497-5175 Janet Beel

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN

593-3789 Dave Garner -3706

SITE NAME DOUGLAS AIRCRAFT CO. SITE CONTACT W. BARNACK, JR. PHONE (213)593-7859

LOCATION 3855 LAKEWOOD BLVD., LONG BEACH EPA CONTACT JEAN DANIEL PHONE (415)744-1478

EPA I.D. NO. CAD008378044 PREPARED BY BARBARA SOUTKOOS DATE 13 AUG 90

WORK ASSIGNMENT NO. R09020

☐ AMENDMENT TO EXISTING APPROVED HSP *(DATE EXISTING HSP APPROVED _____)*

OBJECTIVES: *Summarize below*

Conduct a RCRA generator compliance evaluation inspection (CEI) of hazardous waste management practices at Douglas Aircraft Co.

SITE TYPE: *Check as many as applicable*

☒	Active	☐	Landfill	☐	Unknown
☐	Inactive	☐	Uncontrolled	☐	Other *specify:*
☒	Secure (assumed)	☒	Industrial		
☐	Unsecure	☐	Recovery		
☒	Enclosed Space	☐	Well Field		

SITE DESCRIPTION AND HISTORY: *Summarize below. Include principal operations and unusual features (containers, buildings, dikes, power line, terrain, etc.) and complaints from public, previous agency actions, known exposures or injuries, etc.*

Facility is owned by McDonnell Douglas Corporation. It is assumed that access to the site is strictly controlled due to the nature of their work. According to the City of Long Beach representative, the facility is "very big." Facility's Notification of H.W. activity form indicates that a wide variety of hazardous wastes are generated at the site.

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

WASTE MANAGEMENT PRACTICES:

According to the facility's Notification of Hazardous Waste Activity, the facility ~~is a~~ appears to be a large quantity generator. No other information regarding waste management practices is available.

WASTE TYPES: [X] Liquid [X] Solid [X] Sludge [ ] Gas [X] Unknown [ ] Other *specify:*

WASTE CHARACTERISTICS: *Check as many as applicable*

[X] Corrosive	[ ] Flammable	[ ] Radioactive
[X] Toxic	[X] Volatile	[X] Unknown
[ ] Inert	[ ] Reactive	[ ] Other *specify:*

HAZARDS OF CONCERN:

[ ] Heat Stress	[ ] Biological
[ ] Cold Stress	[X] Noise probable
[ ] Explosion/Flammable	[X] Inorganic Chemicals
[ ] Oxygen Deficient	[X] Organic Chemicals
[ ] Radiological	[ ] Other *specify:*

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

HAZARDOUS MATERIAL SUMMARY: *Indicate waste type by category*

CHEMICALS:	SOLIDS:	SLUDGES:	SOLVENTS:	OILS:	MEP TOXICITY:
[X] Acids	[ ] Flyash	[ ] Paint Pigments	[X] Halogenated Solvents (F001, F002)	[X] Oily Wastes	[ ] Arsenic
[X] Caustics	[ ] Asbestos	[ ] Metals Sludges	[X] Non-Halogenated Solvents (F003, F004)	[ ] Other *specify:*	[ ] Barium
[ ] Pickling Liquors	[ ] Milling/Mine Tailings	[ ] POTW	[ ] Other *specify:*		[ ] Cadmium
[ ] Pesticides	[ ] Ferrous Smelter	[ ] Aluminum			[ ] Chromium
[X] Cyanides	[ ] Non-Ferrous Smelter	[ ] Other *specify:*			[ ] Lead
[ ] Phenols	[ ] Other *specify:*				[ ] Mercury
[ ] Halogens					[ ] Selenium
[ ] PCBs	Unknown	Unknown			[ ] Silver
[ ] Other *specify:*					Unknown

NOTES: Based on the facility's 6/27/80 Notification of Hazardous Waste Activity Form.

FIRE/EXPLOSION POTENTIAL: [ ] High [ ] Medium [X] Low [X] Unknown

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

CHEMICALS PRESENT AT THE SITE	HIGHEST OBSERVED CONCENTRATION (specify units and media)	PEL/TLV ppm or mg/m³ (specify)	IDLH ppm or mg/m³ (specify)	SYMPTOMS/EFFECTS OF ACUTE EXPOSURE	Photo Ionization Potential
Cyanides	Unknown	5 mg/m³	50 mg/m³	Weakness, headache, confusion, nausea, vomiting, slow gasping respiratory, irritated eyes and skin	NA
Xylene	Unknown	100 ppm	1000 ppm	Dizziness, excitement, drowsiness, staggering gait; irritated eyes, nose, throat; nausea, vomiting, abdominal pain, dermatitis	8.44 eV
MEK	Unknown	200 ppm	3000 ppm	Irritated eyes, nose; headache, dizziness, vomiting	9.48 eV
Toluene	Unknown	100 ppm	2000 ppm	Fatigue, weakness, confusion, dizziness, headache, dilated pupils, nervousness, muscle fatigue, insomnia	8.82 eV
TCE	Unknown	50 ppm	Carcinogen	Headache, vertigo, visual disturbance, tremors, nausea, vomiting, irritated eyes, cardiac arrhythmia	9.47 eV

NOTES: Based on facility's Notification of Hazardous Waste Activity form

NA = Not Available
NE = None Established
S = Soil
A = Air
SW = Surface Water
GW = Groundwater
T = Tailings
SL = Sludge
F = Flyash
D = Drums
TK = Tanks
L = Lagoon
U = Unknown

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

CHEMICALS PRESENT AT THE SITE	HIGHEST OBSERVED CONCENTRATION (specify units and media)	PEL/TLV ppm or mg/m³ (specify)	IDLH ppm or mg/m³ (specify)	SYMPTOMS/EFFECTS OF ACUTE EXPOSURE	Photo Ionization Potential
Stoddard Solvent ~~(C_9H_{20})~~	Unknown	100 ppm	5000 ppm	Irritated eyes, nose, throat; dizziness	NA
Nitric Acid	Unknown	2 ppm	100 ppm	Irritated eyes, mucous membane and skin	11.03eV
Chromic Acid	Unknown	0.1 mg/m³	30 mg/m³	Respiratory nasal septum irritation, eye injury	---
Phosphoric Acid	Unknown	1mg/m³	N.A.	Irritated upper respiratory tract, eyes, and skin; burns skin and eyes	NA

NOTES: (see previous page)

NA = Not Available
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PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

FIELD ACTIVITIES COVERED UNDER THIS PLAN

TASK DESCRIPTION / SPECIFIC TECHNIQUE / SITE LOCATION	TYPE	LEVEL OF PROTECTION Primary	LEVEL OF PROTECTION Contingency	INSPECTION DATE
1 Visual site inspection with no sampling	Intrusive (Non-Intrusive)	A B C (D) Modified	A B (C) D Modified	August 21, 1990
2	Intrusive Non-Intrusive	A B C D Modified	A B C D Modified	

SITE PERSONNEL AND RESPONSIBILITIES *(include subcontractors)*

NAME	OFFICE	PRC HEALTH CLEARANCE	RESPONSIBILITIES / TASK	
BARBARA SOOTKOOS	SF		Work Assignment Manager	(1) 2
↓	↓		Site Health and Safety Coordinator	(1) 2
↓	↓		Lead inspector	
GORDON BALLENTINE	↓		Inspector	

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

PROTECTIVE EQUIPMENT: *Specify by task. Indicate type and/or material, as necessary.*

TASKS: (1) 2

LEVEL: A B C (D) Modified

[X] Primary [ ] Contingency

[X] Respiratory: *Not needed*
[ ] APR:
[ ] Cartridge:
[ ] Escape Mask:
[ ] Other:

[ ] Head and Eye: *Not needed*
[X] Safety Glasses:
[ ] Face Shield:
[ ] Goggles:
[X] Hard Hat:
[ ] Other:

[ ] Boots: *Not needed*
[X] Boots: *Steel Toe/Steel Shank*
[ ] Overboots:

[X] Prot. Clothing: *Not needed*
[ ] Tyvek Coverall
[ ] Saranex Coverall
[ ] Coverall:
[ ] Other:

[X] Gloves: *Not needed*
[ ] Undergloves:
[ ] Gloves:
[ ] Overgloves:

[ ] Other: *Specify below*

TASKS: (1) 2

LEVEL: A B (C) D Modified

[ ] Primary [X] Contingency

[ ] Respiratory: *Not needed*
[ ] APR:
[X] * Cartridge: Organic Vapor
[ ] Escape Mask:
[ ] Other:

[ ] Head and Eye: *Not needed*
[X] Safety Glasses:
[ ] Face Shield:
[ ] Goggles:
[X] Hard Hat:
[ ] Other:

[ ] Boots: *Not needed*
[X] Boots: *Steel Toe/Steel Shank*
[ ] Overboots:

[ ] Prot. Clothing: *Not needed*
[X] Tyvek Coverall
[ ] Saranex Coverall
[ ] Coverall:
[ ] Other:

[ ] Gloves: *Not needed*
[ ] Undergloves:
[X] Gloves:
[ ] Overgloves:

[ ] Other: *Specify below*

* If respiratory protection is needed, the site H&S coordinator will have the option of evacuating the site.

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

MONITORING EQUIPMENT: *Specify by tasks. Indicate type, as necessary. Attach additional sheets, as necessary.*

INSTRUMENT	TASKS		ACTION GUIDELINES		COMMENTS
Combustible Gas Indicator O_2 Meter	1	2	0 - 10% LEL 10 - 25% LEL > 25 % LEL 21% O_2 21 - 19.5% O_2 < 19.5% O_2	*No explosion hazard* *Potential explosion hazard; notify SHSC.* *Explosion hazard; interrupt task/evacuate* *Oxygen normal* *Proceed with caution* *O_2 deficient; stop task; notify SHSC*	☒ *Not Needed*
Radiation Survey Meter	1	2	3 x Background >2 mR/hr	*Notify SHSC* *Interrupt task/evacuate*	*Note: Annual exposure not to exceed 100 mrem/year or 50 urem/hour average* ☒ *Not Needed*
Photoionization Detector ☐ 11.7 ev ☒ 10.2 ev ☐ 9.8 ev ☐ ___ ev Type HNU	1	2	*Specify:* >0 - 5 ppm above background >5 ppm to 20 ppm above background >20 ppm above background	 *Level D* *Level C* *Evacuate Site*	☐ *Not Needed*
Flame Ionization Detector Type_____	1	2	*Specify:*		☒ *Not Needed*
Detector Tubes/Monitor Type_____ Type_____	1	2	*Specify:*		☒ *Not Needed*
Respirable Dust Monitor Type_____ Type_____	1	2	*Specify:*		☒ *Not Needed*
Other *Specify:*	1	2	*Specify:*		☒ *Not Needed*

PRC EMI SITE INSPECTION HEALTH AND SAFETY PLAN (Continued)

PERSONNEL DECONTAMINATION/CONTAINMENT AND DISPOSAL METHOD

Personnel will wash their hands and faces before leaving the facility. The HNU will be wiped clean when the inspection is complete. If exposure occurs during the inspection, appropriate decontamination procedures will be followed. Personal protective clothing, such as Tyveks, will be bagged and disposed of at the facility as needed.

EMERGENCY CONTACTS	PHONE
USEPA Environmental Response Team	201/321-6660
U.S. Coast Guard Environmental Response Team	800/424-8802
Association of American Railroads Response Team	202/293-4048
CHEMTREC	800/424-9300

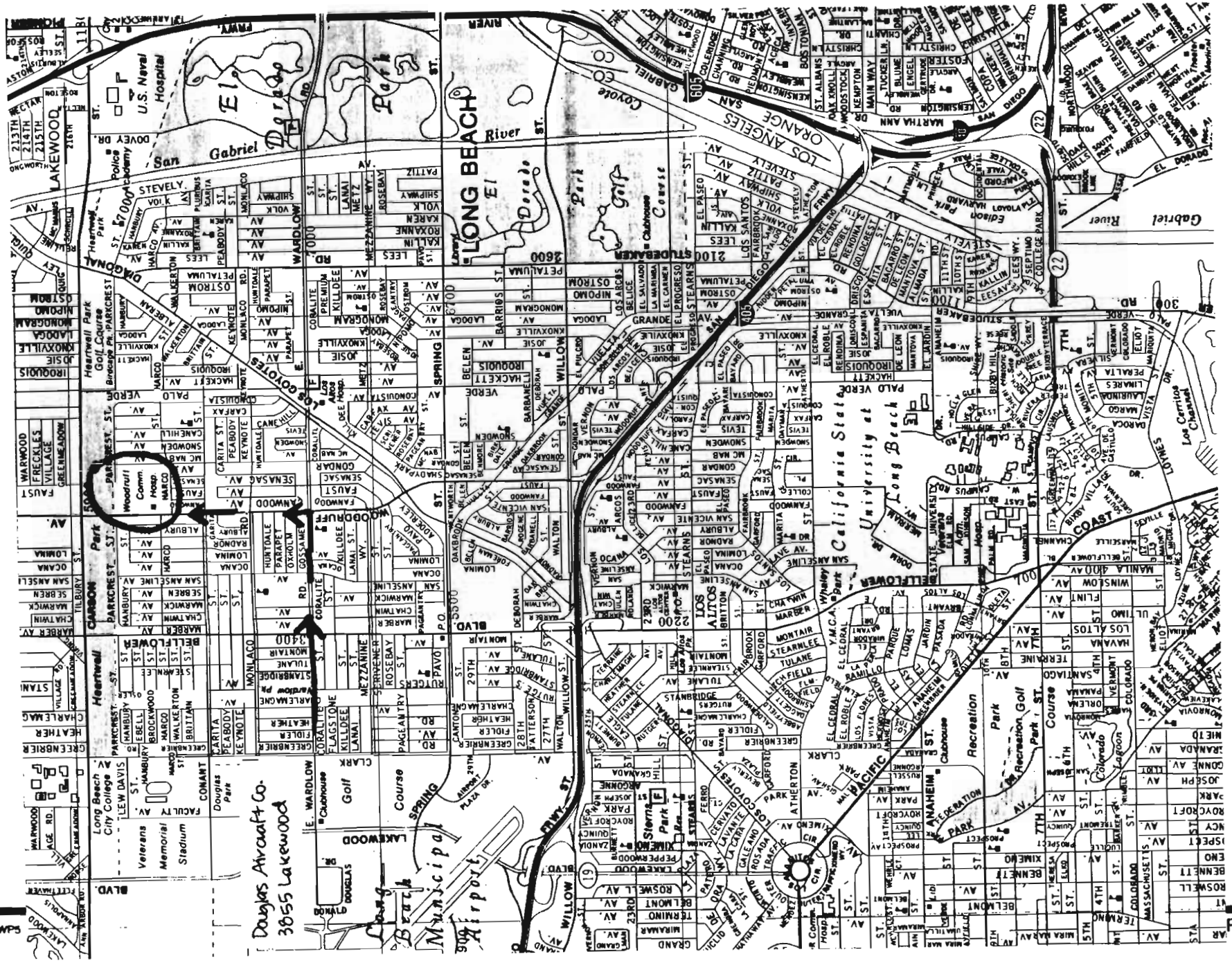
Fire Department	411
Police Department	411
Hospital	Woodruff Comm. Hosp.
Hospital Address	3800 Woodruff
Hospital Phone	(213) 420-6000
Ambulance Service	411

Route to Hospital *(attach map with route to hospital if available)*

See attached map

HOSPITAL ROUTE

THIS PAGE RESERVED FOR ~~SITE MAP (IF AVAILABLE)~~



APPROVAL/SIGN-OFF FORM

WORK ASSIGNMENT R09020

I have read, understand, and agreed with the information set forth in this Health and Safety Plan, and discussed with the Site Health and Safety Coordinator.

Name	Signature	Date
BARBARA SOKKOS	[signature]	8-21-90
GORDON BALLENTINE	[signature]	8/21/90

APPROVALS:

[signature] Work Assignment Manager	8-17-90 Date
[signature] Site Health and Safety Coordinator	8-21-90 Date
Krunje Mikulicic Aug 14/90 Regional Health and Safety Coordinator	Date