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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Incident Name: | | | | | 2. Operational Period: (Date/Time) | | | | | | | | | | **HAZARDOUS MATERIALS SITE SAFETY AND CONTROL PLAN**  **ICS 208 HM - EPA** | | | | | | | | | | | | | |
|  | | | | | From:  To: | | | | | | | | | |
| 3a. Incident Location: | | | | | | | | | | | | | 3b. Incident Area Size: | | | | | | | | | | | | | | | |
| **ORGANIZATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Incident/Unified Command: | | | | | | | 5. Safety: | | | | | | | | | | | | | 6. Operations : | | | | | | | | |
| 7. Division/Group Supervisor : | | | | | | | 8. Team Leader: | | | | | | | | | | | | | 9. Other (Specify): | | | | | | | | |
| 10. Team Members / Tasks (Box 24): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Names | | | Task #  (Box 24) | |  | | Names | | | | | | | | | | Task #  (Box 24) | |  | | | Names | | | | | Task #  (Box 24) |
| 1 |  | | |  | | 4 | |  | | | | | | | | | |  | | 7 | | |  | | | | |  |
| 2 |  | | |  | | 5 | |  | | | | | | | | | |  | | 8 | | |  | | | | |  |
| 3 |  | | |  | | 6 | |  | | | | | | | | | |  | | 9 | | |  | | | | |  |
| **11. SITE MAP** | | Attached:  Yes:  No: | Includes: | | | | Command Post | | | | | | | Work Zones | | | | | | Evacuation Route(s) | | | | | | | | |
| Assembly Point(s) | | | | | | | Topography | | | | | | Accessibility by Air, Ground and/or Water | | | | | | | | |
| Location of Hazards | | | | | | | North Arrow | | | | | | Decontamination Line | | | | | | | | |
| **EMERGENCY PROCEDURES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12a. Notified | | | | | Hospital: | | | | | | | Air Ambulance | | | | | | | | | Law Enforcement | | | | | | | |
| Ambulance: | | | | | | | Fire | | | | | | | | | Other: | | | | | | | |
| 12b. On-Site | | | | | Medical Monitoring: Yes  No | | | | | | | | | | | | Medical Treatment and Transport: Yes  No | | | | | | | | | | | |
| 12c. Evacuation Plan | | | | | Assembly Area(s) Identified: | | | | | | Safe Distance: | | | | | | | | | | | Assembly Point(s): | | | | | | |
| ALARM System(s): | | | | Horn  # Blasts | | | | | | | | Bells  # Rings | | | | | | | | Radio Code | | | |
| Other (specify): | | | | | | | | | | | | | | | | | | | |
| 12d. In Case of Emergency, Notification Procedures | | | | | Phone  Radio  Other: | | | | | | | | | | | | | | | | | | | | | | | |
| Safety Officer #: | | | | |  | | | | | | | | | Medical #: | | | | | | |  | | |
| Command #: | | | | |  | | | | | | | | | Site Security / Entry #: | | | | | | |  | | |
| Operations #: | | | | |  | | | | | | | | | Other (specify): | | | | | | |  | | |
| 12e. Directions to Nearest Medical Assistance | | | | | Attached: Yes:  No:  If NO, then Describe: | | | | | | | | | | | | | | | | | | | | | | | |
| 12 f. Additional Emergency Procedures / Comments | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **13. DECONTAMINATION PROCEDURES** | | | | | BELOW:  ATTACHED: | | | | | | | | | | | | | | | | | | | | | | | |
| DROP: Segregated Equipment  WASH: Boot Cover/Glove  RINSE: Boot Cover/Glove  REMOVE: Tape  REMOVE: Boot Cover  REMOVE: Outer Gloves | | | | | WASH: Suit/Safety Boot  RINSE: Suit/Safety Boot/SCBA  RE-ENTER: Tank Change/Redress  REMOVE: Safety Boot  REMOVE: Suit/Hard Hat  REMOVE: SCBA (A/B) | | | | | | | | | | | WASH: Inner Glove  RINSE: Inner Glove  REMOVE: Face Piece  REMOVE: Inner Glove  REMOVE: Inner Clothing | | | | | | | | | | | WASH: Field  Redress | |
| **14. RECORDS MAINTAINED** | | | | | Medical Surveillance  Fit Testing  Mandatory Training  Other: | | | | | | | | | | | | | | | | | | | | | | | |
| **15. ATTACHMENTS** | | | | | **Procedures, SOPs, Safe Work Practices, IAP Components, Other** | | | | | | | | | | | | | | | | | | | | | | | |
| MSDS/SDS Chemical 1 | | | | | Decontamination Plan | | | | | | | | | | | | | | | | | | | IAP COMPONENTS | | | | |
| MSDS/SDS Chemical 2 | | | | | Confined Space Procedures: | | | | | | | | | | | | | | | | | | | 201 Incident Briefing; or | | | | |
| MSDS/SDS Chemical 3 | | | | | JHA: | | | | | | | | | | | | | | | | | | | 202 Incident Objectives | | | | |
| Spill Containment Plan | | | | | JHA: | | | | | | | | | | | | | | | | | | | 203 Organization List | | | | |
| Handling Drums/Other Containers | | | | | JHA: | | | | | | | | | | | | | | | | | | | 204 Assignment List (#8, #9) | | | | |
| Disposal Procedures | | | | | Other (specify): | | | | | | | | | | | | | | | | | | | 205 A Incident Comms Plan | | | | |
| Release Map Pathway | | | | | Other (specify): | | | | | | | | | | | | | | | | | | | 206 Medical Plan | | | | |
| Modifications to Documented SOPs Work Practices: | | | | | | | | | | | | | | | | | | | | | | | | 215 A IAP Safety Analysis | | | | |
| **Hazardous Materials Site Safety and Control Plan Page 1 ICS 208 HM– EPA *(Rev 11/13)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **HAZARD ANALYSIS / ENVIRONMENTAL & PERSONNEL MONITORING** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **16. Chemical Name(s)** | | | | | | | | **Action Levels** | | | | | | | | | **LEL/UEL %** | | | **Physical State (S / L / G)** | | | | | | **Ceiling IDLH** | | | | **STEL / TLV** | | | **Flash Pt / Ignition Pt**  **(F or C)** | | **Vapor Pressure**  **(mm HG)** | | | | | **Vapor Density** | | | | | ***Sp. Gravity*** | **Boiling Pt**  **(F or C)** | | | **Odor Thresh (ppm)** | | |
| 1) | | | | | | | |  | | | | | | | | |  | | |  | | | | | |  | | | |  | | |  | |  | | | | |  | | | | |  |  | | |  | | |
| 2) | | | | | | | |  | | | | | | | | |  | | |  | | | | | |  | | | |  | | |  | |  | | | | |  | | | | |  |  | | |  | | |
| 3) | | | | | | | |  | | | | | | | | |  | | |  | | | | | |  | | | |  | | |  | |  | | | | |  | | | | |  |  | | |  | | |
| 4) | | | | | | | |  | | | | | | | | |  | | |  | | | | | |  | | | |  | | |  | |  | | | | |  | | | | |  |  | | |  | | |
| 17. Instruments: | | | | | | | | %O2 | | | | | | | | | H2S | | | | | | | | | PID | | | | | | | Thermal | | | | | | | CGI | | | | | | | | | | | |
|  | | | | | | | | %LEL | | | | | | | | | CO | | | | | | | | | FID | | | | | | | Colorimetric | | | | | | | Personnel: | | | | | | | | | | | |
|  | | | | | | | | Radiation / Specify: | | | | | | | | | | | | | | | | | | | | | | | | | Other: | | | | | | | | | | | | | | | | | | |
| 18. Monitoring Frequency: | | | | | | | | 24 hr | | | | | | | | | 8 hr | | | | | | Hourly | | | | | | | | | | Continuous | | | | | | | Other: | | | | | | | | | | | |
| 19. Containers | | | | | | | | Types / Quantities / Comments: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20. Physical Hazards | |  | | Confined Space | | | | | | | | | |  | | Heat Stress | | | | | |  | | | Noise | | | | | |  | Water | | | | | | | | |  | | | Biomedical waste / needles | | | | | | | |
|  | |  | | Slips/Trips/Falls | | | | | | | | | |  | | Cold Stress | | | | | |  | | | Electrical | | | | | |  | Ionizing Rad | | | | | | | | |  | | | Other: | | | | | | | |
|  | |  | | Excavation | | | | | | | | | |  | | Fatigue | | | | | |  | | | Ergonomic | | | | | |  | Animal/Plant/Insect | | | | | | | | |  | | | Other: | | | | | | | |
| **21a. Hazards** | | **Chemical** | | | | | | | | | | **21b. Target Organs** | | | | | | | **Chemical** | | | | | | | | | | **21b. Con’t** | | | | | **Chemical** | | | | | | | | **21c. Exposure Routes** | | | | | **Chemical** | | | | |
|  | | **1** | **2** | | | **3** | | | **4** | | |  | | | | | | | **1** | | **2** | | | **3** | | | **4** | |  | | | | | **1** | | **2** | **3** | | **4** | | |  | | | | | **1** | **2** | | **3** | **4** |
| Explosive | |  |  | | |  | | |  | | | Eyes | | | | | | |  | |  | | |  | | |  | | Lungs | | | | |  | |  |  | |  | | | Inhalation | | | | |  |  | |  |  |
| Flammable | |  |  | | |  | | |  | | | Nose | | | | | | |  | |  | | |  | | |  | | Bone | | | | |  | |  |  | |  | | | Absorption | | | | |  |  | |  |  |
| Reactive | |  |  | | |  | | |  | | | Ears | | | | | | |  | |  | | |  | | |  | | Throat | | | | |  | |  |  | |  | | | Ingestion | | | | |  |  | |  |  |
| Radioactive | |  |  | | |  | | |  | | | Liver | | | | | | |  | |  | | |  | | |  | | Kidney | | | | |  | |  |  | |  | | | Injection | | | | |  |  | |  |  |
| Carcinogen | |  |  | | |  | | |  | | | Skin | | | | | | |  | |  | | |  | | |  | | Heart | | | | |  | |  |  | |  | | | Membrane | | | | |  |  | |  |  |
| Oxidizer | |  |  | | |  | | |  | | | CNS | | | | | | |  | |  | | |  | | |  | | Blood | | | | |  | |  |  | |  | | | NOTES: | | | | | | | | | |
| Corrosive | |  |  | | |  | | |  | | | Gastrointestinal | | | | | | |  | |  | | |  | | |  | | Respiratory | | | | |  | |  |  | |  | | |  | | | | | | | | | |
| Biomedical | |  |  | | |  | | |  | | | Circulatory | | | | | | |  | |  | | |  | | |  | | Other: | | | | |  | |  |  | |  | | |  | | | | | | | | | |
| Toxic | |  |  | | |  | | |  | | | Other: | | | | | | |  | |  | | |  | | |  | |  | | | | |  | |  |  | |  | | |  | | | | | | | | | |
| **TASK / PPE / CONTROLS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **22a. TASK 1: PPE Level** | | | | | | | | | | | Description: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | C | B | | | A | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **22b. TASK 2: PPE Level** | | | | | | | | | | | Description: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | C | B | | | A | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **22c. TASK 3: PPE Level** | | | | | | | | | | | Description: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | C | B | | | A | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **23a. PPE** | | | | | | | **TASK** | | | | | | | | **Comment/Modifications** | | | | | | | | | | | | | **23b. CONTROLS** | | | | | | | **TASK** | | | | | | | | **Comment/Modifications** | | | | | | | | |
|  | | | | | | | **1** | | | **2** | | | **3** | |  | | | | | | | | | | | | |  | | | | | | | **1** | | | **2** | | **3** | | |  | | | | | | | | |
| Boots (Steel-toe) | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Work/Rest (hrs) | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| Hard Hats | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Fluids (amt/time) | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| Hearing Protection | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Clothing (cold) | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| Eye Protection | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Ventilate | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| Gloves (Inner/Outer) | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Signs & Barricade | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| Face Shield/ Splash Suit | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Fall Protection | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| Suit (Inner/Outer) | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Post Guards | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| APR/PAPR (cartridges) | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Life Jacket | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| SAR | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Fire Resistance PPE | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| SCBA | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Flash Protection | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| EPD: | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | Sanitation Facilities | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| OTHER: | | | | | | |  | | |  | | |  | |  | | | | | | | | | | | | | OTHER: | | | | | | |  | | |  | |  | | |  | | | | | | | | |
| **PREPARED/APPROVED BY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. Prepared by: | | | | | | | | | | | | | | | | | | Signature: | | | | | | | | | | | | | | | | | | | | Date / Time: | | | | | | | | | | | | | |
| 57. Approved by: | | | | | | | | | | | | | | | | | | Signature: | | | | | | | | | | | | | | | | | | | | Date / Time: | | | | | | | | | | | | | |
| **Hazardous Materials Site Safety and Control Plan Page 2 ICS 208 HM– EPA *(Rev 11/13)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |