EVENT INVESTIGATION REPORT

AOP-015 Entry at the Intersection of 4th & Buffalo
EIR-2016-021

Event Investigation Team Lead

Date

PER Responsible Manager

Date

PER No. WRPS-PER-2016-0856
Investigation Summary

On May 3, 2016, at approximately 0849 hours, an Industrial Hygiene Technician (IHT) reports odors at the corner of 4th and Buffalo on the west side of the street with a symptom of metallic taste in his mouth. The IHT had a Direct Reading Instrument (DRI) that showed no readings. At 0904 hours, two Health Physics Technicians (HPTs) in support of the same job reported symptoms of headaches, throat and nose irritation, and nausea. Both of the HPTs were immediately taken to HPMC for evaluation, one of these HPTs was sent to Kadlec by ambulance due to high blood pressure and dizziness (at 1600 hours, this HPT was released without restriction). The IHT that first identified the odor continued taking readings in support of the AOP-015 entry. Later that evening, the IHT reported symptoms of chest tightness, headache, and fatigue and reported to Kadlec for evaluation (he was later released and checked back in through HPMC). At 0924 hours two AMEC laborers were taken to HPMC for evaluation. Both workers were on the west side of Buffalo across from A-Farm. The laborers reported the smell as “body odor” and “strong and sharp pungent.” They experienced symptoms of tingling and burning nose, mild headache, and mild sore/burning throat (both AMEC laborers were released without restriction).

Additionally, six laborers located in the electrical/carpenter shops due west of A-farm, as well as three laborers located at MO1142, later reported odors, but no symptoms. Odor descriptions were as follows: chlorine and dog feces.

No Fact Finding Meeting was held in support of this event investigation report.

Weather Information

Wind indication flags in the area were limp. Station 6 shows winds at ~3 mph with maximum wind gusts to 6 mph in varying directions.

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Area Map and Worker Locations

Event Timeline

05/03/2016

0849: IHT reports odors at the corner of 4th and Buffalo on the west side of the street with a symptom of metallic taste in his mouth. He had a DRI and shows no readings. IHT Supervisor will be transporting him to HPMC for evaluation. Industrial Safety, Department of Energy Facility Representative (DOE FR) and EHSQ Deputy Director notified.
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0851: Entering AOP-015 for odors with symptoms on the corner of 4th and Buffalo. Dispatched Central Shift Office (CSO) personnel to place road blocks on 4th and Buffalo and post the area restricted access.

0904: Rad Con Supervisor is taking two WRPS project HPTs, HPT 1 and HPT 2, to HPMC for evaluation. They were with the IHT from 0849 entry and are experiencing headache, throat and nose irritation, and nausea. Industrial Safety, EHSQ Deputy Director, and DOE FR notified.

0915: 242-A Shift Manager (SM) is securing K-2 building ventilation and clearing 242-A court yard as a precaution due to odors in the area.

0922: Retrieval/Construction Safety and Health (R/C S&H) Manager reports wind indication flags in the area are limp and a strong onion/body odor smell that is coming in and out. Station 6 shows winds at 3mph with maximum wind gusts to 5mph. IHT with DRI had a hit of 10ppb Volatile Organic Compounds (VOCs) near the 244AR stack with an action level of 2ppm.

0924: AMEC Safety Rep reports that two AMEC laborers, AMEC Laborer 1 and AMEC Laborer 2, are being taken to HPMC due to the AOP-015 event. They were both on the west side of Buffalo across from A-Farm. AMEC Laborer 2 reported body odor smell with symptoms of a mild headache and mild sore/burning throat. AMEC Laborer 1 reports a sharp pungent odor with symptoms of tingling and burning nose. Industrial Safety notified.

0938: R/C S&H Manager reports a chemical smell coming from A-Farm area and an onion/body odor smell around 242AR with wind indication flags limp.

0945: CSO personnel dispatched to move AOP-015 boundary north of 244AR to a more northern position on Buffalo.

1009: Rad Con Supervisor reports that HPT 1 from 0904 entry is being sent to Kadlec via ambulance from HPMC due to high blood pressure and dizziness. SOEN sent, Industrial Safety, EOC Shift Office, WRPS Chief Operating Officer, EHSQ Deputy Director, and DOE FR notified.

1011: R/C S&H Manager reports odors are also around the 2737E building with no DRI hits. Directed R/C S&H Manager to clear the 2737E building and CSO personnel dispatched to move AOP-015 boundary to the north of 2723E.

1017: IHT Supervisor escorted IHT to HPMC for evaluation. IHT had remained at 4th & Buffalo event scene with R/C S&H Manager monitoring area until additional IHT resources arrived. After evaluation, IHT was released to return to work with no restrictions at 1126 hours.

1040: R/C S&H Manager reports he has deployed and [sic] area RAE by the 244AR Stack.

1105: R/C S&H Manager had IHTs pull a stack sample from 702AZ for investigation of potential AOP-015 odor source and found 28ppm Ammonia. This is well below readings obtained during retrieval operations.
1107: R/C S&H Manager reports that the area RAE placed at the 244AR stack has multiple readings of 0.9 and a high of 1.1ppm VOCs. IHTs are going to perform DRI readings to validate area RAE readings. Production Operations Safety and Health (Prod Ops S&H) Manager and DOE FR notified.

1136: Rad Con Supervisor reports that HPT 2 was returned to work with no restrictions excluding ACES restriction. Rad Con Supervisor is in route to Kadlec for HPT 1. Shift Office Event Notification (SOEN) sent, Industrial Safety, DOE FR, and EHSQ Deputy Director notified.

1141: R/C S&H Manager reports that DRI readings taken to confirm area RAE readings from 1107 hour entry show that the area RAE had drifted and readings were not valid. They are deploying another area RAE. Prod Ops S&H Manager and DOE FR notified.

1215: AMEC Safety Rep reports that AMEC Laborer 1 and AMEC Laborer 2 from 0924 hour entry were released to return to work with no restriction with exception of being deactivated in ACES. SOEN sent, DOE FR, Tank Farm Projects Manager, and Industrial Safety notified.

1229: R/C S&H Manager is coordinating with construction personnel to be escort by IHTs to retrieve personal items and vehicles within the AOP-015 boundary. All readings as of late have been at zero on the DRIs and bag sample results are ~3 hours out. Contacted Prod Ops S&H Manager and he concurs.

1255: 242-A SM with concurrence from Central Shift Manager (CSM) is restoring access to the 242-A court yard to perform environmental preventive maintenance.

1303: 242-A SM reports that the K-2 ventilation system has been restarted.

1307: IHT Supervisor reports the IHT from the 0849 hour entry was released to return to work with exception of being deactivated in ACES. SOEN sent, DOE FR, Industrial Safety, and EHSQ Deputy Director notified.


1730: Notified Shift Operations Manager

1736: Left voicemail for DOE FR.

2120: R/C S&H Manager reported that IHT (from 0849) reported worsening symptoms potentially related to the AOP-015 event at 4th and Buffalo this morning. He has congestion and trouble breathing. His supervisor told him to report to Kadlec and he will meet him there.

2130: Notified DOE FR
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2132: Notified Emergency Operations Center (EOC) shift office

2137: Notified Industrial Safety

2146: Notified EHSQ Deputy Director

2340: IHT Supervisor reported that he is leaving Kadlec and IHT will remain there. He will update the CSO with any new information.

05/04/2016

0100: IHT Supervisor reported that IHT was released from Kadlec and he will check back in through HPMC.

0104: Notified DOE FR

Compensatory Measures

No compensatory measures were identified.

Preliminary Extent of Condition Review

The AOP-015 entry was specific to the parking lot area west of Buffalo between 204AR and 244AR. With no fugitive emission sources detectible and the potential cause being unknown, the preliminary extent of conditions is bound to the parking lot area. On February 25, 2016, an AOP-015 was entered for this same general location. During this prior event, there were no direct readings from the multiRAE Pro above 50ppb and all bag samples came back at or below background levels.

Discussion of Potential Causes

Based on a review of the initial information, the source of the odors encountered was not able to be definitively determined.

1. Review of information and investigative IH monitoring and sampling of the area. All samples came back at or below background.
2. DRI had a hit of 10ppb VOCs near the 244AR Stack with and action level of 2ppm
3. A stack sample from 702AZ for investigation of potential AOP-015 odor source and found 28ppm Ammonia. This is well below readings obtained during retrieval operations.
4. RAE placed at the 244AR stack has multiple readings of 0.9 and a high of 1.1ppm VOC’s
5. Workers interviewed believe the “chlorine-like” smell was coming from A-Farm and are potentially the result of tank waste vapors.
6. Herbicide spraying was taking place on 9th street directly north of MO1142 from 0830 to 1100 hours.

Conditions Adverse to Quality
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1. During the AOP-015 response to restrict access to the affected area, a WRPS employee was given conflicting information from two separate individuals as to where he should wait while readings were being taken by IH. The WRPS employee felt the command and control of the scene was less than adequate. See PER WRPS-PER-2016-1050.

Discussion of Barriers That Could Have Impacted the Cause

Impacting barriers are an unknown. The cause of the odors was not able to be definitively determined.

Recommendations/Proposed Corrective Actions

There are no proposed corrective actions as the cause of the odors was not able to be definitively determined.

Attachments (as they apply):

1. Aerial Map & Worker Locations
2. Odor Response Cards
3. Personal Statements
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Attachment 1: Aerial Map & Worker Locations
Attachment 2: Odor Response Cards

ODOR RESPONSE CARD - 241-A FARM

1. Contact CSM, Complete below bulleted information and map.
   - Date and time odor was noticed: 5/3/2016, 8:30 am - 8:40 am
   - Your name and the work you were performing: Walking
   - Location of odors (mark area on map and wind direction)
   - Name(s) of others in or near the affected area
   - Was an HHT present? No
   - Describe the odor: [ ] Sweet [ ] Sour [ ] Musty [ ] Earthy [ ] Metallic [ ] Smoky [ ] Rotten [X] Onion
     [ ] Cleaning Solution [ ] Ammonia [ ] Other: Body Odor
   - Possible Source: Unknown
   - Your symptoms (if any): [X] Headache [ ] Dizziness/Light-Headed [ ] Nausea [ ] Cough
     [ ] Fatigue/Drowsiness/Weakness [ ] Sore/Burning Throat [ ] Difficulty Breathing
     [ ] Watery/Irritated Eyes/Trouble with Vision [ ] Tingling/Numbness/Paralysis [ ] Rash/Itching
     [ ] Other:

2. Send this card to the Central Shift Office.

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ODOR RESPONSE CARD - 241-A FARM

1. Contact CSM, Complete below bulleted information and map.
   - Date and time odor was noticed: 5/3/2016, 8:30 am - 8:40 am
   - Your name and the work you were performing
   - Location of odors (mark area on map and wind direction)
   - Name(s) of others in or near the affected area
   - Was an HHT present? No
   - Describe the odor: [ ] Sweet [ ] Sour [ ] Musty [ ] Earthy [ ] Metallic [ ] Smoky [ ] Rotten [X] Onion
     [ ] Cleaning Solution [ ] Ammonia [ ] Other: Sharp odor, pu$$.
   - Possible Source: Unknown
   - Your symptoms (if any): [X] Headache [ ] Dizziness/Light-Headed [ ] Nausea [ ] Cough
     [ ] Fatigue/Drowsiness/Weakness [ ] Sore/Burning Throat [ ] Difficulty Breathing
     [ ] Watery/Irritated Eyes/Trouble with Vision [ ] Tingling/Numbness/Paralysis [ ] Rash/Itching
     [X] Other: burning nose

2. Send this card to the Central Shift Office.
1. Contact CSM. Complete below bulleted information and map.
   - Date and time odor was noticed: 5-3-16 07:05
   - Your name and the work you were performing: [Redacted]
   - Location of odors (mark area on map and wind direction): [Redacted]
   - Name(s) of others in or near the affected area: [Redacted]
   - Was an IHT present? [Redacted]
   - Describe the odor: [Redacted]
     - Cleaning Solution [x] Ammonia [x] Other: [Redacted]
   - Possible Source: [Redacted]
     - Fatigue/Drowsiness/Weakness [x] Sore/Burning Throat [x] Difficulty Breathing [x]
     - Watery/Irritated Eyes/Trouble with Vision [x] Tingling/Numbness/Paralysis [x] Rash/Irritation [x]
     - Other: [Redacted]

2. Send this card to the Central Shift Office.
1. Contact CSM, Complete below bulleted information and map.
- Date and time odor was noticed: 5-3-16 7:00 AM
- Your name and the work you were performing: L.A.
- Location of odors (mark area on map and wind direction): ENE 114.2
- Name(s) of others in or near the affected area
- Was an IHT present?
- Describe the odor: Clean, Sweet
- Possible Source:  
- Your symptoms (if any): Headache, Dizziness/Light-Headed, Nausea, Cough
  - Fatigue/Drowsiness/Weakness, Sore/Burning Throat, Difficulty Breathing
  - Watery/Runny Eyes/Trouble with Vision, Tingling/Numbness/Paralysis, Rash/Itching
  - Other: 

2. Send this card to the Central Shift Office.
ODOR RESPONSE CARD - 241-A FARM

1. Contact CSM, Complete below bulleted information and map.
   • Date and time odor was noticed
   • Your name and the work you were performing
   • Location of odors (mark area on map and wind direction)
   • Name(s) of others in or near the affected area
   • Was an IIIT present?

   [Marked: No]

   • Describe the odor: Sweet □ Sour □ Musty □ Earthy □ Metallic □ Smoky □ Rotten □ Onion
     □ Cleaning Solution □ Ammonia □ Other: Chalky

   • Possible Source

   • Your symptoms (if any): Headache □ Dizziness/Light-Headed □ Nausea □ Cough
     □ Fatigue/Drowsiness/Weakness □ Sore/Inflamed Throat □ Difficulty Breathing
     □ Watery/Irritated Eyes/Trouble with Vision □ Tingling/Numbness/Paralysis □ Rash/Itching
     □ Other: No Symptoms

2. Send this card to the Central Shift Office.
ODOR RESPONSE CARD - 241-A FARM

1. Contact CSM, Complete below bulleted information and map.
   - Date and time odor was noticed: Last several weeks
   - Your name and the work you were performing: Painter
   - Location of odors (mark area on map and wind direction): Beside A20 shop and cage shop
   - Name(s) of others in or near the affected area: I work by myself
   - Was an IHT present?: No
   - Describe the odor: Cleaning Solution, Ammonia
   - Possible Source: Chlorine
   - Your symptoms (if any): Headache, Dizziness/Light-Headed, Nausea, Cough
     - Fatigue/Drowsiness/Weakness, Sore/Burning Throat, Difficulty Breathing
     - Watery/Irritated Eyes/Trouble with Vision, Tingling/Numbness/Paralysis, Rash/Itching
     - Other:

2. Send this card to the Central Shift Office.
1. **Contact CSM, Complete below bulleted information and map.**
   - Date and time odor was noticed: **2/6/2016 at 5:06 AM**
   - Your name and the work you were performing: **Electrical Shop**
   - Location of odor (mark area on map and wind direction): **Electrical Shop**
   - Name(s) of others in or near the affected area: 
   - Was an IHT present? **No**
   - Describe the odor: **Sweet**
   - Possible Source: 

2. **Send this card to the Central Shift Office.**
ODOR RESPONSE CARD - 241-A FARM

1. Contact CSM. Complete below bulleted information and map.

- Date and time odor was noticed: 5-3-16 / 9:15 AM
- Your name and the work you were performing: **ELECTRICAL**
- Location of odor (mark area on map and wind direction): **ELECTRICAL Shop**
- Was an IHT present?: No
- Name(s) of others in or near the affected area:
- Other: **CADARINE**
- Possible Source:

- Your symptoms (if any): Headache □ Dizziness/Light-Headed □ Nausea □ Cough
- Fatigue/Drowsiness/Weakness □ Sore/Burning Throat □ Difficulty Breathing
- Watery/Irritated Eyes/Trouble with Vision □ Tingling/Numbness/Paralysis □ Rash/Itching
- Other: ____________________________

2. Send this card immediately to the Central Shift Office.
ODOR RESPONSE CARD - 241-A FARM

1. Contact CSM, Complete below bulleted information and map.
   - Date and time odor was noticed: [ ]
   - Your name and the work you were performing: [ ]
   - Location of odor(s) (mark area on map and wind direction): [ ]
   - Name(s) of others in or near the affected area: [ ]
   - Was an IHT present?: [ ]
   - Describe the odor: [ ] Sweet [ ] Sour [ ] Musty [ ] Earthy [ ] Metallic [ ] Smoky [ ] Rotten [ ] Onion [ ] Cleaning Solution [ ] Ammonia [ ] Other: [ ]
   - Possible Sources: [ ]

2. Send this card to the Central Shift Office.
1. Contact CSM, Complete below bulleted information and map.
   - Date and time odor was noticed: 5/31/2016 9:10 AM
   - Your name and the work you were performing: Installing light fixtures
   - Location of odors (mark area on map and wind direction):
     - Name(s) of others in or near the affected area:
     - Was an IHT present? NO
     - Describe the odor: Sweet, Sour, Musty, Earthy, Metallic, Smoky, Rotten, Onion
       - Cleaning Solution, Ammonia, Other: Dog poop
     - Possible Source
       - Your symptoms (if any): Headache, Dizziness/Light-Headed, Nausea, Cough
         - Fatigue/Drowsiness/Weakness, Sore/Burning Throat, Difficulty Breathing
         - Watery/Irritated Eyes/Trouble with Vision, Tingling/Numbness/Paralysis, Rash/Vesicles
         - Other:

2. Send this card to the Central Shift Office.
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**ODOR RESPONSE CARD - 241-A FARM**

1. Notify Immediate Supervisor.
2. Contact Central Shift Manager. Provide the bulleted information below.
3. Complete map, return to Central Shift Office as soon as practicable.

**Odors Detected with NO Immediate Symptoms**

4. Notify Immediate Supervisor.
5. Contact CSM, complete below bulleted information and map:
   - Your name and the work you were performing
   - Your symptoms (if any)
   - Date and time odor was noticed
   - Location of odor (mark area on map and the wind direction)
   - Describe the odor
   - Name of other in or near the affected area
   - Was an ICT present?
   - Possible source

6. Provide information on the back of card.
7. Send this card immediately to the Central Shift Office.

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**ODOR RESPONSE CARD - 241-C FARM**

1. **Date and time odor was noticed:** S 3.16
2. **Your name and the work you were performing:** Existing Pig Job
3. **Location of odors (mark area on map and wind direction):** 2nd Floor
4. **Name(s) of others in or near the affected area:**
5. **Was an ICT present?** No
6. **Describe the odor:** Sweet, Sour, Musty, Earthy, Metallic, Smoky, Rotten, Onion
   - Cleaning Solution, Ammonia, Other: Odinous
7. **Possible Source:**
8. **Your symptoms (if any):** Headache, Dizziness/Light-Headed, Nausea, Cough
   - Fatigue/Drowsiness/Weakness, Sore/Burning Throat, Difficulty Breathing
   - Watery/Redness/Eyes/Trouble with Vision, Tingling/Numbness/Paralysis, Rash/Itching
   - Other:

2. Send this card to the Central Shift Office.
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1. Contact CSM, Complete below bulleted information and map.
   - Date and time odor was noticed: 1/20, am
   - Your name and the work you were performing: Gathering Material at Electrical Shop
   - Location of odors (mark area on map and wind direction): Electrical Shop
   - Name(s) of others in or near the affected area
   - Was an IHT present?: No
   - Describe the odor: □ Sweet □ Sour □ Musty □ Earthy □ Metallic □ Smoky □ Rotten □ Onion
     □ Cleaning Solution □ Ammonia □ Other: Chlorine
   - Possible Source: P
   - Your symptoms (if any): □ Headache □ Dizziness/Light-Headed □ Nausea □ Cough
     □ Fatigue/Drowsiness/Weakness □ Sore/Burning Throat □ Difficulty Breathing
     □ Watery/ItchIES Eyes/Trouble with Vision □ Tingling/Numbness/Paralysis □ Rash/itching
     □ Other: No symptoms

2. Send this card to the Central Shift Office.
EIR-2016-021: AOP-015 Entry at the Intersection of 4th & Buffalo

Odors Detected with NO Immediate Symptoms
1. Notify Immediate Supervisor.
2. Contact Central Shift Manager.
   Provide the bulleted information below.
3. Complete map, return to Central Shift Office as soon as practicable.
   Odors Detected WITH Symptoms
4. Notify Immediate Supervisor.
5. Contact CSM.
   Complete below bulleted information and map.
   - Your name and the work you were performing
   - Your symptoms (if any)
   - Date and time odor was noticed
   - Location of odor (mark area on map and the wind direction)
   - Describe the odor
   - Name of other n or near the affected area
   - Was an IHT present?
   - Possible source

6. Provide information on the back of card.
7. Send this card immediately to the Central Shift Office.
INITIAL EVENT INVESTIGATION PERSONAL STATEMENT

Event/Subject: AOP-015 Event at 4th and Buffalo Ave
PER Number (if known): Date of Event: 05/03/06

INSTRUCTIONS:
To be used for obtaining personal statements or interviews in support of investigation and analysis of abnormal events and issues. Personal statements and results of interviews will not be issued with the Investigation Report/PER.

- In your own words, write down the facts as you understand them about what happened during the issue/event/condition being evaluated.
  See attached

- Facility/Work Area conditions as you knew them prior to, during, and after the event/condition (e.g., weather, equipment malfunctions, alarms, other on-going work in the vicinity).
  Prior to and during the event the facility and work area was unchanged from the location I was near 244AR. Personnel passed on foot and in vehicles during my time on location.

- What were you doing immediately prior to, during, and after the event/condition? Including your Action(s) in response.
  Prior to the event I was located at NO-149, during the event I was located at 244AR and Buffalo Ave. Prior to the event ending I made my way back to NO-149.

- List any known concerns with procedures, practices, or training.
  There was no command and control structure on scene. The direction of AOP-015 was not followed.

- Names of others who may have additional information.

- Additional facts you wish to provide.

Note: if additional sheets are used, sign, date, and record time on each page.

[Signature]

Date & Time of Statement/Interview: 05/10/06 11:28

Name: [print/sig]

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On 05/03/16 I was travelling in a vehicle from 4th street onto Buffalo en-route to the 244AR building parking area. I was a passenger in the vehicle and as we approached the 244AR building I noticed two individuals standing on the side of the road. The driver in my vehicle waved to the individual on the roadside and he waved back. It later turned out the individual was an IHT. After we parked and started our walk-down (approximately 6-8 minutes) we stepped from the buffalo street side of 244AR and waved us up to his general area. At this point he notified us there was an AOP-015 event in progress and the main area of concern was in the general area that we had parked our vehicle. At this point the access to the area was still not controlled as vehicles passed and employees continued to walk through the affected areas. It was during this time that we asked the IHT on scene what readings if any had been noted. His response was that he had yet to find anything but continued to survey the area. During this time continued to talk on the radio and cell phone but offered little information on what we should do or where we should go. The assumption by me at this point was that the on scene commander and we should take direction from him. After another 10 minutes passed we finally asked or permission to leave. He said it would be fine so we walked back to our vehicle still parked at 244AR parking area. As we left and headed up Buffalo Ave toward 4th we were stopped by operations personnel telling us the road was blocked ahead and to hold tight until further information was available. So here we are stuck in the middle of the event and cannot go one way or the other do in part to being told conflicting information. After what seemed like forever (maybe another 10 minutes) we were allowed to turn around and exit the area heading away from 4th Ave.

05/04/16
11:32