Smoking in designated areas only, park vehicles on dirt roads			
avoid poison oak, don't disturb bees.			
Consider potential fillers and fuze condition on intact munitions			
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles			
Positive ID, excavate within one foot by hand, pinpoint with GA52.			
Weights of scrap buckets, do not overfill, EM61 is 2 man lift			
stop digging on or handling MPPEH when passersby on roadways.			
Crew Name Signatures:			

JSA #4



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:

Job#:

Permit#:

Issued By:

L19
 3/31/08
 5/11/2006
 846075
 Hutchison

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: Wind Direction: Evacuation Route:	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g., Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 3/31/08
 Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hats	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: <u>Office</u>	JSA Prepared by:
	Wind Direction: <u>From west</u>	Are other crews in area? <input checked="" type="checkbox"/> yes
	Evacuation Route:	exclusion zone
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/>
	Assembly Point: <u>Team Vehicle</u>	Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
UXO Screening of MEC Scrap		
Excavate MEC with heavy equipment		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Insects, poison oak		
Traffic/Non-essential personnel		
Driving		
Accidental detonation		
Heavy lifting		
Pinch points		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Work stops during periods of lighting/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees.		
Road blocks established, non-essential personnel kept out of Area		
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles		
Positive ID, excavate within one foot by hand, pinpoint with GA52.		
Weights of scrap buckets, do not overfill		
Only one groundman signals operator, use PPE		
Crew Name Signatures:		



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Monday, April 01, 2008
Report: 4/01/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 47 F MAX. 64 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

Backhoe- 10 hours

Bobcat- 6 hours

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Steve Benett (9)

Test or control activities:

Follow on Inspection of DGM digs and EM61 QC, Preparatory meeting and Initial Inspection of real time EM61 acquire, dig, and EM61 QC.. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Monday, April 01, 2008
Report: 4/01/08

Materials Received:

Backhoe and Bobcat with one operator

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Used a backhoe and bobcat to excavate some DGM targets and move soils. No problems. UXO and Geophysicists (Field Personnel) participated in the Preparatory meeting in the field. JSA's covered the tasks performed.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Using backhoe and bobcat to excavate mounds and place soils in nearby ditch. OESS passed on the OK per Bill Collin. Began real time acquire, dig and EM61 QC in areas without DGM picks.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs



FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	4	7	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip., then head to MRS-16
 0650 Start EM-61 w/ps
 0705 Calibrate EM-61s
 0730 Start QC
 0930 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work
 1300 Prep Mtg. for real-time
 1400 Start real-time
 1600 Leave for calibration, then calibrate EM-61s
 1630 Leave MRS-16 for office to unload equip. + download data
 1700 Leave for the day

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner DATE: 4-1-08
 SIGNATURE:

DATE	4/1/2008
NO.	6
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site at the office.

0700 - 1500 - Corps OE Specialist passed on to me that Bill Collin has stated that it was alright to relocate the soil from each soil mound located in the north west corner of MRS-16. The problem with these mounds were first reported in FADL 002. The soil from these mounds were visually and magnetically checked for MEC and then relocated to the trench from where the soil came from. All targets located in the mounds were eventually cleared and passed QC.

1100 - 1230 - Attended MRS-16 progress meeting with USACE

1300 - Attended preparatory meeting on MRS-16 for real time geophysics in tree areas.

1400 - UXO Team 1 commenced real time clearance activities in tree areas.

1500 - UXO Team 2 commenced real time clearance activities in selected tree areas.

1645 - Certified MD and cultural debris. Secured MD and debris in lockable containers.

1700 - Done for the day.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

See QC daily.

IMPORTANT TELEPHONE CALLS:

SIGNATURE: Tim Mathisen

4/1/2008

page 1 of 1

Form G-6



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	7	08	K1
	No.				
	Sheet	1	Of	1	

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *MRS-16*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 Tailgate meeting
0700 Tools & equipment
0720 issued additional PPE for ground personnel
0900 decision confirmed to place mound soils into the ditch it came from
1000 paperwork
1100 discussed equipment's needs with Marty & Kevin went to site to reset or replace cornerstakes in southwest MRS-16 near gate.
1300 Prep meeting for real time acquire/dig feature.
1400 Initial inspection for using EM 610 grid lanes
1500 escorting backhoe back to landfill
1520 escort bobcat back to landfill
1630 observe scrap soil
1700 done for the day

VISITORS ON SITE: *see tailgate*

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: *began real time digs and EM 610C.*

WEATHER CONDITIONS: *Sunny 47-64°*

IMPORTANT TELEPHONE CALLS: *none*

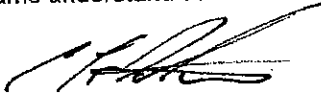
SHAW PERSONNEL ON SITE: *see tailgate*

SIGNATURE: *[Signature]*

DATE: *3/4/1/08*



Shaw Environmental & Infrastructure, Inc.

Initial Quality Control Inspection Checklist			
		Report No.	2
		Date:	04/01/08
Feature of Work:	Hand Excavation, non-DGM Targets and EM61 QC	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No:	N/A
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and procedures checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Tim Mathisen, UXO teams and field geophysicists	X		
13. maximum coverage per lane is 30 inches, dig on 14mV	X		
13. Government Representative: Clinton Huckins	X		
Remarks: Teams understand the methods and reporting. No problems noted.			
Inspected By:  Charlie Hutchison SHAW UXOQC/SO		Date: 04/01/08	



TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/01/08 4/01/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, Site walk, UXO Surface Sweep, GPS Surveying, Housekeeping UXO Ops MRS-16
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals, thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing radius
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other GA-52's, EM61s, radiograph, backhoe

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kancker	
Colin Chang	
Mike <i>Lightner</i>	
Charlie Hutchison	

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/2/2008
 Job#: 846075
 Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		Supervisor of Work: Mathisen	
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location		JSA Prepared by: Hutchison Are other crews in area? No
	Safe Haven: Office		
	Wind Direction: From west <i>SOUTHWEST</i>	exclusion zone 806 feet	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: return to office	New:	
	Assembly Point: Site gate	Revised:	X
Job Task (What are You Doing)		Audit the Job Audit Time:	
Hand Excavation of MEC			
Sort scrap			
QC anomalies			
Potential Hazards		Supervisor's Comments	
Slips, Trips and Falls			
Biological hazards, insects, snakes, poison oak, UV			
UXO			
Heavy lifting			
strains and sprains			
Accidental detonation			
Recommended Action or Procedures		Supervisor's Initials	
Observe walking area/conditions			
Work stops during periods of lighting/severe weather			
Smoking in designated areas only, park vehicles on dirt roads			
avoid poison oak, don't disturb bees.			
Identify potential fillers and fuze condition on intact munitions			
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles			
Positive ID, excavate within one foot by hand, pinpoint with GA52.			
Weights of scrap buckets, do not overfill, EM61 is 2 man lift			
stop digging on or handling MPPEH when passersby on roadways.			
Crew Name Signatures:			
<i>[Signature]</i>			
<i>[Signature]</i>			
<i>[Signature]</i>			

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/1/08

Job#: 846075

Permit#: _____

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		Supervisor of Work: Mathisen	
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hats	Safety Access / Location		JSA Prepared by: Are other crews in area? yes exclusion zone
	Safe Haven:		
	Wind Direction:		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route:		New: _____ Revised: <input checked="" type="checkbox"/>
	Assembly Point: Team Vehicle		
Job Task (What are You Doing)		Audit the Job Audit Time:	
Hand Excavation of MEC			
UXO Screening of MEC Scrap			
Excavate MEC with heavy equipment			
Potential Hazards		Supervisor's Comments	
Slips, Trips and Falls			
Inclement weather			
Insects, poison oak			
Traffic/Non-essential personnel			
Driving			
Accidental detonation			
Heavy lifting			
Pinch points		Supervisor's Initials	
Recommended Action or Procedures			
Observe walking area/conditions			
Work stops during periods of lightning/severe weather			
Smoking in designated areas only, park vehicles on dirt roads			
avoid poison oak, don't disturb bees.			
Road blocks established, non-essential personnel kept out of Area			
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles			
Positive ID, excavate within one foot by hand, pinpoint with GA52.			
Weights of scrap buckets, do not overfill			
Only one groundman signals operator, use PPE			
Crew Name Signatures:			

JSA #4



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:
Job#:
Permit#:
Issued By:

4/1/08
L19
~~3/31/08~~
5/11/2008
846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work:
	Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g., Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		
		Tom JL



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Monday, April 02, 2008
Report: 4/02/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 47 F MAX. 57 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Follow up Inspection of real time EM61 acquire, dig, and EM61 QC. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Monday, April 02, 2008
Report: 4/02/08**Materials Received:****4. Submittals reviewed:**

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

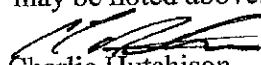
Safety inspections were conducted at work site. No problems. Rain didn't affect production.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Grid C3A2A2 has an area of metal trash. Chris Prescott and Clinton Huckins agree with SUXOS to acquire and QC with schonstedt the additional excavation in trash site. Also using schonstedts to acquire anomalies and QC anomalies next to trees and other obstacles to the EM61. Continue real time acquire, dig and EM61 QC in areas without DGM picks. No delays today.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO**Attachments:**2- inspection check list
Tailgate, JSAs
3 Field daily activity logs

PREPARATORY INSPECTION OUTLINE
(PART I)



Shaw Environmental, Inc.

TERC II - K.2

Contract No.: DACW 05-96-D-0011
Task Order No. 0016
Fort Ord, California

Date: 04/01/08

Title and No. of Technical Section: Final Work Plan, MRS-16 Munitions and Explosives of Concern Removal

Former Fort Ord, California
Section 2.0 Technical Management Plan
FWV 024

Reference Contract Drawings: GridOpsPlanned_2008_03_05_for real time (non-DGM) digs and attached procedures checklist

A. Attendants: See attached tailgate roster

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____
- 11) _____
- 12) _____
- 13) _____
- 14) _____
- 15) _____

B. Submittals required to begin work:

	<u>Item</u>	<u>Submittal No.</u>	<u>Action Code</u>
1)	Final WP MRS-16 MEC Removal		O
2)	SSHP	Rev. 10	A
3)	Associated Activity Hazard Analysis		Approved
4)	FWV 024		Approved
5)			

I hereby certify, that to the best of my knowledge and belief, that the above required materials delivered to the job site are the same as those submitted and approved.

Contractor Quality Control Systems Manager



(continued):

**PREPARATORY INSPECTION OUTLINE
(PART I)**

TERC II - K.2

Contract No.: DACW 05-96-D-0011
Task Order No. 0016
Fort Ord, California

Date: 3/25/08

C. Equipment to be used in executing work:

- 1) Leica GPS Units
- 2) EM61s
- 3) Pickup trucks
- 4) Schonstedts
- 5) Shovels

D. Work areas examined to ascertain that all preliminary work has been completed: **Yes**

E. Methods and procedures for performing Quality Control, including specific testing requirements:
Three-phase inspections, as required.

Yes

The above methods and procedures have been identified from the project plans and will be performed as specified for the Definable Feature of Work.

Contractor Quality Control Systems Manager



Follow-up Quality Control Inspection Checklist			
		Report No. <u>1</u>	
		Date: <u>04/02/08</u>	
Feature of Work:	<u>Hand Excavation: real time acquire and QC</u>	Project No. <u>846075</u>	
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024, Martys checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability		X	
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Chris Prescott, C. Huckins, SUXOS, UXOTeam 2			
13. Government Representative: Clinton Huckins			
Remarks: Too time consuming to clear trashy area in C3A2A2 with EM61, broad peak of 60mV. Decision made to clear anomalies with schonstedt and QC with Schonstedt where appropriate. The same procedures will be used where obstacles(trees) obstruct the EM61.			
Inspected By: Charlie Hutchison		Date: <u>04/02/08</u>	

DATE	4/2/2008
NO.	7
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal		846075
Field Activity: Target Investigation		
Company Name: Shaw Environmental Inc.		
Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Today's Activities:		
0630 - On site at the office.		
0700 - Both UXO teams are continuing to clear areas under the trees.		
0800 - Attended meeting with Kevin and Peter to discuss UXO rates.		
0845 - Continued to work on updating UXO rates in accordance with the most recent wage determination.		
1240 - Out in the field to check on clearance teams. UXO Team 1 is moving along and should meet daily production goals, however, teams 2 is having problems clearing one grid due to encountering a burn pit filled with small wire, nails etc. Teams 2 is also encountering numerous small metal objects near tree trunks. The EM-61 can not be used to pin point objects that may be located next to trees due to the size of the equipment. A Schonstedts is the equipment of choice for checking near and around trees because it is small in size.		
1430 -1500 - Chris Prescott and Huck on site to investigate the burn pit being cleared by Team 2. It was decided and approved by Mr. Prescott and Huck that pits such as these would be cleared and Qc'd using Schonstedts since the EM-61 can not pin point peak readings when large amounts of metal rust are within the target site.		
1645 - Certified materials collected today and stored in appropriate containers.		
1700 - Secured		
VISITORS ON SITE:		CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS:
See QC daily.		
SIGNATURE: Tim Mathisen		4/2/2008 page 1 of 1



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	2	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Real-time EM-61 & Excavation*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip., then head to MRS-16
 0650 Start EM-61 w/u
 0710 Calibrate EM-61s
 0730 Start real-time
 0930 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 Leave to calibrate EM-61s
 1630 Head to office
 1645 Equip. unloaded, go to download data
 1700 Leave

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: *Rain* IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: *C. Chang, M. Lightner*

SIGNATURE: *[Signature]* DATE: *4-2-08*



TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 04/02/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, Site walk, UXO Surface Sweep, GPS Surveying, Housekeeping UXO Ops MRS-16
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals, thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing radius
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other GA-52's, EM61s, radiograph

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kancker	
Colin Chang	
Mike	
Charlie Hutchison	

JSA #4



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:
Job#:
Permit#:
Issued By:

L19
4/2/08
6/11/2008
846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
	Safe Haven: Wind Direction: Evacuation Route:	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals crossing road (e.g. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Thursday, April 03, 2008
Report: 4/03/08**Materials Received:****4. Submittals reviewed:**

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

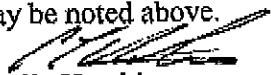
Safety inspections were conducted at work site. No problems.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Grid C3A2A2 has 2 areas of metal trash still in grid. Chris Prescott and Clinton Huckins agree with SUXOS to acquire and QC with schonstedt the additional excavation in trash site. Also using schonstedts to acquire anomalies and QC anomalies next to trees and other obstacles to the EM61. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Used a backhoe to assist in a large excavation. No delays today.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO**Attachments:**

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs



Shaw Environmental & Infrastructure, Inc.

Follow-up Quality Control Inspection Checklist

Report No. _____

Date: 04/03/08

Feature of Work:	Hand Excavation: DGM Targets and EM61 QC	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No:	N/A

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: UXO Crews, Geophysicists, SUXOS	X		
13. Government Representative: Clinton Huckins			

Followup: Using Schonstedts when necessary to find anomalies and clear digs is adequate. Used a backhoe for some larger excavations.

Remarks: Cautioned crew to drive slowly in rough terrain for the sake of the equipment. Radiograph was very successful in proper ID of MEC.



Inspected By: Charlie Hutchison

Date: 04/03/08

DATE	4/3/2008
NO.	8
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:
 0630 - On site at the office.
 0700 - Both UXO teams are continuing to clear areas under the trees.
 0900 - 1130 - Out in the field checking on the teams. Team 2 still working the same grid as yesterday. Observed team 1 procedures for using the x-ray unit on three MEC. All MEC were determined to be MD.
 1300 - 1400 - At MRS-16 to check on progress. Team 2 about to complete the grid that they have been working on the last two days. Team 1 moving right along and making good progress. Team 1 has been working grids having a low to medium density of metal objects to investigate. Team 1 used the x-ray unit to determine condition of another 2.36 inch Rocket. The x-ray showed that the Rocket was live. Rocket was left in place for future disposal.
 1600 - 1700 - Out checking on teams. Certified MD and other debris that was collected during clearance activities conducted today.
 1700 - Secured field operations.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	3	08
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT:

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip, head to MRS-16
 0700 Begin EM-61 w/u
 0715 Calibrate EM-61s
 0730 Start real-time
 0915 Break
 0930 X-ray items
 1000 Resume real-time
 1115 Stop to X-ray item
 1120 Lunch
 1200 Resume real-time
 1315 Stop to back-see areas in grids
 1400 Resume real-time
~~1515 Break~~
~~1530 Res - mu~~
 1500 Break
 1515 Resume real-time
 1600 Go to calibrate EM-61s, then to office
 1700 Leave

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner DATE: 4/3/08
 SIGNATURE:



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 04/03/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals, thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other GA-52's, EM61s, radiograph

ATTENDEES

NAME PRINTED
Tim Mathisen
Val Valdez
Tim Harron
Jeff Steinward
John Kancker
Colin Chang
Mike Lightner
Charlie Hutchison

SIGNATURE

JSA #4



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Driving

Date:
Job#:
Permit#:
Issued By:

L19
4/3/08
~~5/1/2008~~
846075

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work:
	Safe Haven: Wind Direction: Evacuation Route:	JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point:	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord onsite		
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards: large debris on road, wet roads reducing friction, animals crossing road (e.g. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		

JSA # _____



JOB SAFETY ANALYSIS

Date: 4/3/2008

Job#: 846075

Permit#: _____

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison
	Wind Direction: From west	Are other crews in area? No
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Heavy lifting		
strains and sprains		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Work stops during periods of lightning/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees.		
Identify potential fillers and fuze condition on intact munitions		
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles		
Positive ID, excavate within one foot by hand, pinpoint with GA52.		
Weights of scrap buckets, do not overfill, EM61 is 2 man lift		
stop digging on or handling MPPEH when passersby on roadways.		
Crew Name Signatures:		



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Friday, April 04, 2008
Report: 4/04/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 54 F MAX. 57 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Follow up Inspection of real time EM61 acquire, dig, and EM61 QC. Field QC inspections of 7 grids, all pass. Tools and equipment are serviceable and adequate. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Friday, April 04, 2008
Report: 4/04/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. No problems.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. No delays today.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs



Follow-up Quality Control Inspection Checklist			
		Report No. 1	
		Date: 04/04/08	
Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Review QC work plans and any recent changes	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists, utility markers, or GEO polys	X		
12. Personnel Present: UXOQC, SUXOS, Team 1, OESS.	X		
13. Briefed team on results of inspection.		X	
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids C3A3D6, C3A3D7, C3A3E6, C3A3E7, C3A3E8, C3A3E9, AND C3A3F6. All pass inspection. Will brief team on Monday.			
Inspected By: Charlie Hutchison		Date: 04/04/08	



Follow-up Quality Control Inspection Checklist			
		Report No. <u>1</u>	
		Date: <u>04/04/08</u>	
Feature of Work:	<u>QC Inspection</u>	Project No. <u>846075</u>	
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____	
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>	
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Review QC work plans and any recent changes	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists, utility markers, or GEO polys	X		
12. Personnel Present: UXOQC, SUXOS, Team 1, OESS.	X		
13. Briefed team on results of inspection.		X	
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids C3A3D6, C3A3D7, C3A3E6, C3A3E7, C3A3E8, C3A3E9, AND C3A3F6. All pass inspection. Will brief team on Monday.			
Inspected By: Charlie Hutchison		Date: <u>04/04/08</u>	



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	4	08
	No.			
	Sheet	Of		

F1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip, then head to MRS-16
 0700 Start EM-61 w/u
 0715 Calibrate EM-61s
 0735 Start real-time
 0930 Break
 0945 Resume work
 1200 Lunch; V. Valdez leaves
 1230 go help Team 2 until replacement. MTD Tech arrives
 1300 SUKO shows up to replace V. Valdez, return to our area
 1500 Break
 1515 Resume work
 1600 go to calibrate EM-61s
 1630 Back to shop to unload & download data
 1700 Leave

[Large handwritten scribble]

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: Sunny IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner DATE: 4-4-08
 SIGNATURE: *[Signature]*



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 04/04/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other GA-52's, EM61s, radiograph, weekend driving

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kancker	
Collin Chang	
Mike Lightner	
Charlie Hutchison	
Tom Ghigliotto	

JSA # _____



JOB SAFETY ANALYSIS

Date: 4/4/2008
 Job#: 846075
 Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		Supervisor of Work: Mathisen	
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hats	Safety Access / Location		JSA Prepared by: Are other crews in area? yes exclusion zone: watch for passersby
	Safe Haven: office		
	Wind Direction: westerly		
Evacuation Route: most direct		New: <input type="checkbox"/>	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Team Vehicle		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:	
Hand Excavation of MEC			
UXO Screening of MEC Scrap			
Excavate MEC with heavy equipment			
Potential Hazards		Supervisor's Comments	
Slips, Trips and Falls			
Inclement weather			
Insects, poison oak			
Traffic/Non-essential personnel			
Driving			
Accidental detonation			
Heavy lifting			
Pinch points		Supervisor's Initials	
Recommended Action or Procedures			
Observe walking area/conditions			
Work stops during periods of lightning/severe weather			
Smoking in designated areas only, park vehicles on dirt roads			
avoid poison oak, don't disturb bees.			
Road blocks established, non-essential personnel kept out of Area			
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles			
Positive ID, excavate within one foot by hand, pinpoint with GA52.			
Weights of scrap buckets, do not overfill			
Only one groundman signals operator, use PPE			
Crew Name Signatures:			

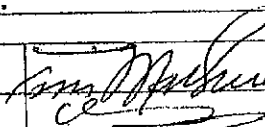
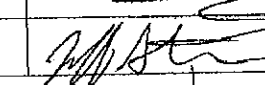
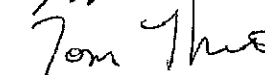
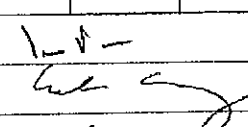

JSA #4

JOB SAFETY ANALYSIS

Date: 040408
 Job#: 846075
 Permit#:
 Issued By: Hutchison

Shaw Shaw Environmental, Inc.

Driving

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location Safe Haven: Office Wind Direction: westerly Evacuation Route: most direct	Supervisor of Work: JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: team vehicle	New: Revised: X
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord on site		Supervisor's Comments
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Initials
Physical hazards; large debris on road, wet roads reducing friction, animals on road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	  	 



TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Monday, April 07, 2008
Report: 4/07/08**Materials Received:****4. Submittals reviewed:**

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Jeff Steinwand has a rash on his arm.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. No delays today. Team 2 is unproductive due to metal debris in C3A2A3. Moving to another area until we study the problem.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO**Attachments:**

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

DATE	4/7/2008
NO.	10
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site at the office.
 0700 - UXO teams continuing to clear real time QC areas.
 0800 - 1030 - Out in the field to check several areas that appears to be burial pits. These areas will be investigated at a later date using mechanical equipment.
 1200 - 1330 - In the field to discuss area that Team 2 is working. It was decided by Huck, Chris Prescott and myself to move Team 2 out of the heavy contaminated area that is near the main gate. To date, these grids by the main gate have produced mostly non MEC type debris. Tomorrow Team 2 will move to the north west grids where there is a greater chance of encountering MEC.
 Note: Jeff Steinwand reported to us that he has an outbreak of poison oak. Jeff stated that he wanted to wait another day to see if the poison oak outbreak clears up on its own.
 1600 - Out in the field to observe teams clearing grids.
 1645 - Certified and stored all MD and cultural debris.
 1700 - Secured from field operations.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

SIGNATURE: Tim Mathisen

4/7/2008

page 1 of 1



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	7	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip., then head to MRS-16

0700 At MRS-16, begin EM-61 w/u.

0715 Calibrate EM-61s

0745 start real-time

0930 Break

0945 Resume work

1130 Lunch

1200 Resume work

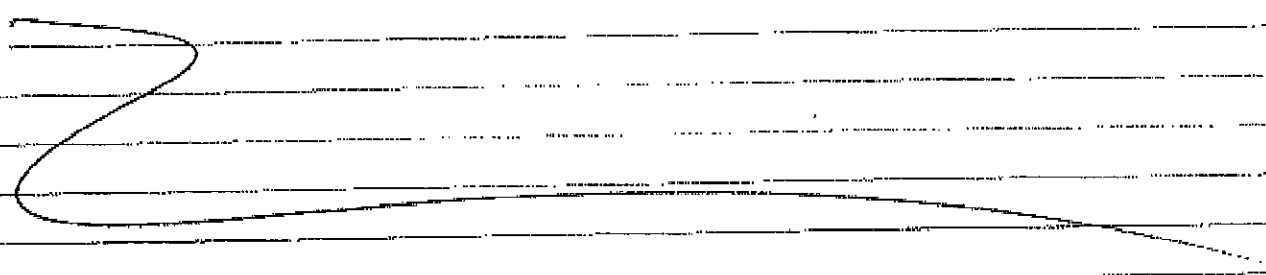
1500 Break

1515 X-ray item while I resume real-time

1600 Leave to calibrate EM-61s

1630 Back to office to unload equip. & download data

1700 Leave



VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: M. Lightner, C. Chang

SIGNATURE:

DATE: 4-7-08



Follow-up Quality Control Inspection Checklist			
		Report No.	
		Date:	4/7/08
Feature of Work:	Hand Excavation: DGM Targets and EM61 QC	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No.	N/A
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present:			
Jeremy Flemmer, Tim Mathison			
13. Government Representative: Clinton Huckins			
Remarks: Team 2 bogged down in C3A2A3, moving to better production grid.			
Inspected By: Charlie Hutchison		Date:	4/7/08
SHAW UXOQC/SO			



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 4/7/08 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca.
 Type of Work: UXO Operations MRS 16
 Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph, EMG

ATTENDEES

NAME PRINTED	SIGNATURE
<i>Charles Hechler</i>	<i>[Signature]</i>
<i>Tina Hansen</i>	<i>[Signature]</i>
<i>Jim Mathisen</i>	<i>[Signature]</i>
<i>JEFF STEINWAND</i>	<i>[Signature]</i>
<i>ERIC SCHWARTZ</i>	<i>[Signature]</i>
<i>Jeremy Flum</i>	<i>[Signature]</i>
<i>Van Valdez</i>	<i>[Signature]</i>
<i>Tom Blighetto</i>	<i>[Signature]</i>
<i>John A. Kowalczak</i>	<i>[Signature]</i>

Meeting Conducted by: V. Valdez
 Supervisor: _____ Manager: _____

JSA #4

JOB SAFETY ANALYSIS

Date: 040708

Shaw Shaw Environmental, Inc.

Driving

Job#: 846075

Permit#: Issued By: Hutchison

Location of Job (Unit/Location on Project): Former Fort Ord		Supervisor of Work:	
Required PPE: N/A	Safety Access / Location Safe Haven: Office Wind Direction: westerly Evacuation Route: most direct	JSA Prepared by: James Truman Are other crews in area? No	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: team vehicle	New:	
		Revised:	X
Job Task (What are You Doing)		Audit the Job Audit Time:	
Transportation vehicle operation at Fort Ord on site			
Transportation vehicle operation traveling to and from the Fort Ord Site			
Potential Hazards		Supervisor's Comments	
Physical hazards; large debris on road, wet roads reducing friction, animal s On road (e.g., Deer), other drivers			
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations			
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers			
Other hazards: using cell phones when refueling vehicles.			
Fog and other inclement weather			
Pedestrians and bicycles on road			
Recommended Action or Procedure		Supervisor's	Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)			
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle			
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards			
All drivers shall have a valid state issued drivers license			
Remember that it's the "Law" to have lights on when operating windshield wipers!			
Approach blind corners at safe speed.			
Crew Name Signatures:			

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: 4/7/2005

Job#: 846075

Permit#: _____

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	
	Safe Haven: Office	
	Wind Direction: From west	
Evacuation Route: return to office		Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New: _____	
	Assembly Point: Site gate	Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time: _____
Hand Excavation of MEC		Supervisor's Comments
Sort scrap		
QC anomalies		
Potential Hazards		Supervisor's Initials
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Heavy lifting		
sprains and strains		
Accidental detonation		
Recommended Action or Procedures		
Observe walking area/conditions		
Work stops during periods of lightning/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees.		
Identify potential fillers and fuze condition on intact munitions		
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles		
Positive ID, excavate within one foot by hand, pinpoint with GA52.		
Weights of scrap buckets, do not overfill, EM61 is 2 man lift		
stop digging on or handling MPPEH when passersby on roadways.		
Crew Name Signatures:		



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Tuesday, April 08, 2008
Report: 4/08/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 49 F MAX. 57 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Harron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Follow up Inspection of real time EM61 acquire, dig, and EM61 QC. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Tuesday, April 08, 2008
Report: 4/08/08

Materials Received:**4. Submittals reviewed:**

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Jeff Steinwand was seen by our health clinic, treated for a skin rash, and released back to full duties.

7. Instructions received and conflicts with plans or specifications, special occurrences:


Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Delays were encountered due to an employee visiting the clinic and the OSHA recording process. Team 2 moved to the NE nearby team 1's location while the Tech II went to the medical clinic.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Charlie Hutchison
UXOQC/SO


Attachments:

- 1- inspection check list
 - Tailgate, JSAs
 - 2 Field daily activity logs
- 

DATE	4/8/2008
NO.	11
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site at the office.

0700 - Jeff Steinwand's poison oak is not getting any better. Val Valdez contacted Health Resources and made an appointment for Jeff to see a doctor at an approved clinic.

Approx. 0915 - UXO Safety transported Jeff Steinwand to the doctor clinic.

1100 - 1245 - Attended Technical Planning meeting at the BRAC office.

Approx. 1315 - Jeff Steinwand back to work. The doctor gave him a prescription for medication that would help to reduce and he or eliminate the poison oak rash.

1500 - Out on the range. I checked several grids south east of the main gate with a schonstedt to determine contamination. It levels. It appears that grids further away from the main gate area may have less metal contamination then those grids surrounding the range entrance.


1700 - Certified and secured materials collected today.


1700 - Done for the day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
See QC daily.	

DATE	4/8/2008
NO.	12
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks.		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted, treating/preventing skin rashes from poison oak.		
0645 observed schonstedt testing at test pit.		
0915 decision to send Jeff Steinwand to the clinic for a skin rash was made.		
0950 departed for the clinic.		
1215 Jeff saw a doctor and received a prescription and released back to full duties.		
1300 Jeff back with his team in the field.		
1330 reviewing reports, completeing accident reporting for Jeff and working on dailes.		
1530 in the field observing operations. Team 2 in NE grids working in team 1's grid assignments.		
1630 Observing scrap sorting. No problems. Teams reported finding 3 QC seed items		
1700 Done for the day.		
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS
p.cloudy, Windy in PM Low 49 high 57		Dave Mummert and help line per HS-020
SIGNATURE:	 Charlie Hutchison	DATE: 4/8/2008

Follow-up Quality Control Inspection Checklist			
		Report No. <u>4</u>	
		Date: <u>04/02/08</u>	
Feature of Work:	<u>Hand Excavation: real time acquire and QC</u>	Project No. <u>846075</u>	
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____	
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>	
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 , Martys checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures		X	
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: SUXOS, UXOTeam 2			
13. Government Representative: Clinton Huckins			
Remarks: Followup :Grids C3A2A2 and A3 were heavy with sub-surface metal debris. Team 2 moved to NE grids to improve production and for team members absence. Skin rash; don't want a reoccurrence; more care with PPE and lotions are stressed.			
Inspected By:  Charlie Hutchison		Date: <u>04/08/08</u>	



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California

Date: 4/8/08 Time: 06:30 Job Number: 846075

Customer: USACE Address: Sacramento, California

Specific Location: Former Fort Ord, Ca.

Type of Work: UXO Operations MRS 16

Chemicals Used: Fuels, Hydraulic Oil, *techno, sunscreen, alcohol*

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph, *EMG*

ATTENDEES

NAME PRINTED	SIGNATURE
<i>Charlie Hutchison</i>	<i>[Signature]</i>
<i>Tom H...</i>	
<i>John A K...</i>	<i>[Signature]</i>
<i>Jim Mathison</i>	<i>[Signature]</i>
<i>Jim V...</i>	
<i>JEFF STEINWAND</i>	<i>[Signature]</i>
<i>Mike Lighter</i>	<i>[Signature]</i>
<i>Colin Chang</i>	

Meeting Conducted by: V. Valdez

Supervisor: _____ Manager: _____

JSA #4

L19

JOB SAFETY ANALYSIS

Date: 040808

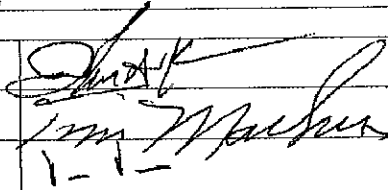

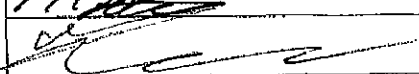
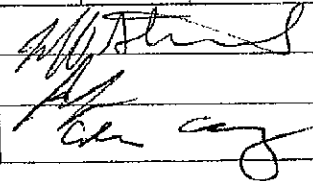
Shaw Shaw Environmental, Inc.

Driving

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE: N/A	Safety Access / Location	Supervisor of Work:
	Safe Haven: Office Wind Direction: westerly Evacuation Route: most direct	JSA Prepared by: James Truman Are other crews in area? No
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: team vehicle	New: Revised: x
Job Task (What are You Doing)		Audit the Job Audit Time:
Transportation vehicle operation at Fort Ord on site		Supervisor's Comments
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Initials
Physical hazards; large debris on road, wet roads reducing friction, animals on road (e.g., Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the "Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:	  	

JSA # _____



JOB SAFETY ANALYSIS

Date: 4/8/2008
 Job#: 846075
 Permit#:
 Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hats	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: office	JSA Prepared by:
	Wind Direction:	Are other crews in area? yes
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: most direct	exclusion zone
	Assembly Point: Team Vehicle	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
UXO Screening of MEC Scrap		
Excavate MEC with heavy equipment		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Inclement weather		
Insects, poison oak		
Traffic/Non-essential personnel		
Driving		
Accidental detonation		
Heavy lifting		
Pinch points		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Work stops during periods of lighting/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees.		
Road blocks established, non-essential personnel kept out of Area		
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles		
Positive ID, excavate within one foot by hand, pinpoint with GA52.		
Weights of scrap buckets, do not overfill		
Only one groundman signals operator, use PPE		
Crew Name Signatures:		

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 54 F MAX. 58 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.
N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Investigated Item DGM item 11, Grid C3A2H4, removed, will say so in database. Inspected real time EM61 acquire, dig, and EM61 QC. Follow up on 3 grids, not completed. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued
10/03/2007

Action Completed
on going

Date Closed



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. No problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. good production today. Continuing to improve housekeeping in grids we're in. Jeff Anderson, DTSC on site, no issues brought up to me.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Charlie Hutchison
UXOQC/SO

Attachments:

1- inspection check list

Tailgate, JSAs

4 Field daily activity logs

5- vehicle inspection sheets

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site.

0645 - Personnel performed weekly truck inspection requirements.

0700 - Teams in the field clearing real time QC grids.

0800 - Out in the field checking on progress.

0900 - 0915 - UXO QC and I verified that target #0011 in grid C3A2H4 was indeed removed. The data base indicated that this target #0011 was left in place. Erik will change the data base to reflect that this M9 was explosively demilitarized on July 12, 2007 and the item was determined to be an inert M11 Rifle Grenade. The final classified of the Grenade is MD.

1130 - 1230 - Attended April's Safety Counsel meeting.

1315 - 1430 - Kevin, Erik and I out to visit each clearance team to discuss PDA data entry requirements.

1645 - All materials collected today were certified and stored in lockable containers.

100 - Secured.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
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WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:
--------------------------------------	----------------------------

Daily Log	Date:	4	8	08
	No.			
	Sheet	Of		

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip., then head to MRS-16
 0700 Start EM-61 w/u
 0715 Calibrate EM-61s
 0745 Start real-time. Team 2 working w/ us b/c one of their team members went to doctor.
 0830 V. Valdez back to office
 0900 Break
 0915 Resume work
 1115 V. Valdez returns
 1130 Lunch
 1200 Resume work, Team 2 breaks off to fly other grid
 1500 Break
 1515 Resume work
 1600 Go to calibrate EM-61s, then back to office
 1700 Leave

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: Sunny + windy IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner

SIGNATURE:  DATE: 4-8-08

Daily Log	Date:	4	10	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Real-time EM-61*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip + head to MRS-16
 0650 start EM-61 w/n
 0710 EM-61 calibrations
 0730 start real-time
 0900 Break
 0915 Resume work
 1130 Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 Go to calibrate EM-61
 1630 Back to shop to unload equip + download data
 1700 Go home

VISITORS ON SITE: *Kevin, Eric, Tim, M, Tim, Charles, Hank* CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: *Sunny* IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: *M. Lightner, L. Chang*
 SIGNATURE: *[Signature]* DATE: *4-10-08*

FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	9	08
	No.			
	Sheet		Of	

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip., Has head to ~~EM-61~~ MRS-16
 0655 start EM-61 w/u
 0710 EM-61 calibrations
 0730 Start real-time
 0930 Break
 0945 Resume work
 1130 ~~work~~ Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 Go to calibrate EM-61
 1630 Back to office for unload equip., download data
 1700 Leave

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner

SIGNATURE:  DATE: 4-9-08



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 04/10/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D

Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation

Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak

Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor

Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911

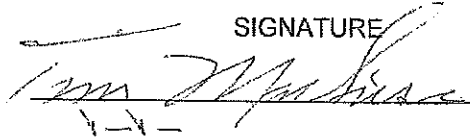

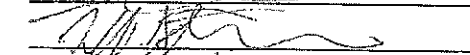
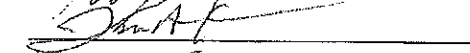
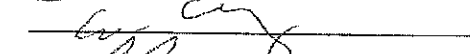
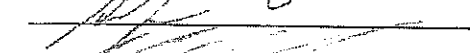
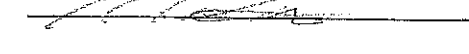

Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.

Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,

Other GA-52's, EM61s, radiograph, em61. Special attention to pre-exposure Armor Technu and cleanser. PPE may include nitrile gloves and tyvek.

Temp forecast 50-60 winds to 11mph

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Tim Mathisen</u>	<u></u>
<u>Val Valdez</u>	<u></u>
<u>Tim Harron</u>	<u></u>
<u>Jeff Steinwand</u>	<u></u>
<u>John Kander</u>	<u></u>
<u>Colin Chang</u>	<u></u>
<u>Mike Lightner</u>	<u></u>
<u>Charlie Hutchison</u>	<u></u>

JOB SAFETY ANALYSIS

Shaw Shaw Environmental, Inc.

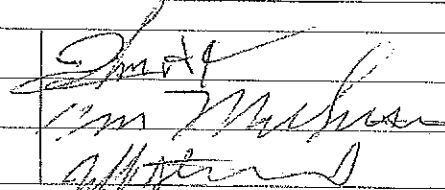
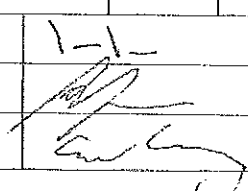
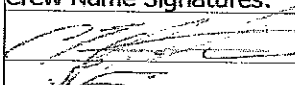
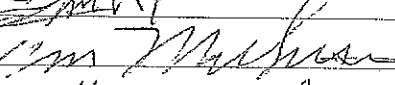
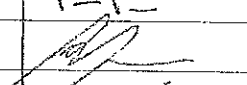
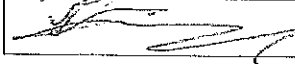
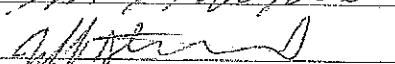
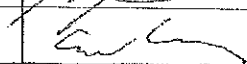
Driving

Date: 041008

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): Former Fort Ord		
Required PPE:	Safety Access / Location	Supervisor of Work:
N/A	Safe Haven: Office	JSA Prepared by: James Truman
	Wind Direction: westerly	Are other crews in area? No
	Evacuation Route: most direct	
Pre-Job Preparation		
1 Fill out JSA		New:
2 Review JSA (everyone)	Assembly Point: team vehicle	Revised: x
3 Sign JSA (everyone)		
Job Task (What are You Doing)		Audit the Job
Transportation vehicle operation at Fort Ord on site		Audit Time:
Transportation vehicle operation traveling to and from the Fort Ord Site		
Potential Hazards		Supervisor's Comments
Physical hazards; large debris on road, wet roads reducing friction, animals on road (e.g.. Deer), other drivers		
Driver generated hazards: excessive speed, driving under the influence of alcohol, driving while excessively tired, and other driving legal violations		
Non-driver generated hazards: other drivers talking on cellular phones, people tailgating at non-safe distances, drunken drivers, erratic drivers, angry drivers		
Other hazards: using cell phones when refueling vehicles.		
Fog and other inclement weather		
Pedestrians and bicycles on road		
Recommended Action or Procedure		Supervisor's Initials
All person's operating a motor vehicle should have completed the following training: Smith System Advanced Driver training SOP: Motor Vehicle Operation (HS800)		
All drivers' shall observe California Department of Motor Vehicle code regulations and should exercise cautious defensive driving while operating a motor vehicle		
When refueling any vehicles, make sure to turn off vehicle and cell phones to avoid explosion/fire hazards		
All drivers shall have a valid state issued drivers license		
Remember that it's the " Law" to have lights on when operating windshield wipers!		
Approach blind corners at safe speed.		
Crew Name Signatures:		
		
		



JOB SAFETY ANALYSIS

Date: 4/10/2005

Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):			
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location		Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office		
	Wind Direction: From west		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: return to office		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Assembly Point: Site gate		
Job Task (What are You Doing)			Audit the Job Audit Time:
Hand Excavation of MEC			
Sort scrap			
QC anomalies			
Potential Hazards			Supervisor's Comments
Slips, Trips and Falls			
Biological hazards, insects, snakes, poison oak, UV			
UXO			
Heavy lifting			
strains and sprains			
Accidental detonation			Supervisor's Initials
Recommended Action or Procedures			
Observe walking area/conditions			
Work stops during periods of lightning/severe weather			
Smoking in designated areas only, park vehicles on dirt roads			
avoid poison oak, don't disturb bees.			
Identify potential fillers and fuze condition on intact munitions			
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles			
Positive ID, excavate within one foot by hand, pinpoint with GA52.			
Weights of scrap buckets, do not overfill, EM61 is 2 man lift			
stop digging on or handling MPPEH when passersby on roadways.			
Crew Name Signatures:			

Equipment Inspection

Equipment Description: <i>Pick up</i>	Equipment ID: <i>10867</i>
Hours/Mileage: <i>412583</i>	Location: <i>FI. Dept</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input checked="" type="checkbox"/> Cab/Doors/Widnows/Mirros <i>OK</i> | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
<i>No problems</i>	
Inspected By: <i>MATHISON</i>	Date: <i>4-10-08</i>

Equipment Inspection

Equipment Description: <i>Ranger pickup</i>	Equipment ID: <i>17343</i>
Hours/Mileage: <i>17650</i>	Location: <i>Ft Ord</i>
General Condition (Check defects only/Explain under comments)	
<input type="checkbox"/> Cab/Doors/Widnows/Mirros	<input type="checkbox"/> Tires/Lugs
<input type="checkbox"/> Coolant Leak	<input type="checkbox"/> Suspension
<input type="checkbox"/> Drive Train Leak	<input type="checkbox"/> Fire Extenguisher
<input type="checkbox"/> Hydraulics	<input type="checkbox"/> Flares
<input type="checkbox"/> Other Leaks (Identify)	<input type="checkbox"/> Triangles
<input type="checkbox"/> Gauge/Warning Leaks	<input type="checkbox"/> Horn
<input type="checkbox"/> Windshield Washers/Wipers	<input type="checkbox"/> Seat Belt
<input type="checkbox"/> Brakes (Services/Parking)	<input type="checkbox"/> Backup Alarm
<input type="checkbox"/> Lights	<input type="checkbox"/> Non-Slip Surfaces
<input type="checkbox"/> Tum Signals	<input type="checkbox"/> Air Tanks
Comments: <i>No Problems</i>	
Inspected By: <i>Hutchinson</i>	Date: <i>4/10/08</i>

Equipment Inspection

Equipment Description: <i>Polar F-150</i>	Equipment ID: <i>G02 3584A</i>
Hours/Mileage: <i>27825, 2</i>	Location: <i>FT ORC</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Waming Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>Tim Hernandez</i>	Date: <i>04-10-08</i>

Equipment Inspection

Equipment Description: <i>PLU TRUCK</i>	Equipment ID: <i>1588F</i>
Hours/Mileage: <i>7068 mi</i>	Location: <i>Joe Lloyd Wash</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input checked="" type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input checked="" type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input checked="" type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Tum Signals | <input checked="" type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>[Signature]</i>	Date: <i>4-10-08</i>

Equipment Inspection

Equipment Description: <i>Brown '04 Chevy 4x4</i>	Equipment ID: <i>E310507</i>
Hours/Mileage: <i>39021</i>	Location: <i>Fort Ord</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm <i>N/A, use horn</i> |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>[Signature]</i>	Date: <i>4-18-08</i>



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Friday, April 11, 2008
Report: 4/11/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 55 F MAX. 60 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10) *9 KSS*

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kandcer, UXO Tech I (10) *9 KSS*

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Completed field inspection on 4 grids. All Pass. Inspected real time EM61 acquire, dig, and EM61 QC. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

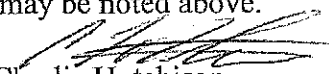
Safety inspections were conducted at work site. No problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. SUXOS did a rough survey 10 ten grids in the NE for anomaly density. 5 of them are heavily dense with anomalies but doable in the real time phase of clearance.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

Follow-up Quality Control Inspection Checklist

Report No. 2

Date: 04/11/08

Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024 and Marty's checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			

Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids C3A2A1, C3A2A2, C3A2B1, and C3A3F5. All pass field QC inspection.

Inspected By: 
Charlie Hutchison
 SHAW UXOQC/SO

Date: 04/11/08

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	8
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:
0630 - On site. Per Peter Kelsall instructions, I gave a brief on what is considered artifacts and what must to done when artifacts are encountered.
0700 - Team 2 continues to clear grids in the south west. Team 1 is delayed due to off loading materials needed by Dan Nohrden group.
0800 - Team 1 on MRS-16 and clearing grids in the north east.
0800 - 1000 - Out in the field to observe operations.
1400 - 1630 - Did a rough survey of approx. 10 grids located east of the main gate. Some grids appear to have a low density of metal materials and other grids have numerous hot spots which I consider medium to high density. I believe we will have about 5 grids that may be difficult to clear, but doable.
1645 - Secured all materials remove from the grids.
1700 - Secured.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

Daily Log	Date:	4	11	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip, then to MRS-16

0700 Start EM-61 w/u

0715 EM-61 calibrations

0730 Start real-time

0930 Break

0945 Resume work

1130 Lunch

1200 Resume work

1500 Break

1515 Resume work

1600 Calibrate

1700 Home

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

Sunny

SHAW PERSONNEL ON SITE: M. Lightfoot, C. Chang

SIGNATURE: [Signature] DATE: 4-11-08



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/11/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other Using ISA's weekend driving

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Tom Ghislotto	



JOB SAFETY ANALYSIS

Date: 4/11/08
 Job#: 846075
 Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	
	Wind Direction:	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: most direct	
	Assembly Point: Team Vehicle	
	Supervisor of Work: Mathisen	
		JSA Prepared by: Are other crews in area? yes
		exclusion zone
		New: <input checked="" type="checkbox"/> X
		Revised:
Job Task (What are You Doing)		Audit the Job Audit Time:
<i>Big Holes</i>		
<i>LAY OUT GUIDES</i>		
<i>DRIVING</i>		
Potential Hazards		Supervisor's Comments
<i>SLIP TRIPS FALLS</i>		
<i>OTHER DRIVERS</i>		
<i>FROM</i>		
Recommended Action or Procedures		Supervisor's Initials
<i>WATCH WHEN YOU PUT YOUR FEET</i>		<i>[Signature]</i>
<i>WATCH HOW YOU DRIVE</i>		
Crew Name Signatures:		
<i>John A. Kemack et</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/11/08

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: office	JSA Prepared by: <i>V. A. D. R. L.</i> Are other crews in area? yes
	Wind Direction:	exclusion zone
Evacuation Route: most direct		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Team Vehicle	New: <input checked="" type="checkbox"/> X
		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Remediation		Supervisor's Comments
Potential Hazards		Supervisor's Initials
Strains sprains		
UXO		
Poison oak		
Pedestrians on Road		
Recommended Action or Procedures		
Ergonomic techniques		
Dig to side of anomaly		
Proper PPE & Use of Personal Equip		
Drive Speed Limit		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 50 F MAX. 58 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Accompanied the OESS for QA inspection of 11 grids. Inspected real time EM61 acquire, dig, and EM61 QC. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Tuesday, April 15, 2008
Report: 4/15/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. No problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Accompanied the OESS for QA inspection of 11 grids. See note on QC FADL about west fence line clearance.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

DATE	4/15/2008
NO.	17
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord **Project No :** 846075

Field Activity MSR-16 hand excavation of real time EM61 picks.

Company Name: Shaw Environmental

Today's Activities:

0630 Tailgate meeting conducted, ergonomics in the field

0645 observed schonstedt testing at test pit.

0700 Inspecting grids compliance and quality.

0900 Sent out daily report.

0930 Inspected fence for level of effort to remove and anomaly problems.

1000 with Team 2 observing operations. No problems, clearance area marked on west fence.

1130 with team 2 observing the operations near wire rope gate and a water line. No problems.

1300 inspecting grids.

1400 Accompanied OESS to inspect grids.

1530 inspection complete, no apparent problems. Sent OESS a summary of grid numbers.

1630 Scrap sort, no problems. Port-a-john back to office for cleaning tomorrow.

1700 Done for the day.

Note: Agree with our field geophysicists that the west fence plus hot rock near fence is too much interference with EM61. They should widen distance from fence during their real time work.

Team 2 is clearly marking the west edge of their cleared areas.

VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present	
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS
p.cloudy, Windy in PM Low 49 high 59	NONE

SIGNATURE:  Charlie Hutchison **DATE:** 4/15/2008

DATE	4/15/2008
NO.	16
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal 846075

Field Activity: Target Investigation

Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Vaidez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site.

0700 - Two UXO Teams continue to clear real time QC grids.

0915 - Submitted a Detonation Assessment Form to the BRAC office. The form requested an approval for conducting a UXO disposal operation for next Tuesday April 22.

0930 - 1100 - In the field checking on clearance operation. Teams are moving right along.

1500 - 1600 - Out on MRS-16. No problems noted with the clearance operation.

1645 - MD and cultural debris was certified free of hazards and secured in lockable containers.

1700 - Done for the day.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:
See QC daily.

IMPORTANT TELEPHONE CALLS:

Daily Log	Date:	4	15	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

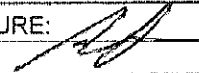
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0610 On site to load equip + head to MRI-16
 0700 start EM-61 ~~calibrations~~ ML w/n
 0715 EM-61 calibrations
 0730 Start real-time
 0930 Break
 1045 Resume work
 1130 Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 Go to calibrate EM-61
 1630 Back to unload + download
 1500 Do expense report
 1530 Leave for day

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: C. Chang, M. Lightner

SIGNATURE:  DATE: 4-15-08

Follow-up Quality Control Inspection Checklist

Report No. 6
Date: 04/15/08

Feature of Work: <u>Hand Excavation: real time acquire and QC</u>	Project No. <u>846075</u>
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024 , Martys checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability			
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Chris Prescott, C. Huckins, SUXOS, UXOTeam 2			
13. Port-a-john to the office for service.	XX		
13. Government Representative: Clinton Huckins			

Remarks: Combination of fence and hot rocks on portions of west fence line influencing EM61's. A wider distance from Real-time area and the fence will happen. Team 2 is marking edge of sweeps with orange flags with a T on them.



Inspected By: Charlie Hutchison

Date: 04/15/08



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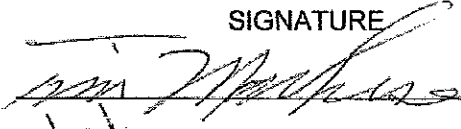
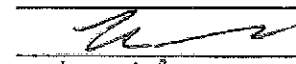
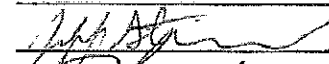
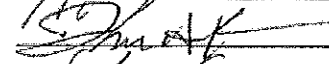
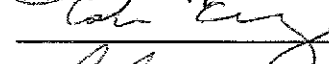
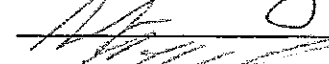

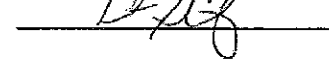

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/15/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash,
 Other _____

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Tim Mathisen</u>	<u></u>
<u>Val Valdez</u>	<u></u>
<u>Tim Herron</u>	<u></u>
<u>Jeff Steinwand</u>	<u></u>
<u>John Kander</u>	<u></u>
<u>Colin Chang</u>	<u></u>
<u>Mike Lightner</u>	<u></u>
<u>Charlie Hutchison</u>	<u></u>
<u>Don CEFEL</u>	<u></u>



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/15/08

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	
	Wind Direction:	
	Evacuation Route: most direct	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Supervisor of Work: Mathisen	
	JSA Prepared by: <i>VLD</i>	
	Are other crews in area? yes	
		exclusion zone
Assembly Point: Team Vehicle		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UxO Remediation		
Potential Hazards		Supervisor's Comments
Strains & sprains		
uto		
Poison Oak		
Peds & Bicycles on road		
Recommended Action or Procedures		Supervisor's Initials
Ergonomics		
Dig to side of roadway		
PPE - Techn		
Drive @ safe speed		
Crew Name Signatures:		
<i>VLD</i>		
<i>Mathisen</i>	<i>HS</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/15/08

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	Supervisor of Work: Mathisen JSA Prepared by: Are other crews in area? yes exclusion zone
	Wind Direction:	
Evacuation Route: most direct		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Team Vehicle	New: <input checked="" type="checkbox"/> X Revised: <input type="checkbox"/>
	Job Task (What are You Doing)	
	UXO REMEDIATION DRIVING	
Potential Hazards		Audit the Job Audit Time:
UXO OTHER DRIVERS SUN BLIND BEHIND OAK		Supervisor's Comments
Recommended Action or Procedures		Supervisor's Initials
DIE TO THE SIDE OF HIT WATCH OUT FOR OTHER DRIVERS USE SOFT SHOULDER BEHIND FOR BEHIND OAK		
Crew Name Signatures:		

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 42 F MAX. 62 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (10)

Test or control activities:

Inspected 5 grids, all pass SHAW QC. Inspected real time EM61 acquire, dig, and EM61 QC. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	

TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Wednesday, April 16, 2008
Report: 4/16/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

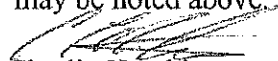
Initial UXO brief, Site Brief, safety plans, and safety equipment for new UXO tech. Safety inspections were conducted at work site. Team 1 used radiograph. No problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Team 2 encountered buried pile of small arms brass. SUXOS and OESS agree they should clear areas similar to that using a schonstedt if the EM61 bogs down.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 2- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs
- 1 948

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site.

0700 - Two UXO Teams continue to clear real time QC grids.

0900 - 1100 - Out in the field. All is going well.

1100 - 1230 - Attended weekly progress meeting with USACE.

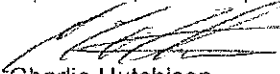
1350 - Visited the fire department and requested a fire assessment at MRS-16 in preparation for our UXO disposal operation on Tuesday April 22.

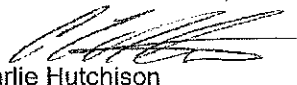
1500 - Visited the UXO Teams working at MRS-16. Team 2 is bogged down in the north west corner due to encountering large amounts of small arms brass. The team was instructed to clear the small arms area using schonstedts instead of the EM-16.

1645 - MD was certified free of hazards and secured.

1700 - Field operations secured.


VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
See QC daily.	

Follow-up Quality Control Inspection Checklist			
Report No. <u>6</u>			
Date: <u>04/16/08</u>			
Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison, Team 2	X		
13. Briefed team on results of inspection.	X		
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J4J5, B3J4J6, B3J4J7, C3A4A5, and C3A4A6. All pass field QC inspection.			
Inspected By:  SHAW UXOQC/SO		Date: 04/16/08	

Follow-up Quality Control Inspection Checklist			
		Report No. <u>7</u>	
		Date: <u>04/16/08</u>	
Feature of Work:	<u>Hand Excavation: real time acquire and QC</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 , Martys checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison	X		
13. Port-a-john still at the office for service.		X	
13. Government Representative: Clinton Huckins			
Remarks: Port-a-john is scheduled for Thursday. Teams got screening shovels for sifting brass. Brass is slowing Team 2 in C3B2D6 Biologist team on MRS-16 1115-1145, caused no delays to the UXO teams.			
Inspected By:  <u>Charlie Hutchison</u>		Date: <u>04/16/08</u>	
SHAW UXOQC/SO			

DATE	4/16/2008
NO.	18
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks.		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted, OSHA recordables and reporting process.		
0645 observed schonstedt testing at test pit.		
0900 Sent daily report		
1000 attended site specific training for FT Ord with biologists and new UXO escort Tech.		
1030 Helped equip biologist team with safety equipment		
1030 preparing grids for inspection		
1130 Inspecting 5 grids in NE corner.		
1300 working on inspections, port-a-johns, and screening shovels.		
1400 Attended QC meeting.		
1530 inspection complete, no apparent problems. Sent OESS a summary of grid numbers.		
1600 Observe team 2, found a lot of small arms brass		
1615 observing radiography of 2.36 rocket, no problems.		
1630 Scrap sort, no problems. Port-a-john back to office for cleaning tomorrow.		
1700 Done for the day.		
Note: Agree with our field geophysicists that the west fence plus hot rock near fence is too much interference with EM61. They should widen distance from fence during their real time work.		
Team 2 is clearly marking the west edge of their cleared areas.		
VISITORS ON SITE: Biologists and UXO escort		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS
p.cloudy, Windy in PM Low 49 high 59		NONE
SIGNATURE:  Charlie Hutchison		DATE: 4/16/2008

FIELD ACTIVITY DAILY LOG

F1

Daily Log	Date:	4	16	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Real-time EM-61*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip + head to MRS-16
 0700 Start EM-61 w/d
 0715 EM-61 calibrations
 0730 Start real-time
 0930 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 Calibration
 1630 Back to office
 1700 Home

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: _____ IMPORTANT TELEPHONE CALLS: _____

Sunny

SHAW PERSONNEL ON SITE: *C. Chang, M. Lightner*

SIGNATURE: *[Signature]* DATE: *4-16-08*



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/16/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D

Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation

Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, snakes, and ticks

Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor


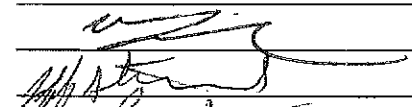
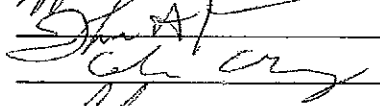
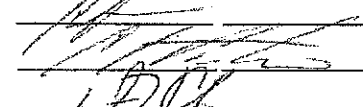
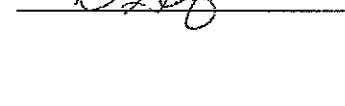

Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911

Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.

Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, techno pre-exposure and cleansers, and alcohol.

Other _____

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	_____
Tim Herron	_____
Jeff Steinwand	
John Kandcer	
Colin Chang	
Mike Lightner	_____
Charlie Hutchison	
Don COFF	

U.S. ARMY ENGINEER DISTRICT, SACRAMENTO
ORDNANCE AND EXPLOSIVE
QUALITY ASSURANCE MEMO GESPK FORM 948

TO: Shaw Environmental, Inc
TERC DACW05-96-D-0011

DATE: April 15, 2008

Control Number:
041508

PROJECT NUMBER:
Task Order No. 016

PROJECT LOCATION: MRS 16
Former Fort Ord, CA

SUSPENSE: NA

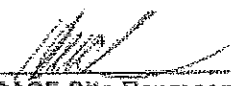
SUBJECT ITEMS(S) (Check all that apply):

- Work Plan Quality Assurance
 Safety Violation Other
 Safety Comments

DESCRIPTION: The following real time eleven (11) grids passed analog QA;

C3A1B0
C3A1C0
C3A1C9
C3A1D0
C3A1D9
C3A2A2
C3A2B1
C3A2C1
C3A2D1
C3A2D2
C3A3D0

Prompt correction or compliance with contract specifications is requested. A written response is required in the action taken block.



USACE Site Representative
Clinton J Huckins, OE Safety Specialist

RECEIPT ACKNOWLEDGED:

Contractors Representative

ACTION TAKEN:



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Thursday, April 17, 2008
Report: 4/17/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 54 F MAX. 69 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair,
N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (10)

Test or control activities:

Inspected 3 grids, all pass SHAW QC. Accompanied the OESS during his analog QA inspection of grids. No issues during inspection. Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Thursday, April 17, 2008
Report: 4/17/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:


Safety inspections were conducted at work site. Team 1 used radiograph. No problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Team 2 making progress near fence on north side.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 2 Field daily activity logs
- 1 948



Follow-up Quality Control Inspection Checklist			
			Report No. _____
			Date: <u>04/17/08</u>
Feature of Work:	<u>QC Inspection</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	_____
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.	X		
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J4H6, B3J4H7, and B3J4I7. All pass field QC inspection.			
Inspected By: <u>Charlie Hutchison</u> <u>SHAW UXOQC/SO</u>			Date: <u>04/17/08</u>



TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/17/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D

Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation

Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak

Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor

Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911

Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment.

Other Decon - personal and equipment for poison oak

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Don Creef	

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

L19

Date: 4/17/08

Job#: 846075

Permit#: _____

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16						
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Are other crews in area? yes exclusion zone				
	Safe Haven: office					
	Wind Direction:					
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Evacuation Route: most direct	<table border="1"> <tr> <td>New:</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Revised:</td> <td><input type="checkbox"/></td> </tr> </table>	New:	<input checked="" type="checkbox"/>	Revised:	<input type="checkbox"/>
	New:		<input checked="" type="checkbox"/>			
	Revised:		<input type="checkbox"/>			
Assembly Point: Team Vehicle						
Job Task (What are You Doing)		Audit the Job Audit Time:				
UXO Remediation		Supervisor's Comments				
Potential Hazards						
UXO Strains & Sprains Poison Oak Teds & Bicycles						
Recommended Action or Procedures		Supervisor's Initials				
Dig next to anomaly / Positive ID						
Use ergonomics						
PPE & Tension						
Safe speeds						
Crew Name Signatures:	<i>[Signature]</i>					
<i>[Signature]</i>	<i>[Signature]</i>					
<i>[Signature]</i>	<i>[Signature]</i>					
<i>[Signature]</i>	<i>[Signature]</i>					
<i>[Signature]</i>	<i>[Signature]</i>					



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 1 of 2
Date: Friday, April 18, 2008
Report: 4/18/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 50 F MAX. 56 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (6)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (0)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (10)

Test or control activities:

Inspected 7 grids, all pass SHAW QC. Received a 948 for 12 grids passing QA inspection.
Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Shaw™ Shaw Environmental, Inc.

TERC II

Contract No. DACW05-96-D-0011
CTO 016

K-1

Page 2 of 2
Date: Friday, April 18, 2008
Report: 4/18/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Recommend using backhoe on mound feature with scrap metal through out. No other problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Team 1 has a lot of anomalies near the waterline, slows progress.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.



Charlie Hutchison
UXOQC/SO

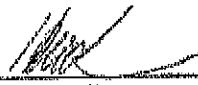
Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

1 948
Equip. checklist
2/16



Follow-up Quality Control Inspection Checklist			
			Report No. _____
			Date: <u>04/18/08</u>
Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.	X		
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids C3A2G1, C3A2G4, C3A2H6, C3A2I4, C3A2J3, C3A2J4, C3A3B4, AND C3A3B5. All pass field QC inspection.			
Inspected By: <u></u> SHAW UXOQC/SO	Date: <u>04/18/08</u>		

U.S. ARMY ENGINEER DISTRICT, SACRAMENTO ORDNANCE AND EXPLOSIVE QUALITY ASSURANCE MEMO CESPCK FORM 948		
TO: Shaw Environmental, Inc TERC DACW05-96-D-0011	DATE: April 17, 2008	Control Number: 041708
PROJECT NUMBER: Task Order No. 016	PROJECT LOCATION: MRS 16 Former Fort Ord, CA	
SUSPENSE: NA		
<p>SUBJECT ITEMS(S) (Check all that apply):</p> <p> <input type="checkbox"/> Work Plan <input checked="" type="checkbox"/> Quality Assurance <input type="checkbox"/> Safety Violation Other <input type="checkbox"/> Safety Comments </p> <p>DESCRIPTION: The following "real time" twelve (12) grids passed analog QA;</p> <p> B3J4J5 B3J4J6 B3J4J7 C3A4A5 C3A4A6 C3A4B5 C3A4B6 C3A4C4 C3A3D1 C3A3D3 C3A3E6 C3A3F5 </p> <p> <input type="checkbox"/> Prompt correction or compliance with contract specifications is requested. A written response is required in the action taken block. </p> <div style="text-align: right; margin-right: 100px;">  <hr style="width: 200px; margin: 0 auto;"/> USACE Site Representative Clinton J Huckins, OE Safety Specialist </div> <p> RECEIPT ACKNOWLEDGED: <hr style="width: 200px; margin: 0 auto;"/> Contractors Representative </p>		
<p>ACTION TAKEN:</p>		

DATE	4/18/2008
NO.	19
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Investigation	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	6
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	0
Don Creef	UXO Tech 2	10

Today's Activities:
 0630 - On site.
 0645 - Conducted truck safety inspections.
 0715 - UXO Teams out in the field clearing grids.
 0900 - Fire Department on site to conduct a fire assessment in preparation for next Tuesday's UXO disposal operation.
 1230 - I'm in the field to relieve Val Valdez as Team Leader. Val needed time off to attend to personal business.
 1645 - Certified MD and stored in lockable containers.
 1700 - Secured.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:



FIELD ACTIVITY DAILY LOG

Daily Log	Date:	4	7	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS:

- 0630 On site to load equip. & head to MRS-16
- ~~0700~~ EM-61 w/u
- 0715 EM-61 calibration
- 0730 Start real-time
- 0930 Break
- 0945 Resume work
- 1130 Break
- 1200 Resume work
- 1500 Break
- 1515 Resume work
- 1600 Calibrate EM-61
- 1630 Back to office to unload & download, answer emails
- 1715 Leave

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: Sunny IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: C. Cheng, M. Lightner DATE: 7-17-08
 SIGNATURE:



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/18/08 Time 0630 Job Number 846076
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment.
 Other Weekend driving, backing

ATTENDEES

NAME PRINTED
Tim Mathisen
Val Valdez
Tim Harron
Jeff Steinwand
John Kander
Colin Chang
Mike Lightner
Charlie Hutchison
Don Creef

SIGNATURE

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: 4/18/08 4/10/2005
 Job#: 846075
 Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):			
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location		Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office		
	Wind Direction: From west		
Evacuation Route: return to office			
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate		New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:	
Hand Excavation of MEC			
Sort scrap			
QC anomalies			
Potential Hazards		Supervisor's Comments	
Slips, Trips and Falls			
Biological hazards, insects, snakes, poison oak, UV			
UXO			
Heavy lifting			
strains and sprains			
Accidental detonation		Supervisor's Initials	
<i>Pedestrians & Bicycles (See Other Classic Race Today)</i>			
Recommended Action or Procedures			
Observe walking area/conditions			
Work stops during periods of lightning/severe weather			
Smoking in designated areas only, park vehicles on dirt roads			
avoid poison oak, don't disturb bees.			
Identify potential fillers and fuze condition on intact munitions			
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles			
Positive ID, excavate within one foot by hand, pinpoint with GA52.			
Weights of scrap buckets, do not overfill, EM61 is 2 man lift			
stop digging on or handling MPPEH when passersby on roadways.			
Crew Name Signatures:	<i>[Signature]</i>		
<i>[Signature]</i>			
<i>[Signature]</i>			
<i>[Signature]</i>			
<i>[Signature]</i>			

Form 9-2

Equipment Inspection

Equipment Description: <i>RAM 1500</i>	Equipment ID: <i>SD41133</i>
Hours/Mileage: <i>27412</i>	Location: <i>Fot ORD</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Waming Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
<i>Flares + Triangle N/A</i>	
<i>Backup Alarm + Air Tanks N/A</i>	
Inspected By: <i>Don CREEP</i>	Date: <i>4/18/08</i>
<i>[Signature]</i>	

White/Superintendent Blue/Warehouse Yellow/Remains

Form 9-2

Equipment Inspection

Equipment Description: <i>Ford Transit</i>	Equipment ID: <i>Ford Transit 35842</i>
Hours/Mileage: <i>229766</i>	Location: <i>FT 020</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Windows/Mirrors | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extinguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>Tim Heaton</i>	Date: <i>04-14-08</i>

White/Suparintendant Blue/Warehouse Yellow/Remains

Form 9-2

Equipment Inspection

Equipment Description: <i>Truck, Ranger</i>	Equipment ID: <i>1734B</i>
Hours/Mileage: <i>17880</i>	Location: <i>FT Ord, MRS-16</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Waming Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments: <i>NO Problems</i>	
Inspected By: <i>C. Hutchison</i>	Date: <i>4/18/08</i>

White/Supintendent Blue/Warehouse Yellow/Remains

Form 9-2

Equipment Inspection



Equipment Description: <u>Pickup</u>	Equipment ID: <u>10867</u>
Hours/Mileage: <u>47035</u>	Location: <u>FS. Yard</u>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|---|
| <input checked="" type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extengulsher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input checked="" type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Waming Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input checked="" type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input checked="" type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input checked="" type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <u>MALINSON</u>	Date: <u>4-21-08</u>

White/Supervisor Blue/Warehouse Yellow/Remains

Form M-3

	Detonation Approval Checklist/Risk Assessment	
---	--	---

DATE(S) OF SHOT: 12 Apr 08 WINDOW FOR SHOT: 1000-1500

LOCATION OF SHOT: MRS-16 TYPES OF MEC: 37mm Projectiles & 2.36" Rockets

NET EXPLOSIVE WEIGHT (NEW) [*ESTIMATED]: 5 lbs NUMBER OF DETONATIONS: 4

Type of Engineering Control(s):		Site Preparation Measures:	
Sand Bagging	✓	Site Wet Down	
Soil Tamping		Vegetation Removal	
Barricades		Other	
Comments:			

A qualitative measure of the worst credible event resulting from personnel exposure to the unexploded ordnance:

LOW	MEDIUM	HIGH
1 <u>2</u>	3 4	5+

Distance to nearest inhabited location/structure likely to be at risk from the OE hazard:

LOW	MEDIUM	HIGH
<u>1</u> 2	3 4	5+

Weather Conditions:



LOW	MEDIUM	HIGH
1 <u>2</u>	3 4	5+

Wind Conditions:

LOW	MEDIUM	HIGH
1 <u>2</u>	3 4	5+

Submitted by: Tom Mathisen, Shaw
Ph: 775-722-6950

Form M-3

 Shaw®	Detonation Approval Checklist/Risk Assessment	
---	--	---

Assessment Total:	Low Risk <u>1-7</u>	Caution 8-14	High Risk 15-20
--------------------------	------------------------	-----------------	--------------------

- No individual detonation will exceed 15lbs NEW without prior approval
- All notifications will be sent two hours prior to detonation.
- COE Ordnance and Explosives Safety Specialist will be on site during detonation operations.
- Engineering Controls will be in place prior to detonation.
- Fire Department will be on site during detonation operations.

Approved

Date: 4/18/08


 for Gail Youngblood
 BRAC Environmental Coordinator

**PRESIDIO OF MONTEREY FIRE DEPARTMENT
MUNITIONS RESPONSE & ORDNANCE REMOVAL
FIRE RISK ASSESSMENT**

OPERATIONAL AREA: MRS-16
DATE OF ASSESSMENT: 04/18/2008
OPERATIONAL PERIOD: 04/22/2008

RISK VALUES

NUMBER VALUE

(1) LOWEST RISK – (5) HIGHEST RISK

SITE ACCESS: (Fire Suppression, Road Conditions, Obstructions, Etc.)
Value: 1

PRE-SUPPRESSION (Fuels, Site Access, Clearance Zone)
All shots will be pre-suppressed
Value: 2

DEMOLITION SHOT: (Surface, Subsurface, Type of OE, Removal Method)
Value: 1

TOPOGRAPHY: (Slopes, Ridges, Barriers, Canyons, Chimneys)
Value: 1

WEATHER: (Wind, Temperature, Relative Humidity)
Value: 2

FIRE SUPPRESSION: (Accessibility, Weather, Fuels, Suppression Factors)
Value: 1

TOTAL NUMBER VALUE: 8

TOTAL ASSESSMENT VALUES

0-12 LOW RISK

12-23 CAUTION

24-35 HIGH RISK

ASSESSED BY:

FORM UPDATED 13 January 2008

SPECIAL NOTATIONS

OPERATION: MRS-16

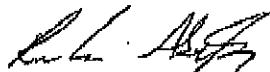
DATE: 04/18/2008

Weather: Based on long term forecast Sunny skies. High 55F and low 41F. Winds NW at 10 to 15 mph.
(National Weather Service)

Items scheduled for detonation (C4)

- A. 2.36 rockets (1)
- B. Land Mines (1)
- C. 37 mm Projectiles (1)

RED FLAGS 0



FIRE DEPARTMENT REPRESENTATIVE



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Monday, April 21, 2008
Report: 4/21/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 40 F MAX. 57 F

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (6)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (0)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Test or control activities:

Inspected 20 grids, all pass SHAW QC. Accompanied OESS for QA inspection of 11 grids.
Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Attended preparatory meeting for soil removal at MRS-16, Tom G. has reporting on this feature of work. Used backhoe on mound feature with scrap metal through out. No other problems

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TH-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Backfilled nearby hole with mound.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

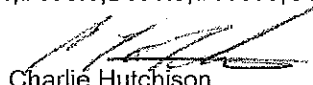

Charlie Hutchison
UXOQC/SO

Attachments:

1- inspection check list
Tailgate, JSAs

47 Field daily activity logs

1- vehicle check list

Follow-up Quality Control Inspection Checklist			
Report No. 9			
Date: 04/21/08			
Feature of Work: QC Inspection	Project No. 846075		
Location: MRS-16 FT Ord, CA	Delivery Order No.		
Vendor/Supplier: SHAW E and I	Purchase Order No: N/A		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.	X		
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J3F6,B3J3F7,B3J3G2,B3J3G3,B3J3G4, B3J3G5,B3J3G8,B3J3G9,B3J3H3,B3J3H4,B3J3H5,B3J3H9,B3J3I1, B3J3I2,B3J3I4,B3J3I6,B3J3I9,B3J3J8,C3A3A8, AND C3A4A2. All pass field QC inspection. Glass in B3J3H9.			
Inspected By:  Charlie Hutchison SHAW UXOQC/SO	Date: 04/21/08		

DATE	4/21/2008
NO.	20
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Vai Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Don Creef	UXO Tech 2	0

Today's Activities:

0630 - On site.

0700 - Two UXO Clearance Teams performing real time QC in tree areas.

0930 -1300 - I provided UXO support to an excavation crew removing soil from a known HTRW site on MRS-16. Also provided provided UXO support for investigating a Larine site. The Larine was excavation to 4 feet and no MEC was encountered.

1600 - Out in the field to observe clearance teams using the x-ray to determine contents of 7 - 2.36 inch Rockets. The x-ray film clearly showed that each Rocket was inert.

1700 - Certified and stored MD.

1710 - Secured for the day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

Daily Log	Date:	4	21	08
	No.			
	Sheet	i	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip, then go to get gas, then to MRS-16

0705 Start EM-61 w/a, then calibrate

0740 Start real-time

0930 Break

0945 Resume work

1130 Lunch

1220 Resume work

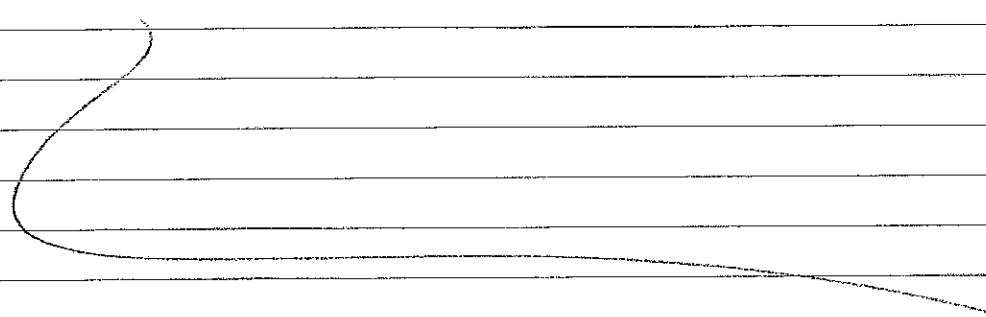
1520 Break

1515 Resume work

1600 Leave for calibrations

1645 Back to office to download + unload

1730 Home for the day



VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Sunny

SHAW PERSONNEL ON SITE: M. Lightner, C. Chang

SIGNATURE:

DATE: 4-21-08

FIELD ACTIVITY DAILY LOG

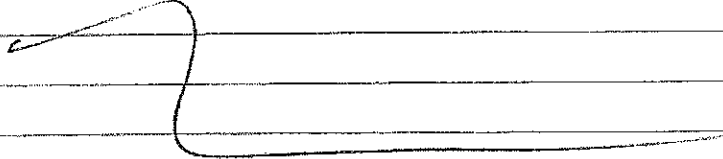
Daily Log	Date:	4	18	09
	No.			
	Sheet		Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip. & head to MRS-16
 0700 Start EM-61 w/u, do vehicle inspection
 0715 EM-61 calibrations
 0730 Start real-time
 0930 Break
 0945 Resume work
 1100 Back to shop to get batteries for Failing equip
 1130 Back to work
 1200 Lunch, V. Valdez leaves for day
 1230 Resume work, T. Mathison shows up to relieve V. Valdez
 1450 Break
 1505 Resume work
 1600 Leave for calibrations
 1630 Back to office
 1700 Home



VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

SHAW PERSONNEL ON SITE: M. Lighter, L. Chang

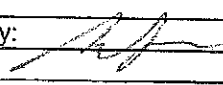
SIGNATURE: 

DATE: 4-18-09

Equipment Inspection

Equipment Description: E340507 Brown Chevy 4x4 Ext. Cab	Equipment ID: E340507
Hours/Mileage: 39074	Location: Fort Ord
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input checked="" type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments: No backup alarm, use horn	
Inspected By: 	Date: 4-18-08



JOB SAFETY ANALYSIS

Date: 4/21/08

Job#: 846075

Permit#: _____

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	
	Wind Direction:	
	Evacuation Route: most direct	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Supervisor of Work: Mathisen	
	JSA Prepared by:	
	Are other crews in area? yes	
		exclusion zone
Assembly Point: Team Vehicle		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UKO Rome direction		
Potential Hazards		Supervisor's Comments
Slip, Trips falls		
UKO		
Strains & Sprains		
Poison Oak		
Ticks, snakes, etc.		
X Rays		
Recommended Action or Procedures		Supervisor's Initials
Watch your step.		
Dig to side of animal		
Use Eppendorf		
Pre-exposed & Tyvek (PPE)		
Bug jars, leave snake alone		
Film badges / safe distance during op.		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/21/08 Time 0630 Job Number _____
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Transects in impact area, UXO escort
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D

Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation

Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand or eye injury, poison oak, snakes, and ticks

Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor

Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911

Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.

Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, techno pre-exposure and cleansers, and decon.

Other Accident prevention - rules and procedures

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Jim Mathisen</u>	<u>Jim Mathisen</u>
<u>JEFF STEINWAND</u>	<u>Jeff Steinwand</u>
<u>John A Kennedy</u>	<u>John A Kennedy</u>
<u>Tim H...</u>	<u>[Signature]</u>
<u>Dan CREEF</u>	<u>[Signature]</u>
<u>Van V...</u>	<u>[Signature]</u>
<u>Charles Hutchison</u>	<u>[Signature]</u>
<u>Mike Lightner</u>	<u>[Signature]</u>
<u>Colin Chang</u>	<u>[Signature]</u>



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Tuesday, April 22, 2008
Report: 4/22/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 41 F MAX. 63 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (0)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Test or control activities:

Initial QC inspections of demo operations. Demo materials and transport were adequate.

Equipment tests are adequate.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	

TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Tuesday, April 22, 2008
Report: 4/22/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site. Attended team leaders brief for demo ops. at MRS-16, good demo day.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. All UXO and DMM taken care of today.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

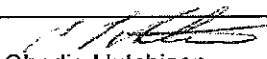

Charlie Hutchison
UXOQC/SO

Attachments:

- 2- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs
- 1-explosives usage record
- 1-QA submittal
- 1-948

DATE	4/22/2008
NO.	22
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks and MEC disposal by detonation		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted: Explosive safety and responsibilities		
0645 observed schonstedt testing at test pit		
0830 Sent daily report		
0845 working on data base and prep for demo		
0930 began demo operations; inspected transport vehicle, adequate		
1000 inspected explosive materials, adequate		
1030 attended demo team leaders brief		
1100 checked out anomaly in C3A2G4, MD large enough to fail grid but in DGM area.		
1250 debrief, good job.		
Comment: minor delay awaiting operator for backhoe, demo crew came up with key.		
1400 paperwork.		
1700 Done for the day.		
VISITORS ON SITE: cdl truck driver and fire dept.		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		IMPLEMENTING VARIANCE TII-024;
p.cloudy, Windy in PM Low 41 high 63		IMPORTANT TELEPHONE CALLS
		NONE
SIGNATURE:  Charlie Hutchison		DATE: 4/22/2008

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal **846075**
Field Activity: Real Time QC/UXO Disposal Operations
Company Name: Shaw Environmental Inc.

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Don Creef	UXO Tech 2	0

Today's Activities:
0630 - On site.
0700 - Team 2 outfitted one pickup for transporting explosives. Team 1 clearing grids.
0800 - Team 2 clearing grids.
1000 - At the ESL to draw explosives for the UXO/DMM disposal operation.
1130 - Fire Department Engine on site MRS-16
1115 - 1300 - Conducted disposal operation. No problems encountered.
1300 - Fire Department released from duty.
1600 - Out in the field to observe clearance operation.
1700 - Certified and stored MD and other materials collected today.
1700 - Secured for the day.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

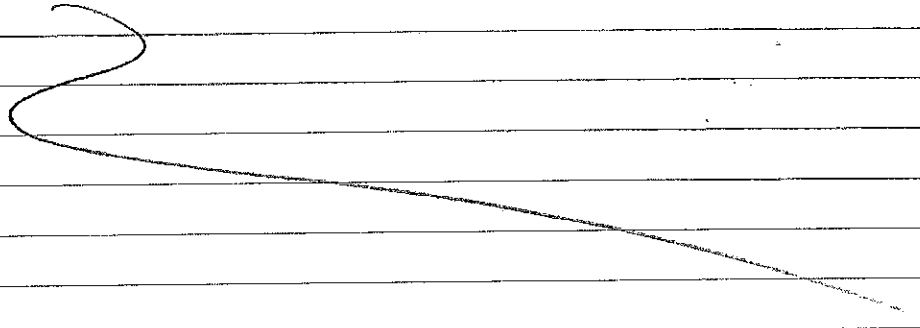
Daily Log	Date:	4	22	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61 + demo

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

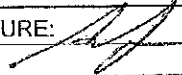
0630 On site to load equip, then to EM-61 MRS-16
 0700 Start EM-61 w/v, then calibrate
 0730 Start real-time
 1045 Stop for demo brief and prep, then demo
 1300 Back to real-time
 1500 Break
 1515 Resume work
 1600 To calibration
 1630 Back to office to unload ^{download} data, having to ~~download more data~~ ~~than before~~ do some data processing before downloading, takes longer than before
 1730 Home



VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny + overcast mix

SHAW PERSONNEL ON SITE: C. Cheng, M. Lightner DATE: 4-22-08

SIGNATURE: 

QC Submittal / 04/22/08


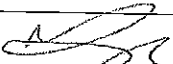
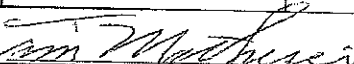
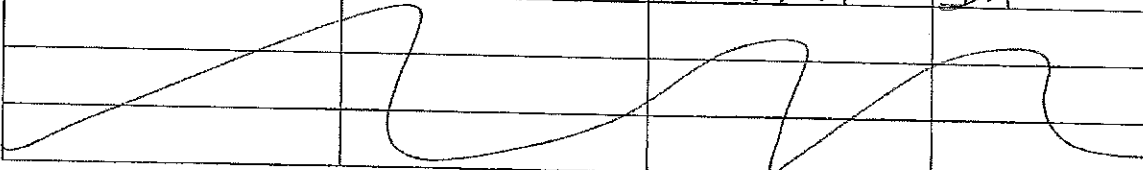
Grid	UXOQC (04/21/08)	Geo QC
B3J3F6	clh-pass	mjm
B3J3F7	clh-pass	mjm
B3J3G2	clh-pass	mjm
B3J3G3	clh-pass	mjm
B3J3G4	clh-pass	mjm
B3J3G5	clh-pass	mjm
B3J3G8	clh-pass	mjm
B3J3G9	clh-pass	mjm
B3J3H3	clh-pass	mjm
B3J3H4	clh-pass	mjm
B3J3H5	clh-pass	mjm
B3J3H9	clh-pass	mjm
B3J3I1	clh-pass	mjm
B3J3I2	clh-pass	mjm
B3J3I4	clh-pass	mjm
B3J3I6	clh-pass	mjm
B3J3I9	clh-pass	mjm
B3J3J8	clh-pass	mjm
C3A3A8	clh-pass	mjm
C3A4A2	clh-pass	mjm

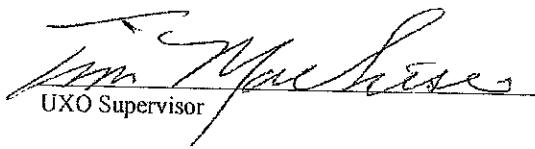
Form M-11

EXPLOSIVES USAGE RECORD


Team Number: 2 Date: 4-22-08

Team Leader: HERRON Project: 846075

EXPLOSIVES ISSUED			
Signature of Team Leader: 			
Item	Quantity	Lot Number	Checker's Initials
Charge Demo M186	15'	DA-1-15	JM
Lead Line	2500'	08JA07W1	JM
10gram Perforators	7	ASC-3125-302	JM
Det Cord	30'	101-01	JM
Novel MS 100	3	BBC GA L	JM
EXPLOSIVES EXPENDED			
Signature of Team Leader: 			
Item	Quantity	Lot Number	Checker's Initials
Charge Demo M186	15'	DA-1-15	JM
Lead Line	1000'	08JA07W1	JM
10gram Perforators	7	ASC-3125-302	JM
Det Cord	30'	101-01	JM
Novel MS 100	3	BBC G A L	JM
EXPLOSIVES RETURNED			
Signature of SUXOS: 			
Item	Quantity	Lot Number	Checker's Initials
Lead line	1500'	08JA07W1	JM
			


UXO Supervisor

4-22-08
Date

Initial Quality Control Inspection Checklist			
Report No. <u>1</u>			
Date: <u>4/22/08</u>			
Feature of Work:	Demolition Procedures	Project No.	846075
Location:	<u>FT Ord, MRS-16</u>	Delivery Order No.	<u>TO DY01</u>
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Insure Demo Team has the necessary vehicles and equipment	✓		
2. Verify that vehicles and Safety Equipment are Serviceable and On Hand	✓		
3. Verify and Inspect explosives upon receipt and issue	✓		
4. Verify Communication and Notification Requirements are met	✓		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	✓		
6. Check items filler identification.	✓		
7. Verify barricades and road guards are posted and exclusion zone is secure.	✓		
8. Verify Emergency Plans and Evacuation Routes are known	✓		
9. Participate in the Team Leaders Brief.	✓		
10. Check for proper PPE	✓		
11. Inspect the transport vehicle(s), review WP requirements.	✓		
12. Observe demo operations.	✓		
13. Review observations with Demo Team.	✓		
Remarks: <i>OESS: begin earlier than 1000. have support people and equip. on hand early.</i>			
Inspected By:  Charlie Hutchison SHAW Quality Control Specialist		Date: <u>4/22/08</u>	

U.S. ARMY ENGINEER DISTRICT, SACRAMENTO
ORDNANCE AND EXPLOSIVE
QUALITY ASSURANCE MEMO CESPCK FORM 948

TO: Shaw Environmental, Inc
TERC DACW06-96-D-0011

DATE: April 21, 2008

Control Number:
042108

PROJECT NUMBER:
Task Order No. 016

PROJECT LOCATION: MRS 16
Former Fort Ord, CA

SUSPENSE: NA


SUBJECT ITEMS(S) (Check all that apply):

- Work Plan
 Safety Violation
 Safety Comments
- Quality Assurance
Other

DESCRIPTION: The following "real time" eleven (11) grids passed analog QA;

B3J4H6
B3J4H7
B3J4I7
C3A2G1
C3A2G4
C3A2H6
C3A2I4
C3A2J3
C3A2J4
C3A3B4
C3A3B5

Prompt correction or compliance with contract specifications is requested. A written response is required in the action taken block.


USACE Site Representative
Clinton J Huckins, OE Safety Specialist

RECEIPT ACKNOWLEDGED:

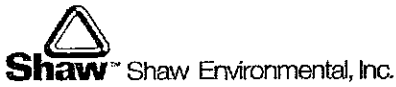
Contractors Representative

ACTION TAKEN:

Follow-up Quality Control Inspection Checklist			
		Report No. <u>9</u>	
		Date: <u>04/21/08</u>	
Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.	X		
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J3F6, B3J3F7, B3J3G2, B3J3G3, B3J3G4, B3J3G5, B3J3G8, B3J3G9, B3J3H3, B3J3H4, B3J3H5, B3J3H9, B3J3I1, B3J3I2, B3J3I4, B3J3I6, B3J3I9, B3J3J8, C3A3A8, AND C3A4A2. All pass field QC inspection. Glass in B3J3H9.			
Inspected By: <u>Charlie Hutchison</u> SHAW UXOQC/SO		Date: <u>04/21/08</u>	

JSA # _____

L19



JOB SAFETY ANALYSIS

Date: 4/21/08

Job#: 846075

Permit#: _____

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	
	Wind Direction:	
Evacuation Route: most direct		Supervisor of Work: Mathisen
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		JSA Prepared by: Are other crews in area? yes
Assembly Point: Team Vehicle		exclusion zone
New: <input checked="" type="checkbox"/>		Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Remediation		Supervisor's Comments
Potential Hazards		Supervisor's Initials
UXO, SLIP, TRIPS, FALLS POISON OAK		
Recommended Action or Procedures		
DIG TO THE SIDE WATCH WHERE YOU ARE STEPPING AVOID POISON OAK		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: 4/8/08 4/10/2005
 Job#: 846075
 Permit#: _____
 Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	
	Safe Haven: Office	
	Wind Direction: From west	
	Evacuation Route: return to office	
Supervisor of Work: Mathisen		JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
Pre-Job Preparation		
1 Fill out JSA		
2 Review JSA (everyone)		
3 Sign JSA (everyone)		New: <input type="checkbox"/>
Assembly Point: Site gate		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Heavy lifting		
sprains and strains		
Accidental detonation		
Pedestrians & Bicycles (see other Classic Race Today)		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Work stops during periods of lightning/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees.		
Identify potential fillers and fuze condition on intact munitions		
Seat belts worn at all times, 5 MPH on unimproved roads, lights on vehicles		
Positive ID, excavate within one foot by hand, pinpoint with GA52.		
Weights of scrap buckets, do not overfill, EM61 is 2 man lift		
stop digging on or handling MPPEH when passersby on roadways		
Crew Name Signatures:	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



JOB SAFETY ANALYSIS

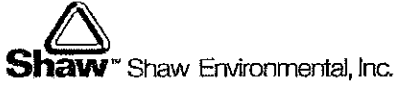
Date: 04-17-08

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	
	Wind Direction:	
	Evacuation Route: most direct	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Supervisor of Work: Mathisen	
	JSA Prepared by:	
	Are other crews in area? yes	
		exclusion zone
Assembly Point: Team Vehicle		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO Removal		
Potential Hazards		Supervisor's Comments
UXO / slips, Trips, Fall, Poison OAK		
Recommended Action or Procedures		Supervisor's Initials
Do not move around UXO, Dig to the side, Watch Your Footing, Use Decon Pan. Poison OAK		
Crew Name Signatures:		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



JOB SAFETY ANALYSIS

Date: 04-16-08

Job#: 846075

Permit#: _____

Issued By: Hutchison

Location of Job (Unit/Location on Project): MRS-16		
Required PPE: Mod "D" Safety Glasses and leather work gloves; Safety vests and hard hat for ground man	Safety Access / Location	
	Safe Haven: office	
	Wind Direction:	
	Evacuation Route: most direct	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Supervisor of Work: Mathisen	
	JSA Prepared by:	
	Are other crews in area? yes	
		exclusion zone
Assembly Point: Team Vehicle		New: <input checked="" type="checkbox"/> Revised: <input type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
UXO REMEDIATION ORIGIN		
Potential Hazards		Supervisor's Comments
UXO / OTHER DEBRIS / SLIP, TRIPS, FALLS, SUN BURN POISON OAK,		
Recommended Action or Procedures		Supervisor's Initials
DIG TO THE SIDE, WATCH WHERE YOU ARE WALKING, WATCH FOR OTHER DEBRIS, USE PPE		
Crew Name Signatures:		



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 43 F MAX. 64 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (0)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Test or control activities:

Follow up inspecting grids. Accompany OESS on QA inspections. Equipment tests are adequate. Attended a QA/QC meeting at 1400. I was a few minutes late.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

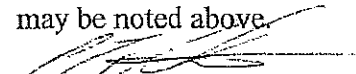
Safety inspections were conducted at work site. No problems. Brought port-a-pot in for cleaning.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. OESS instructed SUXOS and Team 1 to not be overly concerned about metal objects on or near pipeline.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.



Charlie Hutchison
UXOQC/SO

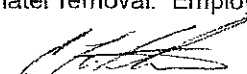
Attachments:

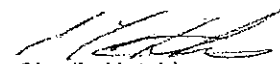
- 2- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

DATE	4/23/2008
	23
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted: Rain makes for trip haz.		
0645 observed schonstedt testing at test pit		
0830 Sent daily report		
0900 work on super summary		
1000 accompany OESS on QA inspectiuon of 20 grids		
1200 completed inspection, found a small firing device in GA 52 area on tree, no fail,		
1210 Briefed Team 1 and cautioned to check trees more closely., grids look good overall.		
1230 QC inspection of 15 grids, missed one of QA grids, only 19 inspected.		
1615 grid inspections complete. Grid C3A3C8 has shards of a creosote pole on surface.		
1630 Obser4ved scrap sort, no problems. 1		
1700 Done for the day.		
<i>Notes: QC/QA meet @ office - 1400-1500</i>		
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		IMPLEMENTING VARIANCE TII-024;
cloudy in AM, Low 43 high 64		IMPORTANT TELEPHONE CALLS
		NONE
SIGNATURE:  Charlie Hutchison		DATE: 4/23/2008

Follow-up Quality Control Inspection Checklist			
Report No. _____			
Date: 04/23/08			
Feature of Work: <u>Hand Excavation: real time acquire and QC</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 , Martys checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison	X		
13. Port-a-john at the office for service.	X		
13. Government Representative: Clinton Huckins			
Remarks: Port-a-john cleaning scheduled. OESS instructed to not be overly concerned with metal on or near NE/SW pipeline. 2 UXO left in place were hand carried to disposal site yesterday freeing up 2 grids for inspection. Began cutting fence for later removal. Employee performing this task is considered essential, no delays today.			
Inspected By:  Charlie Hutchison			Date: 04/23/08

Follow-up Quality Control Inspection Checklist			
		Report No.	10
		Date:	04/23/08
Feature of Work:	QC Inspection	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No:	N/A
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.	X		
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J3E0, B3J4E1, B3J4E2, B3J4E6, B3J3F0, B3J4G1, B3J4G4, B3J3H0, B3J4H1, B3J4H3, B3J4H4, B3J3I0, B3J4I1, C3A1C8, C3A3G4. All pass field QC inspection. Ceosote pole in gridC3A1C8			
Inspected By:  Charlie Hutchison	Date: 04/23/08		

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC/UXO Disposal Operations	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Don Creef	UXO Tech 2	0

Today's Activities:

0630 - On site.

0700 - UXO clearance teams continuing work in real time QC grids.

0800 - On MRS-16 to observe clearance operations. Team 1 is working on and near the water pipeline. Corps OE Specialist stopped by and told me that the pipeline does have metal debris on or near its location and this has been well documented. He instructed us to move on and don't be overly concerned about looking of metal objects on/near the pipeline.

1400 - Staked out proposed trench locations in one saturated grid. The trench will be excavated tomorrow to determine depth of metal contamination

1645 - Certified free of hazards all MD and other range debris collected today. All materials stored in bins.

1700 - Done for the day.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

Daily Log	Date:	4	23	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip. + head to MRS-16

0700 Start EM-61 w/u

0715 EM-61 calibration

0730 Start real-time

0930 Break

0945 Resume work

1130 Lunch

1200 Resume work

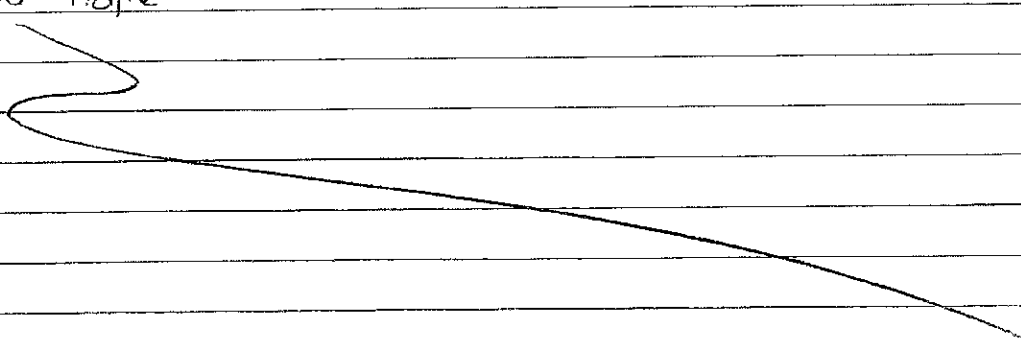
1500 Break

1515 Resume work

1600 Calibrations

1630 Back to office, unload + down load

1700 Home



VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

Sunny

SHAW PERSONNEL ON SITE: M. Lightner, C. Chang

SIGNATURE:

DATE: 4-23-08



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/23/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D

Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation

Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak

Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor

Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911

Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.

Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment.

Backhoe

Other Rain = wet trip hazards, watch your step

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Don Creef	

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date:

Job#:

Permit#:

Issued By: Hutchison

19
4/23/08

846075

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	
	Supervisor of Work: Mathisen	
	JSA Prepared by: Hutchison	
Safe Haven: Office		Are other crews in area? exclusion zone 806 feet
Wind Direction: From west		
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	New:	
	Assembly Point: Site gate	
	Revised:	X
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap / MD		
QC anomalies		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Heavy lifting		
strains and sprains		
Accidental detonation		
Backhoe		
Recommended Action or Procedures		Supervisor's Initials
look before you step		
Work stops during periods of lightning/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees.		
Dig next to anomaly		
Crew Name Signatures:		

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date:

Job#:

Permit#:

Issued By: Hutchison

4/23/08

846075

FT Ord MRS-16

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	
	Safe Haven: Office	Supervisor of Work: Mathisen
	Wind Direction: From west	JSA Prepared by: Hutchison Are other crews in area?
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/>
	Assembly Point: Site gate	Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Heavy lifting		
strains and sprains		
Accidental detonation		
Backhoe / Pinch Point + debris + Bicycles		Supervisor's Initials
Recommended Action or Procedures		
look before you step		
Work stops during periods of lighting/severe weather		
Smoking in designated areas only, park vehicles on dirt roads		
avoid poison oak, don't disturb bees. Pre exposure lotion		
Drive safe speed to site PPE. Hard hats when w/Backhoe Dig next to anomaly		
Crew Name Signatures:		



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/22/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61, DEMO DAY
 Chemicals Used Bug Dope, Cleansers, sun screen, diesel, gasoline, Technu
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment. Explosive Materials
 Other Hand wash, UXO, heavy equip and ground personnel

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Don Creef	



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/22/08

Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison Are other crews in area? No
	Wind Direction: From west	exclusion zone 806 feet
	Evacuation Route: return to office	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/>
	Assembly Point: Site gate	Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
DEMO		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Pedestrians & Bicycles		
Strains & sprains		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Use ergonomic techniques		
Drive safe speed.		
avoid poison oak, don't disturb bees. Tyack. Pre exposure		
Dig to side of anomaly. Positively ID Ord.		
Crew Name Signatures:		
1-1-		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Thursday, April 24, 2008
Report: 4/24/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 54 F MAX. 63 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (0)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Steve Bennett, operator (10)

Test or control activities:

Checked that both teams are using backhoe correctly. No problems. Got tape measure coord.
For MD found in trenches.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

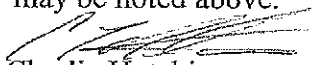
Safety inspections were conducted at work site with attention to backhoe procedures.. No problems. Brought out cleaned port-a-pot.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Test trenches in gridC3A2E5. Both teams used the backhoe for large anomaly areas in several grids.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs



Follow-up Quality Control Inspection Checklist

Report No. _____

Date: 04/24/08

Feature of Work:	<u>Backhoe Excavation: real time acquire and QC</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	_____
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024 , Martys checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison	X		
13. Backhoe digs performed safely.	X		
14. Government Representative: Clinton Huckins			

Remarks: Teams are having the operator put excess soil to use filling existing holes. Fence is cut into 100' lengths but still hanging. A lot of scrap chain link wire is on the ground. Won't cause any serious delays but will have to be picked up.

Inspected By:
Charlie Hutchison
 SHAW UXOQC/SO

Date: 04/24/08

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip. + head to MRS-16

0700 Start EM-61 w/u

0715 EM-61 calibrations

0730 Start real-time

0930 Break

0945 Resume work

1130 Lunch

1200 Resume work, ~~start backho ML~~

1500 Break

1515 Resume work

1600 EM-61 calibrations

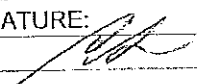
1630 Back to office to unload + download

1700 Home

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
Sunny

SHAW PERSONNEL ON SITE: Mr. Lightner, C. Chang DATE: 4-24-08

SIGNATURE: 



The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/24/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment.
 Other TM60A-1-1-31, rules to live by. homework; review changes online often

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Don Creef	



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: *4/24/08*

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D"	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office	
Safety Glasses and leather work gloves	Wind Direction: From west	
	Evacuation Route: return to office	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
<i>DRIVING TRUCKS</i>		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
<i>MINOR ACCIDENT</i>		
Accidental detonation		Supervisor's Initials
Recommended Action or Procedures		
Observe walking area/conditions		
<i>WATCH FOR OTHER DRIVERS / WATCH WHEN DRIVING</i>		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/24/08

Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office	
Wind Direction: From west		
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Strains & Sprains		
Driving Hazards		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Ergonomics		
PPE Pre exposure		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
Clean Windows / Drive safe speed		
Crew Name Signatures:		



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 53 F MAX. 65 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (0 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Steve Bennett, operator (0)

Test or control activities:

Observed one 5 man team as they close in on last grids. The

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

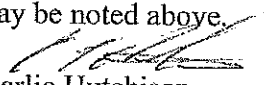
Safety inspections were conducted at work site, no problems.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Continue real time acquire, dig and EM61 QC in areas without DGM picks. Can use only one EM61 in confines of last grids. Have submittal for available grids for QA.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSA
- 3 Field daily activity logs
- 1 submittal
- 4 vehicle inspections

Follow-up Quality Control Inspection Checklist

Report No. _____

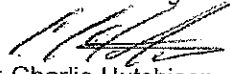
Date: 04/25/08

Feature of Work:	<u>Hand Excavation: real time acquire and QC</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	_____
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No.	<u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024, Martys checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison	X		
13. Port-a-john at the office for service.	X		
13. Government Representative: Clinton Huckins			

Remarks: Only one EM61 today and one UXO team.
Concrete rubble buried in a grid will be left in place.

Inspected By: 
Charlie Hutchison
 SHAW UXOQC/SO

Date: 04/25/08

Daily Log	Date:	4	25	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

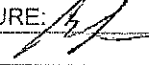
DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip. + head to MRS-16
 0655 start EM-61 w/u - only one geo on site today (one large team)
 0710 EM-61 calibration
 0730 Start real-time
 0930 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work
 1500 ~~Br~~ ML leave for calibration + decon
 1530 Back to office to unload + download; server has been down, so I have
 upload calibration data for the last few days
 1630 Home

VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny

SHAW PERSONNEL ON SITE: M. Lightner

SIGNATURE:  DATE: 4-25-08

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	8
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Don Creef	UXO Tech 2	0

Today's Activities:

0630 - On site.

0700 - One 5 man UXO clearance team working today. The clearance team is working in grids near the main gate. Since we are working in a smaller area we secured one EM-61 and operator.

0800 - Out at MRS-16 to observe operations. Team is encountering several areas that will require the use of the backhoe.

1230 - 1330 - In the field to double check grid C3A2E5 trench area with a schonstedt. The bottom of each trench is much quieter then it was on the surface.

1600 - Out on range to observe operations.

1615 - Stored and certified free of hazards all materials collected down range today.

1615 - Clearance team back at the field office to clean equipment and vehicles.

1700 - Secured for the weekend.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

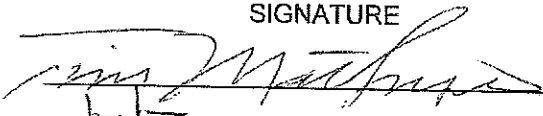



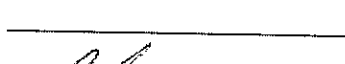
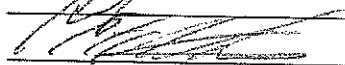
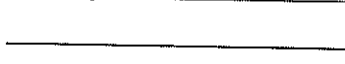


TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 9/25/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment., Backhoe
 Other Weekend driving, proper PPE for ground personnel

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Tim Mathisen</u>	
<u>Val Valdez</u>	
<u>Tim Harron</u>	
<u>Jeff Steinwand</u>	
<u>John Kander</u>	
<u>Colin Chang</u>	
<u>Mike Lightner</u>	
<u>Charlie Hutchison</u>	
<u>Don Creef</u>	



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 04-25-08

Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office	
	Wind Direction: From west	
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
Pedestrians & Bicycles		
Strains & Sprains		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Use ergonomic techniques		
Tyvek / Pre exposure lotion		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
Dig to side of anomaly		
Drive safe speed		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: 04-25-08

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? No exclusion zone 806 feet
	Safe Haven: Office	
	Wind Direction: From west	
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC <i>DRIVEL</i>		
Sort scrap		
QC anomalies		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
<i>DRIVEL ACCIDENT</i>		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
<i>WATCH OTHER DRIVERS WATCH BACKING</i>		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

Equipment Inspection

Equipment Description: <i>F-150 TRUCK</i>	Equipment ID: <i>3584A</i>
Hours/Mileage: <i>27999.6</i>	Location: <i>FT. ORD</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|---|
| <input checked="" type="checkbox"/> Cab/Doors/Widnows/Mirros
<input type="checkbox"/> Coolant Leak
<input type="checkbox"/> Drive Train Leak
<input type="checkbox"/> Hydraulics
<input type="checkbox"/> Other Leaks (Identify)
<input type="checkbox"/> Gauge/Warning Leaks
<input type="checkbox"/> Windshield Washers/Wipers
<input type="checkbox"/> Brakes (Services/Parking)
<input type="checkbox"/> Lights
<input type="checkbox"/> Turn Signals | <input type="checkbox"/> Tires/Lugs
<input type="checkbox"/> Suspension
<input type="checkbox"/> Fire Extenguisher
<input type="checkbox"/> Flares
<input type="checkbox"/> Triangles
<input type="checkbox"/> Horn
<input type="checkbox"/> Seat Belt
<input type="checkbox"/> Backup Alarm
<input type="checkbox"/> Non-Slip Surfaces
<input type="checkbox"/> Air Tanks |
|--|---|

Comments:

Inspected By: <i>JEFF STEINWAND</i>	Date: <i>4/25/08</i>

Equipment Inspection

Equipment Description: <i>Pick Up</i>	Equipment ID: <i>158Y</i>
Hours/Mileage: <i>7194</i>	Location: <i>4522 Joe Lloyd Way</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|---|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input checked="" type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input checked="" type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Waming Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Tum Signals | <input type="checkbox"/> Air Tanks |

Comments: <i>Other signal devices</i>	
Inspected By: <i>V. Moore</i>	Date: <i>4-25</i>

Equipment Inspection

Equipment Description: <i>Ranger Pickup</i>	Equipment ID: <i>173413</i>
Hours/Mileage: <i>18060</i>	Location: <i>Ford</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments: *no problems*

Inspected By: <i>C. H. Johnson</i>	Date: <i>4/23/08</i>
------------------------------------	----------------------

Equipment Inspection

Equipment Description: <i>Pickup</i>	Equipment ID: <i>10867</i>
Hours/Mileage: <i>47256</i>	Location: <i>Ft. Ord.</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|---|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input checked="" type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input checked="" type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>MAT HISEN</i>	Date: <i>4-25-08</i>

Grid	UXO QC Approval	GEO QC Approval	USACE Submittal Complete?
B3J3E0	clh 4/24/08	mjm 4/21/08	
B3J3F0	clh 4/24/08	mjm 4/21/08	
B3J3H0	clh 4/24/08	mjm 4/21/08	
B3J3I0	clh 4/24/08	mjm 4/21/08	
B3J4E1	clh 4/24/08	mjm 4/21/08	
B3J4E2	clh 4/24/08	mjm 4/21/08	
B3J4E6	clh 4/24/08	mjm 4/21/08	
B3J4G1	clh 4/24/08	mjm 4/21/08	
B3J4G1	clh 4/24/08	mjm 4/21/08	
B3J4G4	clh 4/24/08	mjm 4/21/08	
B3J4H1	clh 4/24/08	mjm 4/21/08	
B3J4H3	clh 4/24/08	mjm 4/21/08	
B3J4H4	clh 4/24/08	mjm 4/21/08	
B3J4I1	clh 4/24/08	mjm 4/21/08	
C3A1C8	clh 4/24/08	mjm 4/21/08	
C3A3G4	clh 4/24/08	mjm 4/11/08	



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Monday, April 28, 2008
Report: 4/28/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 50 F MAX. 62 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Steve Bennett, operator (8)

Test or control activities:

Accompanied OESS on QA inspection of grids. Inspected fence removal operations, going well.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

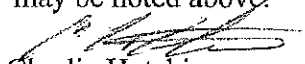
Safety inspections were conducted at work site, no problems. Fence removal signage, barriers, and PPE are adequate.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Team 1 continues real time acquire, dig and EM61 QC in areas without DGM picks using backhoe. Team 2 completed partial grid B3J2J2 including fence grid feature of work, removed fence posts to do it. Both teams helped with fence removal while awaiting backhoe. Delay of intrusive work but accomplished a lot to facilitate UXO operations.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSA
- 3 Field daily activity logs

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Don Creef	UXO Tech 2	0

Today's Activities:

0630 - On site.

0700 - UXO Team 2 clearing grids located just inside the main gate.

0715 - Construction crew and UXO Team 1 removing MRS-16 boundary fence. MD and RRD containers moved to Range 37.

1000 - Backhoe on site. UXO Team 1 commenced excavating hot spots using the backhoe.

1130 - One hot spot was excavated to a depth of 4 feet. It was determine by UXOSO and Corps OE Specialist that the excavation site did not require additional investigation.

1345 - Called the Fire Department and scheduled a fire assessment evaluation in preparation for a UXO disposal operation this Thursday.

1350 - Dropped off our Detonation Assessment form at the BRAC office.

1515 - Fire Department on MRS-16 to conduct a fire assessment.

1645 - Certified free of hazards all materials collected today

1700 - Field operations secured for the day.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

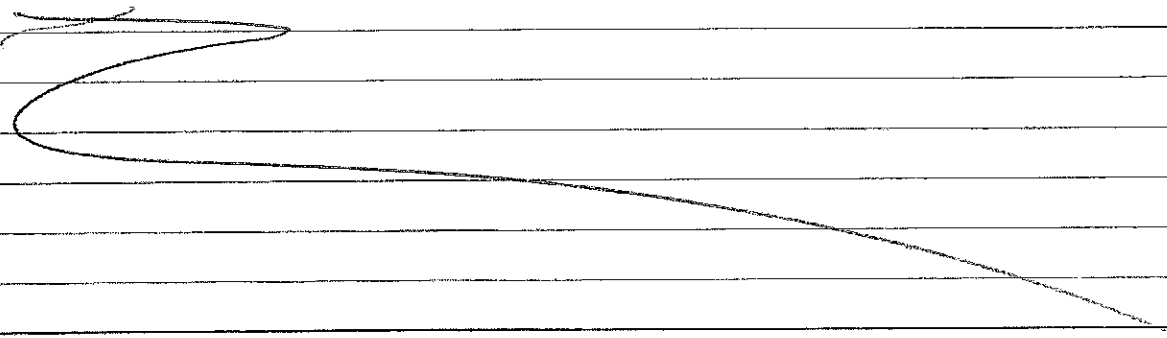
Daily Log	Date:	4	28	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Real-time EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip. & head to MRS-16
 0655 start EM-61 w/o
 0710 EM-61 calibrations
 0730 start ~~real-time ml~~ fence tear-down while waiting for backhoe
 0930 Break
 0945 Backhoe arrives, start w/ hot spots
 1130 Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 EM-61 calibrations
 1630 Back to office to unload equip., then download data
 1700 Home



VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

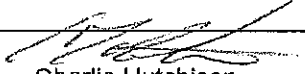
WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Overcast

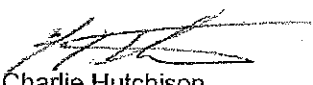
SHAW PERSONNEL ON SITE: M. Lightner, L. Chang

SIGNATURE: DATE: 4-28-08

DATE	4/28/2008
	26
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075	
Field Activity MSR-16 hand excavation of real time EM61 picks			
Company Name: Shaw Environmental			
Today's Activities:			
0630 Tailgate meeting conducted: Fog and safe driving			
0645 observed schonstedt testing at test pit			
0730 Sent daily report			
0800 placing and warning signs for fence removal. Teams are assisting in fence removal			
0945 backhoe arrived, team 1 starts backhoe excavations., team 2 digging in grid b3j2j2, main gate			
1000 observing operations. A lot of anomalies under parking area asphalt.			
1200 accompany OESS on QA inspection of grids., no problems observed.			
1330 inspecting grids for QC.			
1500 fire dept on site for demo inspection and permit. No delays.			
1630 scrap sort at range 37 where the hoppers were moved to for security.			
1700 Done for the day.			
comment Team 1 left a suspect latrine and trash anomaly in place after investigating for MD or MEC. also stopped at 4 feet in trash pit containing MD			
VISITORS ON SITE: Fire dept.		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
SEE TAILGATE FORM for Personnel present			
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS	
clear, Low 50 high 62		NONE	
SIGNATURE:  Charlie Hutchison		DATE: 4/28/2008	

Follow-up Quality Control Inspection Checklist			
			Report No. _____
			Date: <u>04/28/08</u>
Feature of Work:	<u>Excavation: real time acquire and QC</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	_____
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 , Martys checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted		X	
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability			
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison, Fence removal crew,			
13. Government Representative: Clinton Huckins			
Remarks: Left possible latrine and trash pit in place after inspecting for MD. Added barricades and signage to work zone for fence removal, problem solved. All fence fabric removed from and off the road now. Delay awaiting backhoe, crews stayed busy with fence removal. Grid B3J2J2 completed by team 2.			
Inspected By:  Charlie Hutchison		Date: <u>04/28/08</u>	



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/28/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment., Backhoe
 Other Road work and traffic, exclusion zones, fog and driving

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Don Creef	

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/23/08

Job#: 846075

Permit#: _____

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison
	Wind Direction: From west	Are other crews in area? No
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
<i>Rolling chow truck</i>		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
<i>Pedestrians & Bicycles</i>		
<i>Strains & Sprains</i>		
<i>Traffic; hand injuries</i>		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
<i>Drive safe speed</i>		
<i>use ergonomic techniques when digging</i>		
<i>Trade off duties for strenuous activities</i>		
<i>gloves, take your time</i>		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: 4/28/08

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison
	Wind Direction: From west	Are other crews in area? No
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
BACK HOE		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
ARK OF BACK HOE		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
STAY OUT OF ARK WERE PPE		
Crew Name Signatures		



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 51 F MAX. 64 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Don Creef, UXO Escort (0)

Steve Bennett, operator (4)

Test or control activities:

Inspected fence removal operations, going well. UXO Teams must use good traffic control, cones, barriers or whatever to protect themselves and keep passersby away from ops.

Corrective Action Requests Outstanding:

CAR

MRS-16 CAR 0004.

Date Issued

10/03/2007

Action Completed

on going

Date Closed



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:


Safety inspections were conducted at work site, no problems. Fence removal signage, barriers, and PPE are adequate. UXO team signage was not.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. UXO Teams both working on fence line grids. Fence removal crew will finish tomorrow. Some backhoe work left to do in real time grids. OESS, SUXOS, and myself agree leaving T posts subsurface is ok. They were emplaced with schonstedt support.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

2- inspection check list
Tailgate, JSA
3 Field daily activity logs
1-948

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10
Don Creef	UXO Tech 2	0

Today's Activities:

0630 - On site.

0700 - UXO Team 1 continuing with backhoe excavation of several hot spots. Team 2 commenced clearing fence line grids starting at the north west corner along Parker Flats Rd.

0730 - 0900 - Out in the field to observe operations.

1000 - Attended progress meeting at Corps office.

1245 - 1330 - Checked on both teams. Team 1 has now moved to Parker Flats Rd. to clear fence line grids. Team 2 is moving slow due to encountering numerous pieces of fence wire on the surface and subsurface.

1600 - On range to observe x-ray operations of three 2.36 inch rockets located near the road at Parker Flats. All three rockets were determined to be inert/practice.


1645 - Certified MD and transported to Range 37 for storage.

1700 - Secured.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
See QC daily.	

DATE	4/29/2008
	27
SHEET 1	OF 1

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted: Backhoe safety and the passersby		
0645 observed schonstedt testing at test pit		
08300 Sent daily report		
0900 inspecting grids for QC		
1200 to office for supplies.		
1000 observing operations. A lot of anomalies under parking area asphalt.		
1300 Team 2 signage good to go.		
1330 inspecting grids for QC. Team 1 on fenceline grids, parker flats road.		
1500 OESS correcting signage and barriers issue with team 1, he assisted to correct on the spot.		
1630 sent QC inspection results out.		
1700 Done for the day.		
comment Leaving broken off sub surface T posts in p[lace, hard to dig out and they were cleared by schonstedt prior to emplacing. OESS, SUXOS and myself agree.		
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		implementing variance TII-024;
clear, Low 51 high 64		IMPORTANT TELEPHONE CALLS
		NONE
SIGNATURE:  Charlie Hutchison		DATE: 4/29/2008

Daily Log	Date:	4	25	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Real-time EM-61 + Fenceline EM-61*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip + head to MRS-16
 0700 Start EM-61 w/y
 0715 EM-61 calibrations
 0740 Team 1 start backhoe digs, Team 2 start fenceline
 0930 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work
 1330 Team 1 starts fenceline
 1500 Break
 1515 Resume work
 1610 EM-61 calibrations
 1640 Back to office
 1700 Home

VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: *Sunny* IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: *M. Lightner, C. Chang*

SIGNATURE: *[Signature]*

DATE: *4-25-08*

Follow-up Quality Control Inspection Checklist

Report No. _____
Date: 04/29/08

Feature of Work:	<u>Hand Excavation: real time acquire and QC</u>	Project No.	<u>846075</u>
Location:	<u>MRS-16 FT Ord, CA</u>	Delivery Order No.	
Vendor/Supplier:	<u>SHAW E and I</u>	Purchase Order No:	<u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024 , Martys checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted		X	
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures	X		
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison, Huck, SUXOS, and UXO teams	X		
13. Port-a-john at the office for service.	X		
13. Government Representative: Clinton Huckins			

Remarks: 1) Highway warning signs were not posted properly, took OESS intervention, direction and assistance to get it right. Corrections were made on the spot. Tailgate topic tomorrow. 2) Leaving broken T-posts left in ground.

Inspected By: Charlie Hutchison
SHAW UXOQC/SO

Date: 04/29/08

Follow-up Quality Control Inspection Checklist

Report No. 11


Date: 04/29/08

Feature of Work: QC Inspection	Project No. 846075
Location: MRS-16 FT Ord, CA	Delivery Order No.
Vendor/Supplier: SHAW E and I	Purchase Order No: N/A

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024 and Marty's checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.		X	
13. Government Representative: Clinton Huckins			

Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J2H0, B3J2H9, B3J2I0, B3J2I6, B3J2I7, B3J2I8, B3J2I9, B3J2J0, B3J2J8, C3A2A8, C3A2B7, C3A2B8, C3A2C8, C3A2C9, C3A2D0, C3A2D9, C3A2E0, C3A3D1, C3A3E1, C3A3F2, and C3A3G2. All pass Shaw QC inspection.

Inspected By: 
 CHARLIE HUTCHISON
 SHAW UXOQC/SO

Date: 04/29/08

U.S. ARMY ENGINEER DISTRICT, SACRAMENTO
ORDNANCE AND EXPLOSIVE
QUALITY ASSURANCE MEMO CESPCK FORM 948

TO: Shaw Environmental, Inc
TERC DACW05-96-D-0011

DATE: April 28, 2008

Control Number:
042808

PROJECT NUMBER:
Task Order No. 016

PROJECT LOCATION: MRS 16
Former Fort Ord, CA

SUSPENSE: NA

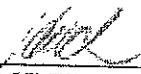
SUBJECT ITEMS(S) (Check all that apply):

- Work Plan
 Safety Violation
 Safety Comments
- Quality Assurance
Other

DESCRIPTION: The following "real time" fourteen (14) grids passed analog QA;

B3J3E0 B3J3F0
B3J3G2 B3J3H0
B3J3I0 B3J4E1
B3J4E2 B3J4E6
B3J4G1 B3J4G4
B3J4H1 B3J4H3
B3J4H4 B3J4I1

Prompt correction or compliance with contract specifications is requested. A written response is required in the action taken block.


USACE Site Representative
Clinton J Huckins, OE Safety Specialist

RECEIPT ACKNOWLEDGED:


Contractors Representative

ACTION TAKEN:



Shaw Environmental, Inc.

TAILGATE SAFETY MEETING

Division/Subsidiary: Shaw Environmental, Inc Facility: Concord, California
 Date: 4/29/08 Time: 06:30 Job Number: 846075
 Customer: USACE Address: Sacramento, California
 Specific Location: Former Fort Ord, Ca.
 Type of Work: UXO Operations MRS 16
 Chemicals Used: Fuels, Hydraulic Oil

SAFETY TOPICS PRESENTED

Protective Clothing /Equipment: Tyvek, gloves, steel toed boots, eye protection, respirator, hearing protection, and safety vest.

Chemical Hazards: Chemical, Thermal Burns. Inhalation.

Physical Hazards: Slip, trip, and falls, cuts and abrasions, heavy equipment. MEC. and associated hazards

Emergency Procedures: Notify supervisor/superintendent and Site Safety and Health (SSHO) in the vent of any emergency, accident, or injury immediately

Hospital /Clinic: CHOMP Phone: (831) 624-5311 Paramedic Phone: 911

Hospital Address: 23625 Holman Hwy, Monterey, CA (South on Hwy 1 to Holman Hwy West)

Special Equipment: First Aid Kits, Fire Extinguishers, hand wash, decon station

Other: Magnetometers, Radiograph, Backhoe, passerby

ATTENDEES

NAME PRINTED	SIGNATURE
TIM HARKO	
JAV VALDEZ	
JEFF STEINWAND	
DON CREEP	
John A Kandler	
Mike Lightner	
Colin Chang	

Meeting Conducted by: V. Valdez
 Supervisor: _____ Manager: _____

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/29/08
Job#: 846075
Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? yes exclusion zone 806 feet
	Safe Haven: Office	
Wind Direction: From west		
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Job Task (What are You Doing)	
Hand Excavation of MEC		Audit the Job Audit Time:
Sort scrap		
Remove fence		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV UXO passersby being injured		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
check with mag in front of bucket.		
Crew Name Signatures:		



JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: _____
 Job#: 846075
 Permit#: _____
 Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	
	Safe Haven: Office	
	Wind Direction: From west	
	Evacuation Route: return to office	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Supervisor of Work: Mathisen	
	JSA Prepared by: Hutchison	
	Are other crews in area? yes	
		exclusion zone 806 feet
Assembly Point: Site gate		New: _____ Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
Remove fence		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
check with mag in front of bucket.		
Crew Name-Signatures:		

TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Wednesday, April 30, 2008
Report: 4/30/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 50 F MAX. 59 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Inspected fence removal operations, going well. UXO Teams must use good traffic control, cones, barriers or whatever to protect themselves and keep passersby away from ops.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Wednesday, April 30, 2008
Report: 4/30/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:


Safety inspections were conducted at work site, no problems. Signage and barriers are adequate. Attended QC meeting.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. UXO Teams both working on fence line grids. Fence removal is complete. Using magnets to retrieve chain link pieces and fasteners. We are not removing subsurface t posts as they were emplaced with schonstedt support.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.



Charlie Hutchison
UXOQC/SO

Attachments:

- 2- inspection check list
- Tailgate, JSA
- 3 Field daily activity logs

DATE	4/30/2008
	28
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075	
Field Activity MSR-16 hand excavation of real time EM61 picks in fence line grids			
Company Name: Shaw Environmental			
Today's Activities:			
0630 Tailgate meeting conducted: standardize signage			
0645 observed schonstedt testing at test pit			
0830 Sent daily report			
0900 preparing and inspecting grids for QC			
1200 7 more grids pass QC inspection, continue preparing grids.			
1400 QC meeting,			
1500 prepping grids.			
1630 brought port-a-pot back for cleaning.			
1700 Done for the day.			
comment Leaving broken off sub surface T posts in place, hard to dig out and they were cleared by schonstedt prior to emplacing. OESS, SUXOS and myself agree.			
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
SEE TAILGATE FORM for Personnel present			
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS	
clear, Low 50 high 59			
		NONE	
SIGNATURE:  Charlie Hutchison		DATE: 4/30/2008	

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC/Fence Line Grids	
Company Name: Shaw Environmental Inc.	

Personnel on Site

Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinward	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site.

Note: At the Tailgate Safety Meeting the Corps OE Safety Specialist directed us to leave the subsurface part of any t-post that were broken off during the fence removal operation.

0900 - 1100 - I provided UXO coverage for one large hot spot excavation area in grids C3A2A4 And B3J2J4. No MEC or MD was noted. Will continue to investigate this hot spot when the backhoe becomes available.

1300 - Out in the field checking on progress. Team 1 moving right along at a good rate and Team 2 is bogged down along Parker Flats due to encountering numerous targets requiring excavation to 2 plus feet.

1400 - 1430 - Attended Shaw's MRS-16 weekly QC meeting.

1600 - Back on the range to observe operations.

1700 - Certified and stored MD. Secured field operations.

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS

WEATHER CONDITIONS:

IMPORTANT TELEPHONE CALLS:

See QC daily.

SIGNATURE: Tim Mathisen

4/30/2008

page 1 of 1

Daily Log	Date:	4	30	08
	No.			
	Sheet	1	Of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

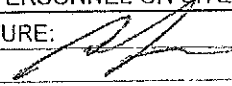
FIELD ACTIVITY SUBJECT: Fence line EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip + head to MRS-16
 0705 start EM-61 w/n
 0720 EM-61 calibrations
 0740 Start fence line
 0830 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work
 1500 Break
 1515 Resume work
 1600 Go to calibrate EM-61's
 1630 Back to office
 1700 Home


VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: Sunny IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: M. Lightner, C. Chang
 SIGNATURE:  DATE: 9-30-08



Follow-up Quality Control Inspection Checklist			
	Report No.	12	
	Date:	04/30/08	
Feature of Work: <u>QC Inspection</u>	Project No.	846075	
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No.		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No:	N/A	
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.		X	
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J2J6, B3J4G3, C3A2A6, B3A2B2, C3A2J9, C3A3I1, C3B2A7, and C3B2B6. All pass Shaw QC inspection.			
Inspected By: Charlie Hutchison SHAW UXOQC/SO	Date: 04/30/08		

Follow-up Quality Control Inspection Checklist			
Report No. 13			
Date: 04/30/08			
Feature of Work: QC Inspection	Project No. 846075		
Location: MRS-16 FT Ord, CA	Delivery Order No.		
Vendor/Supplier: SHAW E and I	Purchase Order No: N/A		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected 9 real time Grids in anticipation of data approval. Some locations have backfilled trash and rubble. Will brief OESS during QA inspections.			
Inspected By:  SHAW UXOQC/SO		Date: 04/30/08	



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 4/30/08 Time _____ Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61, Driving
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment., Backhoe
 Other Road work, traffic, pedestrian safety, Tick bites, do's & don'ts

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Tim Mathisen</u>	<u>[Signature]</u>
<u>Val Valdez</u>	<u>[Signature]</u>
<u>Tim Harron</u>	<u>[Signature]</u>
<u>Jeff Steinwand</u>	<u>[Signature]</u>
<u>John Kander</u>	<u>[Signature]</u>
<u>Colin Chang</u>	<u>[Signature]</u>
<u>Mike Lightner</u>	<u>[Signature]</u>
<u>Charlie Hutchison</u>	<u>[Signature]</u>
<u>Steve Bennett</u>	<u>[Signature]</u>



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/30/08

Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison
	Wind Direction: From west	Are other crews in area? yes
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
Remove fence		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
Traffic		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Buy juice		
Use Traffic Control Signs		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
Typek		
Dig to side of anomaly		
check with mag in front of bucket.		
Crew Name Signatures:		



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 4/30/08

Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison Are other crews in area? yes
	Wind Direction: From west	exclusion zone 806 feet
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
Remove fence		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
check with mag in front of bucket.		
Crew Name Signatures:		

TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Thursday, May 01, 2008
Report: 5/1/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 43 F MAX. 63 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (0 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Inspected fence removal operations, going well. Accompanied OESS to inspect 21 grids.

Inspected 20 grids for eventual pass. Passed 7 grids for field QC.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site, no problems. Signage and barriers are adequate. Poison ok is thick on west fence line. Crew is being meticulous to with PPE.

7. Instructions received and conflicts with plans or specifications, special occurrences:

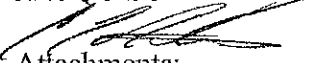
Implementing Field Work Variance TII-024. Hot spots, trash pits are recorded. We are not removing subsurface t posts or recording as they were emplaced with schonstedt support, pin flag for QA/QC is sufficient.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.

Charlie Hutchison

UXOOC/SO



Attachments:

- 2- inspection check list
- Tailgate, JSA
- 3 Field daily activity logs

DATE	5/1/2008
NO.	28
SHEET	1 of 1

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC/Fence Line Grids	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10
John Kandcer	UXO Tech I	10

Today's Activities:

0630 - On site.

0700 - UXO teams continue to clear fence line grids.

0710 - Notified the fire department that we have cancelled our UXO disposal operation that was scheduled for today. I also mentioned to them, Captain Jim Watson that we would re-schedule the UXO disposal operation for next week May 8, 2008.

0730 - Called Lyle at the BRAC office and left a message stating that we have cancelled today's UXO disposal operation.

0820 - Dropped off our Detonation Approval at the BRAC office.

0830 - 1000 - On MRS-16. All is going well.

1115 - Team 2 has completed its assigned fence line grids on Parker Flats. They have now moved to the north west corner.

1300 - 1430 - Out and about checking on progress. Team 2 is bogged down in the north west corner due to encountering numerous pieces of fence wire and a small amount of MD.

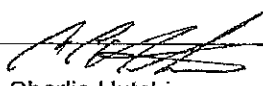
Note: Colin Chang called in sick today. Team 1 is operating without an EM-61 and operator.

1700 - Certified MD and Secured.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS:
See QC daily.	

DATE	5/1/2008
	29
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075	
Field Activity MSR-16 hand excavation of real time EM61 picks in fence line grids			
Company Name: Shaw Environmental			
Today's Activities:			
0630 Tailgate meeting conducted: digging next to protected flora			
0645 observed schonstedt testing at test pit			
0830 Sent daily report, port-a-pot on site.			
0900 preparing and inspecting grids for QC			
1300 Acompany OESS on QA inspections			
1600 7 more grids pass QC inspection, continue preparing grids.			
1630 brought port-a-pot back for cleaning.			
1700 working on spreadsheets and my field map			
1800 Done for the day.			
comment Teams are marking subsurface t post stubs with a pin flag.			
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
SEE TAILGATE FORM for Personnel present			
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS	
clear, Low 43 high 63			
		NONE	
SIGNATURE:  Charlie Hutchison		DATE: 5/1/2008	

Daily Log	Date:	5	1	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Fenceline EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip + lead to MRS-16 - only one geo today,
C. Chang out sick

0700 Start EM-61 w/u

0715 Calibrate EM-61

0730 Start fenceline EM-61 work w/ Team 2

1115 Lunch

1200 Back to work

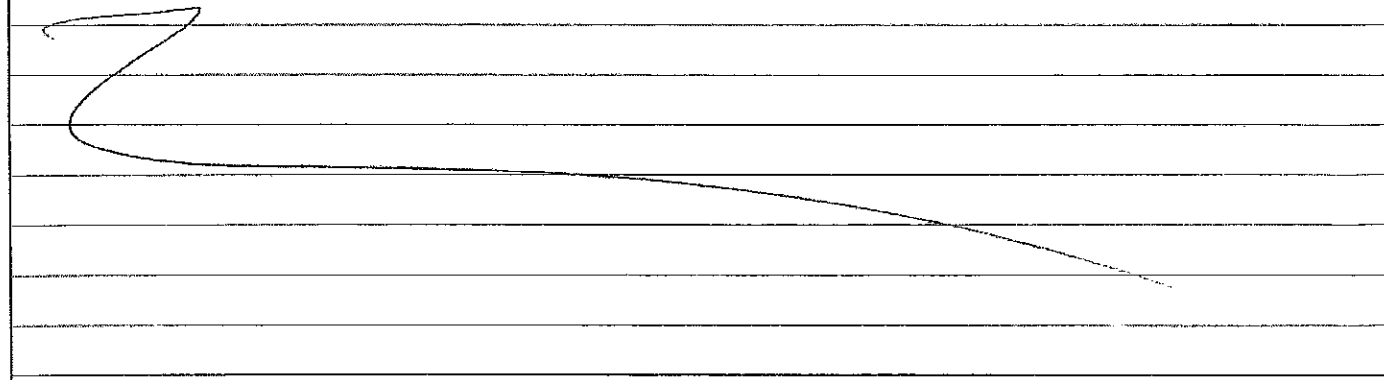
1300 Break

1515 Back to work

1610 Over to calibrate

1635 Back to office to download + unload

1700 Home



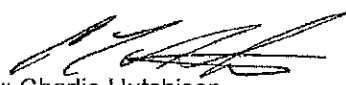
VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:

Sunny

SHAW PERSONNEL ON SITE: M. Lightner

SIGNATURE: DATE: 5-1-08

Follow-up Quality Control Inspection Checklist			
Report No.			
Date:		05/01/08	
Feature of Work:	Excavation: real time acquire and QC	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No:	N/A
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 , Martys checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Everyone attends and participates in the Tailgate Meeting	X		
2. Check that Safety Equipment is Serviceable and On Hand	X		
3. Verify and Inspect the Testing of Detection Equipment	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Verify that Emergency Plans and Evacuation Routes are Understood	X		
8. Inspect Equipment and Materials for Suitability	X		
9. Observe Activities for Conformance with Procedures		X	
10. Review and Evaluate Health and Safety Measures	X		
11. Review Requests for Information and Comments (Status/Conclusions)	X		
12. Personnel Present: Hutchison, Fence removal crew,			
13. Government Representative: Clinton Huckins			
Remarks: 1) Field call; T-post stubs marked with pin flags. 2) Fence waste from removal is a bit much on the west side; ½ a bucket full of ties and fabric clippings in 400 linear feet, pounded into grass and poison oak by heavy equip tires is causing delays removing our debris prior using EM61 or magnetometers for UXO.			
Inspected By:  Charlie Hutchison		Date: 05/01/08	

Follow-up Quality Control Inspection Checklist			
Report No. 14			
Date: 05/01/08			
Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.		X	
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected Grids B3J2J9, C3A2A7, C3A2A9, G3A2A5, C3B2C6, C3B2C7, C3B2D6, All pass field QC inspection. <i>B3J2J7 needs Backhoe grade work. Inspected 13 others w/a waits.</i>			
Inspected By: <u>Charlie Hutchison</u> SHAW UXOQC/SO		Date: 05/01/08	

TAILGATE SAFETY MEETING

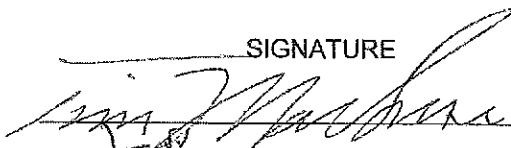
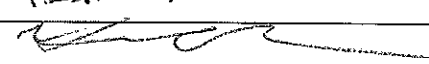
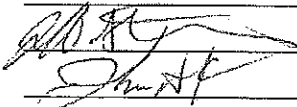
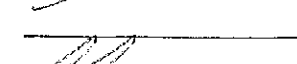
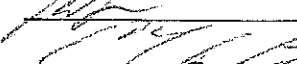
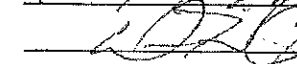



Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 5/1/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment., Backhoe
 Other Road work and traffic, exclusion zones, PPE, respect the flora, UXO excavation.

ATTENDEES

NAME PRINTED
Tim Mathisen
Val Valdez
Tim Harron
Jeff Steinwand
John Kander
Colin Chang
Mike Lightner
Charlie Hutchison
Don Creef

SIGNATURE










JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 5/1/08
Job#: 846075
Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison Are other crews in area? yes
	Wind Direction: From west	exclusion zone 806 feet
	Evacuation Route: return to office	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/>
	Assembly Point: Site gate	Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
check with mag in front of bucket.		
Crew Name Signatures:		

JSA # _____



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: *5/1/08*

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison
	Wind Direction: From west	Are other crews in area? yes
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
<i>Traffic</i>		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
<i>Track pre exposure location</i>		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
<i>use cones & signs</i>		
<i>Stop digging when Peds & bicycles go by</i>		
check with mag in front of bucket.		
Crew Name Signatures:	<i>Jim Mathisen</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 52 F MAX. 60 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (6 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (6)

Tim Herron, UXO Team Leader (10)

Jeff Steinwand UXO Tech II (0)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Inspected 24 grids for field QC, all pass.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

Safety inspections were conducted at work site, no problems. Signage and barriers are adequate. Poison ok is thick on west fence line. Inspected vehicles and safety equipment.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Last work day for Tim Herron. We are not removing subsurface t posts or recording as they were emplaced with schonstedt support, pin flag for QA/QC is sufficient.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 2- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs
- 1 948
- 5 vehicle inspection checklists

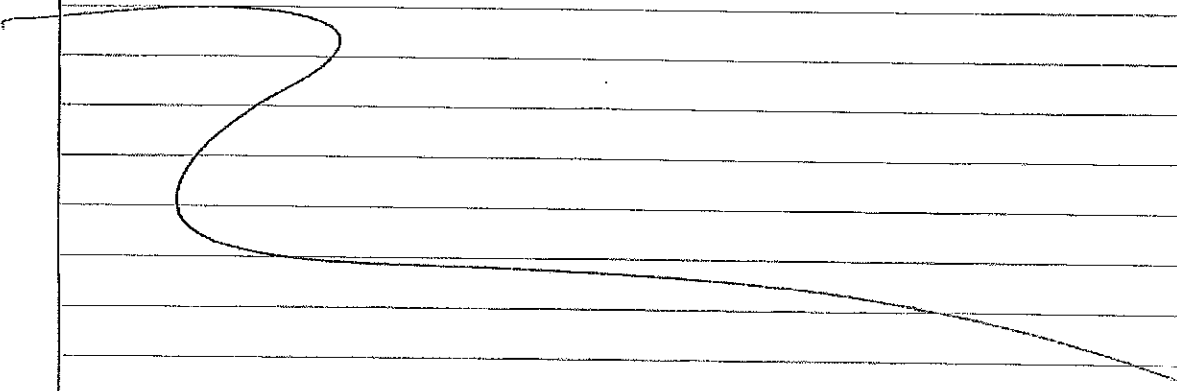
Daily Log	Date:	5	2	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: *Fence line EM-61*

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip. + head to MRS-16
 0700 Start EM-61 w/u
 0715 EM-61 calibrations
 0730 Start Fence line EM-61
 0930 Break
 0945 Resume work
 1130 Lunch
 1200 Resume work - C. Chang + V. Valdez leave, down to site team
 1545 Go to calibrate
 1600 Back to shop to unload + down load
 1645 Skipped afternoon break, done for the day



VISITORS ON SITE: _____ CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS: _____

WEATHER CONDITIONS: *Sunny* IMPORTANT TELEPHONE CALLS: _____

SHAW PERSONNEL ON SITE: *M. Lightner*
 SIGNATURE: *[Signature]* DATE: *5-2-08*

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Real Time QC/Fence Line Grids	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	0
Charlie Hutchison	QC/Safety	10
Tim Herron	UXO Team Leader	10
Val Valdez	UXO Team Leader	6
Jeff Steinwand	UXO Tech II	0
John Kandcer	UXO Tech I	10

Today's Activities:
 Note: Jeff Steinwand has taken the day off.

0630 - On site.

0700 - Team 1 continuing to clear fence line grids on the southern boundary. Team 2 working west side fence line grids.

1230 - Val Valdez has taken the rest of the day off to attend to personal business. We moved John Kandcer over to Team 2. We secured Colin Chang since we only have one UXO team working this afternoon.

1230 - 1400 - In the field checking on Team 2. All appears to be going well.

1615 - Certified and stored MD. Cleaned up vehicles and decontaminated equipment.

1700 - Secured for the weekend.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 5/2/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D

Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation

Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing

Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor

Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911

Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.

Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment, Backhoe

Other Road work and traffic, exclusion zones, PPE, don't overlook decon, uv and your skin.
weekend driving

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Tim Mathisen</u>	<u>[Signature]</u>
<u>Val Valdez</u>	<u>[Signature]</u>
<u>Tim Harron</u>	<u>[Signature]</u>
<u>Jeff Steinwand</u>	<u>[Signature]</u>
<u>John Kander</u>	<u>[Signature]</u>
<u>Colin Chang</u>	<u>[Signature]</u>
<u>Mike Lightner</u>	<u>[Signature]</u>
<u>Charlie Hutchison</u>	<u>[Signature]</u>



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: *5/2/08*

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? yes exclusion zone 806 feet
	Safe Haven: Office	
	Wind Direction: From west	
Evacuation Route: return to office		
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Job Task (What are You Doing)	
Hand Excavation of MEC		Audit the Job Audit Time:
Sort scrap		
Remove fence		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
<i>Stop intrusive for passersby - don't handle poss. MEC Be AWARE of your surroundings.</i>		
check with mag in front of bucket.		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		



JOB SAFETY ANALYSIS

Date: *5/2/08*

Job#: 846075

FT Ord MRS-16

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen JSA Prepared by: Hutchison Are other crews in area? yes exclusion zone 806 feet
	Safe Haven: Office	
	Wind Direction: From west	
	Evacuation Route: return to office	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/> Revised: <input checked="" type="checkbox"/>
	Job Task (What are You Doing)	
	Audit the Job Audit Time:	
Hand Excavation of MEC Sort scrap Remove fence Excavate with backhoe		Supervisor's Comments
Potential Hazards		
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
<i>Peds & Bicycles</i>		
Accidental detonation		
<i>Strains Sprains</i>		
Recommended Action or Procedures		
Observe walking area/conditions		Supervisor's Initials
<i>Pre exposure Lotion</i>		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
<i>Use ergonomic techniques</i>		
<i>Drive safe speed</i>		
check with mag in front of bucket.		
Crew Name Signatures:		
<i>[Signature]</i>		
<i>[Signature]</i>		
<i>[Signature]</i>		

Follow-up Quality Control Inspection Checklist			
		Report No. 16	
		Date: 05/02/08	
Feature of Work: QC Inspection	Project No. 846075		
Location: MRS-16 FT Ord, CA	Delivery Order No.		
Vendor/Supplier: SHAW E and I	Purchase Order No: N/A		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected the following grids for Quality Control: B3J4E7, B3J4F7, B3J4G7, B3J4G8, B3J4H8, B3J4I8, B3J4J8, and C3A4A8 All pass Shaw QC field inspection.			
Inspected By: <u>Charlie Hutchison</u> SHAW UXOQC/SO		Date: 05/02/08	



Shaw Environmental & Infrastructure, Inc.

Follow-up Quality Control Inspection Checklist			
		Report No. 15	
		Date: 05/02/08	
Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>		
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____		
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected the following grids for Quality Control: C3A3A7,C3A3H3,C3A3H4,C3A3H5,C3A3I2,C3A3I3,C3A2J8,C3A2J0, C3A3J1,C3A3J2, C3B2A8,C3B2A9,C3B2A0,C3B2B7,C3B2B8, and C3B2C5,			
Inspected By: <u>Charlie Hutchison</u>		Date: 05/02/08	
SHAW UXOQC/SO			

U.S. ARMY ENGINEER DISTRICT, SACRAMENTO
ORDNANCE AND EXPLOSIVE
QUALITY ASSURANCE MEMO OESPK FORM 948

TO: Shaw Environmental, Inc
TERC DACW05-96-D-0011

DATE: May 1, 2008

Control Number:
050108

PROJECT NUMBER:
Task Order No. 016

PROJECT LOCATION: MRS 16
Former Fort Ord, CA

SUSPENSE: NA


SUBJECT ITEMS(S) (Check all that apply):

- Work Plan Quality Assurance
 Safety Violation Other
 Safety Comments

DESCRIPTION: The following "real time" twenty one (21) grids passed analog QA:

B3J2H0	B3J2J0	C3A2C8
B3J2H9	B3J2J6	C3A2C9
B3J2I0	B3J2J8	C3A2D0
B3J2I6	C3A2A6	C3A2D9
B3J2I7	C3A2A8	C3A2E0
B3J2I8	C3A2B7	C3A3D4
B3J2I9	C3A2B8	C3A3E1

Prompt correction or compliance with contract specifications is requested. A written response is required in the action taken block.


USACE Site Representative
Clinton J Huckins, OE Safety Specialist

RECEIPT ACKNOWLEDGED:


Contractors Representative

ACTION TAKEN:

Equipment Inspection

Equipment Description: <i>Brown Chevy 4x4 ext. cab</i>	Equipment ID: <i>E340507</i>
Hours/Mileage: <i>39182</i>	Location: <i>Fort Ord</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|---|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warming Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm <i>No backup alarm, use horn</i> |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>[Signature]</i>	Date: <i>5-2-08</i>

Equipment Inspection

Equipment Description:	Equipment ID:
Ranger Pickup	17343
Hours/Mileage:	Location:
18244	FT Ord
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	NO PROBLEMS
Inspected By:	Date:
Hatchison	5/2/08

White/Superintendent Blue/Warehouse Yellow/Remains

Equipment Inspection

Equipment Description: <u>Pickup</u>	Equipment ID: <u>10867</u>
Hours/Mileage: <u>47676</u>	Location: <u>FT. Ord</u>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:

Inspected By: <u>MALISEN</u>	Date: <u>5-2-08</u>

White/Superintendent Blue/Warehouse Yellow/Remains



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Monday, May 05, 2008
Report: 5/5/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 53 F MAX. 59 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (10 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (6)

Tim Herron, UXO Team Leader Demobbed

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Inspected 38 grids for field QC, all pass. Grid C3A4C7 was a reinspection of rework

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 2 of 2
Date: Monday, May 05, 2008
Report: 5/5/08

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

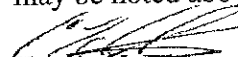
Safety inspections were conducted at work site, no problems. Signage and barriers are adequate.

7. Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. Last work day for Tim Herron. Several hot spots in fence grids, noted in PDA's. We are not removing subsurface t posts or recording as they were emplaced with schonstedt support, pin flag for QA/QC is sufficient.

8. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.



Charlie Hutchison
UXOQC/SO

Attachments:

- 1- inspection check list
- Tailgate, JSAs
- 3 Field daily activity logs

DATE	5/5/2008
	31
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks in fence line grids		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted: weekend driving, keep mind on work at hand.		
0645 observed schonstedt testing at test pit		
0730 Sent daily report.		
0800 inspecting grids for QC		
1200 lunch		
1230 inspecting grids,		
1500 back inspecting grids.		
1700 working on spreadsheets and my field map		
1800 Done for the day.		
1		
VISITORS ON SITE: None	CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:	
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:	IMPORTANT TELEPHONE CALLS	
clear, Low 53 high 59	NONE	
SIGNATURE:  Charlie Hutchison	DATE: 5/5/2008	

FIELD ACTIVITY DAILY LOG

F1

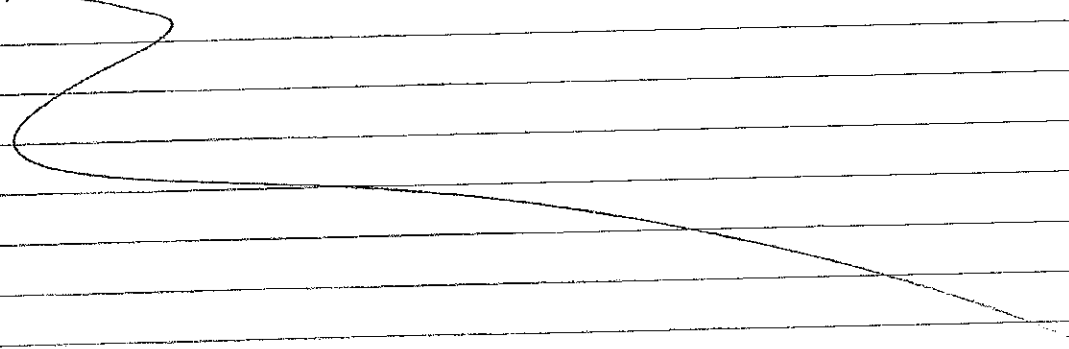
Daily Log	Date:	5	5	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA Project Number: 846075

FIELD ACTIVITY SUBJECT: Fence line EM-61

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS.

0630 On site to load equip. & head to MRS-16
 0730 Start EM-61 w/y
 0730 Start Fence line
 0930 Break
 0945 Resume work
 1140 Lunch
 1210 Resume work
 1500 Break
 1515 Resume work
 1600 Go to calibrate EM-61s
 1630 Back to office to unload & download
 1700 Home



VISITORS ON SITE: CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS: IMPORTANT TELEPHONE CALLS:
 Sunny

SHAW PERSONNEL ON SITE: Mr. Lightner, C. Cheng DATE: 5-5-08
 SIGNATURE:

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Fence Line Grids/Target Reacquisition in Saturated area.	
Company Name: Shaw Environmental Inc.	

Personnel on Site		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
John Kandcer	UXO Tech I	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10

Today's Activities:
 Note: Tim Herron demobilized on Saturday May 3, 2008.

0630 - On site.
 0700 - Both UXO Teams continuing to clear fence line grids.
 1130 - Team 2 completed all fence line grids on west side.
 1130 - Team 2 preparing equipment needed to reacquire targets in two west grids located in the saturated area.
 1300 - Team 2 commenced reacquiring targets in two grids in the saturated area.
 1500 - Team 1 completed all fence line grids located on the south side.
 1515 - Team 1 cleared several small areas located outside the fence line on the west side.
 1700 - Secured for the day.

Note: No MD located today.

VISITORS ON SITE: 	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:



Follow-up Quality Control Inspection Checklist

Report No. 17

Date: 05/05/08

Feature of Work: <u>QC Inspection</u>	Project No. <u>846075</u>
Location: <u>MRS-16 FT Ord, CA</u>	Delivery Order No. _____
Vendor/Supplier: <u>SHAW E and I</u>	Purchase Order No: <u>N/A</u>

Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): WP/SP and Variance TII-024 and Marty's checklist

Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled- A few left with imbedded wire etc. open for Inspection.	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			

Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected the following grids for Quality Control: B3J2J1, B3J2J2, C3A1A0, C3A1A9, C3A1B7, C3A1B8, C3A1B9, C3A1C6, C3A1C7, C3A1D7, C3A1D8, C3A1E8, C3A1E9, C3A1F9, C3A3E0, C3A3F9, C3A3F0, C3A4B7, C3A4C5, C3A4C6, inspected rework on grid C3A4C7, C3A4D4, C3A4D5, C3A4D6, C3A4E1, C3A4E2, C3A4E3, C3A4E4, C3A4F1, C3B2A2, C3B2A3, C3B2B3, C3B2B4, C3B2C4, C3B2C5, C3B2D4, C3B2D5, and C3B2E5. All pass Shaw QC.
 Inspected By: Charlie Hutchison
 SHAW UXOQC/SO Date: 05/05/08



Shaw The Shaw Group Inc.™

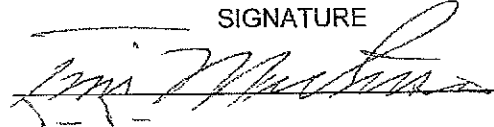
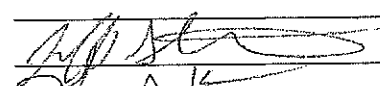
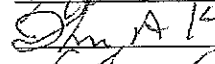
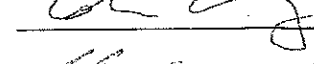
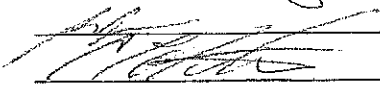
TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 5/5/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West.
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment., Backhoe
 Other Road work and traffic, excavation safety

ATTENDEES

NAME PRINTED	SIGNATURE
Tim Mathisen	
Val Valdez	
Tim Harron	
Jeff Steinwand	
John Kander	
Colin Chang	
Mike Lightner	
Charlie Hutchison	
Steve Bennett	

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

FT Ord MRS-16

Date: *5/5/08*

Job#: 846075

Permit#:

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison Are other crews in area? No
	Wind Direction: From west	exclusion zone 806 feet
	Evacuation Route: return to office	
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)		New: <input type="checkbox"/>
	Assembly Point: Site gate	Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
QC anomalies		
DEMO		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
<i>Pedestrians & Bicycles</i>		
<i>Strains & Sprain</i>		
Accidental detonation		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
avoid poison oak, don't disturb bees.		
<i>Drive Safe Speed</i>		
<i>use ergonomic techniques</i>		
Crew Name Signatures:		
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	
<i>[Signature]</i>	<i>[Signature]</i>	

Equipment Inspection

Equipment Description: <i>Single Cab P/U Truck</i>	Equipment ID: <i>1588F</i>
Hours/Mileage: <i>7239 m.</i>	Location: <i>JLW</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|---|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input checked="" type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>[Signature]</i>	Date: <i>5-2-08</i>

Equipment Inspection

Equipment Description: <i>Track Ford</i>	Equipment ID: <i>3584A</i>
Hours/Mileage: <i>28051</i>	Location: <i>FT ORD</i>
General Condition (Check defects only/Explain under comments)	

- | | |
|--|--|
| <input type="checkbox"/> Cab/Doors/Widnows/Mirros | <input type="checkbox"/> Tires/Lugs |
| <input type="checkbox"/> Coolant Leak | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Drive Train Leak | <input type="checkbox"/> Fire Extenguisher |
| <input type="checkbox"/> Hydraulics | <input type="checkbox"/> Flares |
| <input type="checkbox"/> Other Leaks (Identify) | <input type="checkbox"/> Triangles |
| <input type="checkbox"/> Gauge/Warning Leaks | <input type="checkbox"/> Horn |
| <input type="checkbox"/> Windshield Washers/Wipers | <input type="checkbox"/> Seat Belt |
| <input type="checkbox"/> Brakes (Services/Parking) | <input type="checkbox"/> Backup Alarm |
| <input type="checkbox"/> Lights | <input type="checkbox"/> Non-Slip Surfaces |
| <input type="checkbox"/> Turn Signals | <input type="checkbox"/> Air Tanks |

Comments:	
Inspected By: <i>Tim Hannon</i>	Date: <i>05/02/06</i>



TERC II

Contract No. DACW05-96-D-0011
CTO 016

Page 1 of 2
Date: Tuesday, May 06, 2008
Report: 5/6/08

Contractor Quality Control Daily Report

LOCATION OF WORK: Fort Ord, California

WEATHER: (CLEAR) (FOG) (P.CLOUDY) (CLOUDY) (RAIN) (WINDY)

TEMPERATURE: MIN. 51 F MAX. 59 F, wind < 15mph

1. Contractor/Subcontractor and their area of responsibility:

Shaw Environmental and Infrastructure, Prime Contractor.

PAM Environmental, subcontractor to Shaw, for QC and technical services.

2. Operating plant/equipment with hours worked, idle, or down for repair.

N/A

3. Work performed today (Location/description/by whom).

. Personnel on site:

Tim Mathisen SUXOS (9)

Michael Lightner, Geophysicist field (6 hrs)

Colin Chang, Geophysicist field (10 hrs)

Val Valdez, Site Health and Safety, UXO Team Leader (10)

Tim Herron, UXO Team Leader Demobbed

Jeff Steinwand UXO Tech II (10)

John Kander, UXO Tech I (10)

Charlie Hutchison, UXOQC/SO(10)

Test or control activities:

Inspected 42 grids for field QC, all pass. Grid C3A4C7 was a reinspection of rework, passed.

Inspected add on grids in saturated zone.

Corrective Action Requests Outstanding:

CAR	Date Issued	Action Completed	Date Closed
MRS-16 CAR 0004.	10/03/2007	on going	

Materials Received:

4. Submittals reviewed:

None.

5. Off-site surveillance activities:

None.

6. Job safety evaluations:

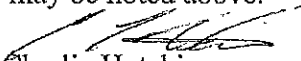
Safety inspections were conducted at work site, no problems.

Instructions received and conflicts with plans or specifications, special occurrences:

Implementing Field Work Variance TII-024. finish grade work with backhoe in several grids. 2 add on grids in saturated area. Completed some grids outside of west fence. Completed Shaw field QC in all grids.

7. Contractor's verification statement:

CERTIFICATION: I certify that the above report is complete and correct and that I or my representative have inspected all work identified on this report performed by Shaw and our subcontractor(s) and have determined to the best of my knowledge and belief that noted work activities are in compliance with the plans and specifications, except as may be noted above.


Charlie Hutchison
UXOQC/SO

Attachments:

- 3- inspection check list
- Tailgate, JSA
- 3 Field daily activity logs
- 1 demo request

FIELD ACTIVITY DAILY LOG

Project Name: MRS-16 MEC Removal	846075
Field Activity: Target Reacquisition in Saturated areatrench Investigation.	
Company Name: Shaw Environmental Inc.	

<i>Personnel on Site</i>		
Name	Title	Hours Worked
Tim Mathisen	SUXOS	9
Charlie Hutchison	QC/Safety	10
John Kandcer	UXO Tech I	10
Val Valdez	UXO Team Leader	10
Jeff Steinwand	UXO Tech II	10

Today's Activities:
0630 - On site
0700 - Team 2 continuing to reacquire targets in two saturated grids. Team 1 excavating one last hot spot and back bladed several previously excavated site.
Approx. 0900 - 1100 - Excavating and recorded soil type and materials contain in island between trench 1 and 2. No MEC encountered. Located and removed 3 - inert 2.36 inch rocket motors from this saturated area excavation site.
0915 - Team 1 commenced investigating reacquired targets in saturated grids on the west side.
1400 - 1515 - Attended MMRP meeting at Corps office.
1615 - Field crew reported that they have completed investigating all targets in two grids located on the west of the saturated area.
1645 - Certified and stored all MD collected today.
1700 - Secured field activities.

VISITORS ON SITE:	CHANGES FROM PLANS AND SPECIFICATIONS
WEATHER CONDITIONS: See QC daily.	IMPORTANT TELEPHONE CALLS:

Daily Log	Date:	5	6	08
	No.			
	Sheet	1	of	1

PROJECT NAME: FORT ORD, CA

Project Number: 846075

FIELD ACTIVITY SUBJECT: Reaq + EM-61 work

DESCRIPTION OF DAILY ACTIVITIES AND EVENTS,

0630 On site to load equip & head to MRS-16
 0700 start EM-61 wfu
 0715 EM-61 calibrations
 0730 Go to finish backhoe scrapes
 0830 Go to help Suxo w/ trenching experiment
 1100 Back to upload data from trenching, then send off
 1200 Back to field, lunch
 1230 Back to work
 1500 Done for day (C. Chang still in field), go to calibrate EM-61
 1530 Back to shop to upload data, unload equip.
 1600 Home

VISITORS ON SITE:

CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:

WEATHER CONDITIONS:

Sunny

IMPORTANT TELEPHONE CALLS:

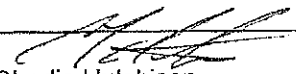
SHAW PERSONNEL ON SITE: M. Lightner, C. Chang

SIGNATURE: 

DATE: 5-6-08

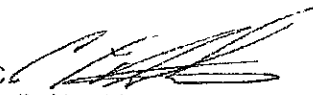
DATE	5/6/2008
	32
SHEET 1 OF 1	

UXOQC/SO FIELD ACTIVITY DAILY LOG

Project Name: FT Ord		Project No : 846075
Field Activity MSR-16 hand excavation of real time EM61 picks in fence line grids		
Company Name: Shaw Environmental		
Today's Activities:		
0630 Tailgate meeting conducted: wind and dust		
0645 observed schonstedt testing at test pit		
0730 Sent daily report.		
0800 inspecting grids for QC		
1200 lunch		
1230 inspecting grids,		
1500 back inspecting grids.		
1600 finished inspecting add on grids C3A1E0 and C3A1F0.		
1		
1700 Done for the day.		
VISITORS ON SITE: None		CHANGES FROM PLANS AND SPECIFICATIONS, AND OTHER SPECIAL ORDERS AND IMPORTANT DECISIONS:
SEE TAILGATE FORM for Personnel present		
WEATHER CONDITIONS:		IMPORTANT TELEPHONE CALLS
clear, Low 51 high 59		NONE
SIGNATURE:  Charlie Hutchison		DATE: 5/6/2008

Follow-up Quality Control Inspection Checklist			
Report No. 18			
Date: 05/06/08			
Feature of Work: <u>QC Inspection</u>	<u>Project No.</u>	<u>846075</u>	
Location: <u>MRS-16 FT Ord, CA</u>	<u>Delivery Order No.</u>		
Vendor/Supplier: <u>SHAW E and I</u>	<u>Purchase Order No:</u>	<u>N/A</u>	
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled- A few left with imbedded wire etc. open for Inspection.	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			
Remarks: GA52 Sconstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected the following grids for Quality Control: B3J3E5, B3J3B6, B3J3B7, B3J3E8, B3J3E9, B3J3F1, B3J3F2, B3J3F3, B3J3F4, B3J3F5, B3J2G8, B3J2G9, B3J2G0, B3J2H5, B3J2H6, B3J2H7, B3J2H8, B3J2I3, B3J2I4, B3J2I5, B3J2J3, B3J2J4, B3J2J4, B3J2J5, B3J3H1, B3J3H2, C3A2A3, C3A2A4, C3A2A5, C3A1G9, C3A1G0, C3A1H0, C3A2H1, C3A2I1, C3A2J2, C3A3F7, C3A3F8, C3A3G5, C3A3G6, and C3A3G7 All pass Shaw QC.			
Inspected By: <u>Charlie Hutchison</u>		Date: 05/06/08	
SHAW UXOQC/SO			

Follow-up Quality Control Inspection Checklist			
		Report No. 19	
		Date: 05/06/08	
Feature of Work: QC Inspection	Project No. 846075		
Location: MRS-16 FT Ord, CA	Delivery Order No.		
Vendor/Supplier: SHAW E and I	Purchase Order No: N/A		
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled- A few left with imbedded wire etc. open for inspection.	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected the following grids for Quality Control: B3J2J7			
All pass Shaw QC.			
Inspected By: Charlie Hutchison		Date: 05/06/08	

Follow-up Quality Control Inspection Checklist			
		Report No. 20	
		Date: 05/06/08	
Feature of Work:	QC Inspection	Project No.	846075
Location:	MRS-16 FT Ord, CA	Delivery Order No.	
Vendor/Supplier:	SHAW E and I	Purchase Order No:	N/A
Reference Documents: (Procurement Documents, Specification/Drawings, incl. Revisions, etc.): <u>WP/SP and Variance TII-024 and Marty's checklist</u>			
Details of Inspection	Sat.	Un-Sat	N/A
1. Team Leader agrees work is complete.	X		
2. Data entries and reports are accurate.	X		
3. Test and inspect equipment-GA52 schonstedt	X		
4. Verify that Communication and Notification Requirements are met	X		
5. Verify that Essential Personnel Only are within the Exclusion Zone.	X		
6. Verify that Barricades and Warning Signs are Posted	X		
7. Serviceable stakes.	X		
8. All holes backfilled- A few left with imbedded wire etc. open for inspection.	X		
9. Reasonably absent of cultural debris and team trash	X		
10. Inspect at LEAST 10% of areas where schonstedts were used.	X		
11. All pin flags pulled except biologists and utility markers	X		
12. Personnel Present: Hutchison	X		
13. Briefed team on results of inspection.			
13. Government Representative: Clinton Huckins			
Remarks: GA52 Schonstedt serial # 166369, test plot checked out. Setting on max sensitivity. Inspected the following grids for Quality Control: C3A1E0 and C3A1F0			
All pass Shaw QC  Inspected By: <u>Charlie Hutchison</u>			
		Date: 05/06/08	



Shaw The Shaw Group Inc.™

TAILGATE SAFETY MEETING

Division/Subsidiary Shaw E & I Facility Concord, CA
 Date 5/16/08 Time 0630 Job Number 846075
 Customer USACE Address Sacramento, CA
 Specific Location Former Fort Ord, CA
 Type of Work Equipment prep, UXO sub-surface, , Housekeeping UXO Ops MRS-16, EM61
 Chemicals Used Bug Dope, Cleansers, sun screen, gasoline, Technu, rubbing alcohol
OBTAIN MATERIAL SAFETY DATA SHEETS (MSDS) FOR CHEMICALS TO BE USED ONSITE

SAFETY TOPICS PRESENTED

Protective Clothing/Equipment Level D
 Chemical Hazards Explosives residue, metals, chemicals or thermal burns, Inhalation
 Physical Hazards Slip/Trip/Fall, Lifting, MEC, backing, hand and eye injury, poison oak, pinch points, swing
 Emergency Procedures Notify Supervisor and Safety Officer. For emergency, radio for help, render 1st aid, contact supervisor
 Hospital/Clinic CHOMP Phone (831) 624-5311 Paramedic Phone 911
 Hospital Address 23625 Holman Highway, Monterey, CA (South on Hwy 1 to Holman Hwy West)
 Special Equipment First aid Kits, Fire extinguishers, hand and eyewash, Radiograph equipment, Backhoe
 Other Road work and traffic, windy in PM, stay upwind of dust

ATTENDEES

NAME PRINTED	SIGNATURE
<u>Tim Mathisen</u>	<u>[Signature]</u>
<u>Val Valdez</u>	<u>[Signature]</u>
<u>Jeff Steinwand</u>	<u>[Signature]</u>
<u>John Kander</u>	<u>[Signature]</u>
<u>Colin Chang</u>	<u>[Signature]</u>
<u>Mike Lightner</u>	<u>[Signature]</u>
<u>Charlie Hutchison</u>	<u>[Signature]</u>
<u>Steve Bennett</u>	<u>[Signature]</u>

JSA # _____

L19



Shaw Environmental, Inc.

JOB SAFETY ANALYSIS

Date: 5/6/08



Job#: 846075

Permit#:

FT Ord MRS-16

Issued By: Hutchison

Location of Job (Unit/Location on Project):		
Required PPE: Mod "D" Safety Glasses and leather work gloves	Safety Access / Location	Supervisor of Work: Mathisen
	Safe Haven: Office	JSA Prepared by: Hutchison
	Wind Direction: From west	Are other crews in area? yes
	Evacuation Route: return to office	exclusion zone 806 feet
Pre-Job Preparation 1 Fill out JSA 2 Review JSA (everyone) 3 Sign JSA (everyone)	Assembly Point: Site gate	New: <input type="checkbox"/>
		Revised: <input checked="" type="checkbox"/>
Job Task (What are You Doing)		Audit the Job Audit Time:
Hand Excavation of MEC		
Sort scrap		
Remove fence		
Excavate with backhoe		
Potential Hazards		Supervisor's Comments
Slips, Trips and Falls		
Biological hazards, insects, snakes, poison oak, UV		
UXO		
passersby being injured		
Pedestrians & Bicycles		
Accidental detonation		
Strains & Sprains		
Recommended Action or Procedures		Supervisor's Initials
Observe walking area/conditions		
Pre exposure lotion or TYNK		
Use ergonomic digging techniques		
avoid poison oak, don't disturb bees. Watch for rattlers, use sunscreen ointment		
Be AWARE And ALERT		
Dig to side of anomaly		
check with mag in front of bucket.		
Crew Name Signatures:		

	Detonation Approval Checklist/Risk Assessment	
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DATE(S) OF SHOT: MAY 8, 2008 WINDOW FOR SHOT: 0800-1500

LOCATION OF SHOT: MRS-16 TYPES OF MEC: m, Practice Mines
Hand Grenade Fuz-e

NET EXPLOSIVE WEIGHT (NEW) [*ESTIMATED]: < 4 lbs NUMBER OF DETONATIONS: 2

Type of Engineering Control(s):		Site Preparation Measures:	
Sand Bagging		Site Wet Down	
Soil Tamping	✓	Vegetation Removal	
Barricades		Other	
Comments:			

A qualitative measure of the worst credible event resulting from personnel exposure to the unexploded ordnance:

LOW	MEDIUM	HIGH
1	2	3
2	3	4
3	4	5+

Distance to nearest inhabited location/structure likely to be at risk from the OE hazard:



LOW	MEDIUM	HIGH
1	2	3
2	3	4
3	4	5+

Weather Conditions:

LOW	MEDIUM	HIGH
1	2	3
2	3	4
3	4	5+

Wind Conditions:

LOW	MEDIUM	HIGH
1	2	3
2	3	4
3	4	5+

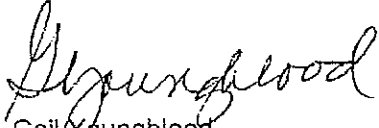
	Detonation Approval Checklist/Risk Assessment	
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Assessment Total:	Low Risk 1-7	Caution 8-14	High Risk 15-20
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- No individual detonation will exceed 15lbs NEW without prior approval
- All notifications will be sent two hours prior to detonation.
- COE Ordnance and Explosives Safety Specialist will be on site during detonation operations.
- Engineering Controls will be in place prior to detonation.
- Fire Department will be on site during detonation operations.

Approved

Date: 5/5/08


Gail Youngblood
BRAC Environmental Coordinator

SHAW POC: Tim Mathisen
775-722-6950