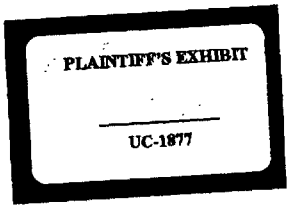
COPY TO: 1. OPERATING DEPARTMENT HEAD
2. A. L. BAREFOOT
3. D. R. HALEY
4. K. G. TOWNSEND
5. J. L. WYATT



SHARE AUDIT PROCEDURE

DEPT. MAINTENANCE

DATE 2-1-83

	YES	NO
DEFICIENCY EXISTS		✓

NAME OF PROCEDURE CHLOROTHENE HANDLING

REFERENCE? S + OH PROCEDURES MANUAL

NUMBER OF PERSONNEL INTERVIEWED: 2

A. AWARE OF PROCEDURE?	✓	
B. UNDERSTAND PROCEDURE?	✓	
C. FOLLOW PROCEDURE?	✓	
D. IF NO, WHY NOT?		
E. REMEMBER HAVING RECEIVED TRAINING?	✓	
1. LAST YEAR		
2. TWO YEARS AGO		
3. THREE YEARS AGO		
UP TO DATE PROCEDURE IN APPROPIATE MANUAL?	✓	
ANY RELATION TO A/I REPORTS IN LAST 6 MONTHS?		✓
SHOULD EXISTING PROCEDURE BE MODIFIED?(IF YES EXPLAIN)		✓
SHOULD RETRAININC BE CONDUCTED?		✓
SHOULD ANOTHER AUDIT BE CONDUCTED?	✓	

IF YES WHEN? 6 MONTHS

AUDITED BY: Maria Gutierrez

APPROVED BY: K. G. Townsend

CHLOROTHENE HANDLING

INSPECTION AND AUDIT

UNIT/AREA (BLDG) 424 DATE 2-1-83

AUDIT BY Maria Gutierrez REVIEWED BY _____

		YES	NO	SEE COMMENT
A.	OPERATING DEPARTMENTS			
1.	Are not using chlorothene as general degreaser.	✓		
2.	Have designated areas for use.	✓		
3.	Have designated storage areas for drums.	✓		
4.	Use material outdoors or under proper ventilation.	✓		
5.	Have dip tanks properly constructed & covered when not in use.	✓		
6.	Used chlorothane is properly disposed of.	✓		
7.	Use by non-trained personnel is controlled.	✓		
8.	Properly trains users.	✓		
9.	Prohibits spraying (unless equipment is too large for dipping)	✓		
B.	PERSONNEL REQUIREMENTS			
1.	Have been properly trained	✓		
2.	Wear gloves when using repeatedly	✓		
3.	Wear coverall goggles (or face shield) when splashing is likely.	✓		
4.	Wear respiratory protection when spraying.	NA		

C. COMMENTS: _____