

Activity Number

New Activity
 5-Year Review
 New Hazard

Last Reviewed _____

Readiness Review Activity Approval Form

Part 1: Activity Identification Information

Complete form and send with Hazard Identification Checklist, Hazard Management Statements, and other supporting documentation to ESH&A in G40 TASF.

Activity Title: _____ Building/Room: _____
 Activity Supervisor: _____ Phone: _____
 Activity Group Leader: _____ Phone: _____

Provide a detailed description of your proposed activity (in layman's language):

Written SOP(s): Training Form: Current Chemical Inventory on File: PPE Form: _____ Lifting Form: Reviewed SDSs: _____

I have reviewed the hazards identified and approve this activity:

 Group Leader Employee #: _____ Date: _____

 Reviewed by SC/SR Employee #: _____ Date: _____

Part 2: Developmental Approval

ESH&A will categorize the activity hazard level. This step must be completed before acquisition, fabrication, or testing.

Safety Review Facilitator: _____ ESH&A Hazard Level: _____
 ESH&A Lead: _____ Test Plan Date: _____

 ESH&A Lead Employee #: _____ Date: _____

 Hazard Level Concurrence: SRC Facilitator Employee #: _____ Date: _____

Part 3: Operational Approval Recommendation

Approval is required before operation of an activity.

ESH&A Lead: _____ Employee #: _____ Date: _____

Part 4: Operational Approval

 SRC Recommended Approval Employee #: _____ Date: _____

 Div., Inst., Prog. Director/Dept. Mgr. Approval Employee #: _____ Date: _____