

**Hanford Tank Waste Operations & Closure
EVENT SUMMARY**

NOTE: This form provides timely notification to management and documents preliminary information of an event that may require a more formal investigation. Details may change upon further examination and analysis. The following is a current status of available information:

1. Project: Project/Retrieval Maintenance **2. Report Date:** 07/23/2025
3. Investigation Title: C-67 Response at 277-A
4. Investigation Report Number: EIR-2025-058
5. Responsible Manager: [REDACTED]
6. Event Investigator: [REDACTED]
7. Area / Building / Location: 200 East/ South of Building 277A (ATCO Shop)
8. Date and Approximate Time of Event: **Date:** 07/11/2025 **Time (military):** 0820 hours
9. Associated Action Request (AR) Number: ITDC-AR-2025-2423
10. Associated Occurrence Report Number (if applicable): N/A
11. Event Investigation Meeting Held: Yes [] or No [X] **Date:** N/A **Time (military):** N/A

12. Activity in Progress: *(What activity was under way, include procedures and work order numbers, as applicable)*

At the time of the event, four (4) H2C Electricians were performing a Lockout Tagout (LO/TO) isolation boundary walkdown near Building 277A under Work Order #1135247, "277A Outdoor Clean and Inspect."

13. Personnel Involved: *(Job positions, number of personnel, identify any support organizations or subcontractors)*

4 H2C Electricians
1 Field Work Supervisor (FWS)

14. What Happened: *(Provide a short discussion of what happened)*

At approximately 0820 hours on 07/11/2025 four H2C electricians encountered a stronger than normal odor described as "septic/sewer, musty, rotten, smoky, and earth" while performing a LO/TO isolation boundary walkdown near Building 277A on the west side of Buffalo Avenue. The workers encountered odors on the north side of Building 277A and near an electrical transformer southeast of Building 277A.

At 0838 hours the FWS notified the Central Shift Manager (CSM) that the four electricians were encountering "strong sewage type odors"

At 0845 hours, the CSM initiated response per TF-OPS-OPER-C-67, "Response to Stronger than Normal Odors", directed the four electricians to place work in a safe configuration and exit the area. Access was restricted around Building 277A. The CSM sent Shift Office Event Notification (SOEN), "Entered C-67 Odor Response at 277-A for reports of stronger than normal odors. Access to the area around 277-A is restricted", completed a radio announcement and notified the on-call DOE Facility Representative.

At 0859 hours, the CSM directed the Operations Engineer (OE) to work with Nuclear Chemical Operators (NCO) on setting access restriction boundary north and south of Building 277A.

At 0900 hours, the CSM received the odor response cards from the four affected electricians. The electricians did not report any symptoms and were offered yet declined

Hanford Tank Waste Operations & Closure EVENT SUMMARY

medical evaluation at the on-site medical provider. The electricians did not observe any obvious odor sources.

At 0918 hours, the two responding Industrial Hygiene Technicians (IHTs) conducted TFC-OPS-OPER-C-67 response actions and performed direct reading instrument (DRI) monitoring at the affected areas per Industrial Hygiene Sample Plan (IHSP) POE-MULTI-TFCOPSOPER67.

At 0953 hours, the CSM initiated Event Investigation Report EIR-2025-058, "C-67 Response at 277-A." A SOEN was sent, and the on-call DOE Facility Representative was notified.

At 1012 hours, IHT DRI monitoring results were reported at or below background levels. The CSM directed NCOs to restore normal access to Building 277A and surrounding areas.

At 1110 hours, response actions for IHSP-POE-MULTI-TFCOPSOPERC67 and TFC-OPSOPER-C-67 were completed. Access was restored to the Building 277A.

15. Where Did It Happen: *(Description of work area and working conditions. Include information on weather conditions, PPE, Postings, etc.)*

The odor event occurred in the 200 East Area of the Hanford Site south of Building 277A (ATCO Shop).

The electricians performing the LO/TO isolation boundary walkdown were wearing street clothes and were in a work location that is not posted as a radiological controlled area. Electricians were not in an area requiring the use of respiratory protection or a personal ammonia monitor (e.g., VentisPro).

The Hanford Site Meteorological Station #32 in the 200 East area was utilized for outdoor weather details at the time odors were reported. The Hanford Site Meteorological Station #32 indicated the following weather conditions at 0815 hours on 07/11/2025:

- Temperature: 77°F
- Relative Humidity: 27%
- Wind Speed: 8 mph
- Wind Direction: Northwest
- Barometric Pressure: 29.42 inches Hg

16. Impact to Facility: *(Caused by the event or a description of known consequences)*

No impacts to facility safety status, operational capabilities, or facility reliability occurred.

The four Electricians were instructed to leave the area and access to the area around Building 277A was restricted until TF-OPS-OPER-C-67 response actions was completed.

17. Immediate Actions Taken: *(List immediate actions taken to stabilize the scene or respond to the event)*

- The CSM initiated TFC-OPS-OPER-C-67, Response to Stronger than Normal Odors, response actions.
- The CSM directed the four electricians to leave the area and restricted access to the area around Building 277A.
- The four electricians were offered medical evaluation at on-site medical provider but declined evaluation.
- IHTs performed direct reading instrument (DRI) monitoring at the affected areas per Industrial Hygiene Sample Plan (IHSP) POE-MULTI-TFCOPSOPER67.
- DOE Facility Representative was notified of the event.
- CSM made required TFC-OPS-OPER-C-67 notifications.
- Event Investigation EIR-2025-058, C-67 Response at 277-A, was initiated.

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18. Compensatory Actions Taken:

None.

19. Remedial Actions Taken:

None.

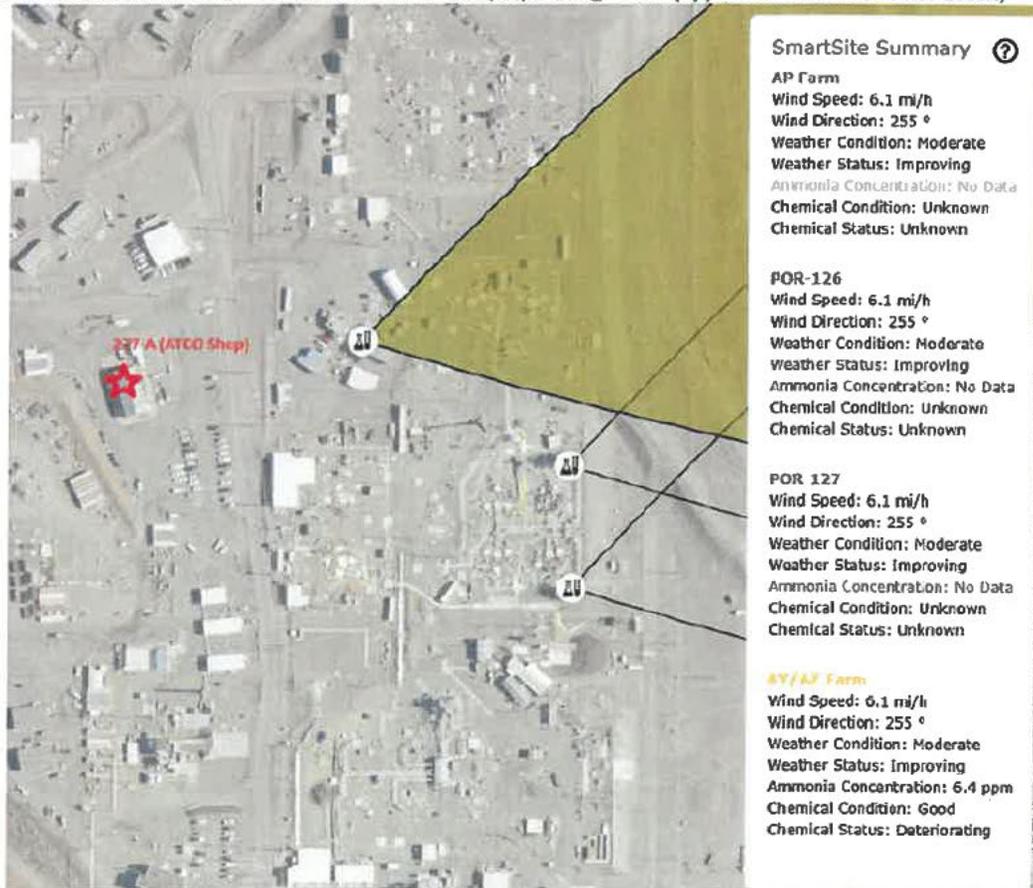
20. Key Elements of the Investigation: (Key investigation points)

Per TFC-PLN-120, Industrial Hygiene Investigative Response Plan, Industrial Hygiene (IH) documented the event investigation within Industrial Hygiene Event Investigation Report (IHIR) number IHIR-00120, TFC-OPS-OPER-C-67 Response to Stronger than Normal Odors South of 277-A (ATCO).

IHTs performed DRI monitoring around Building 277A and an electrical box further south near MO-131 per IHSP-POE-MULTI-TFCOPSOPERC67. IHTs used a DRI to monitor for Sulfur Dioxide, Ammonia, Hydrogen Sulfide, and Volatile Organic Compounds (VOC). All readings were less than detectable.

The results of DRI Monitoring along with the prevailing wind direction indicate that the reported odors are unlikely to be produced by Tank Chemical Vapors. Below is the DFAS SmartSite Summary and Exhauster Plume Model and the Exhauster readings for the area at the approximate time workers reported stronger than normal odors.

DFAS Multi-Farm View Exhauster Plume Model: 07/11/2025 @ 08:20 (approximate time of Odor Event)



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Vapor Monitoring Detection System (VMDS) Exhauster Ammonia Readings on 07/11/2025 @ 0824 hours:

- POR518 (A Farm): 18.932 ppm
- POR519 (A Farm): 9.607 ppm
- AN-Farm Stack: 28.086 ppm
- AW Farm Stack: 0 ppm
- POR-126 (AX Farm): (Unit Down)
- POR-127 (AX Farm): (Unit Down)
- 702-AZ Stack: 5.474 ppm
- AP Farm Stack: (Scan Off)

IHIR-00120 Conclusion:

Direct Reading Instrumentation monitoring performed during response actions did not indicate further action was necessary to protect worker safety and health. As a result, the area was released from restricted access and work was allowed to continue. Odor descriptors provided by affected workers are consistent with potential sewage sources in the area. IH concluded odors were not indicative of Tank Vapor sources in the nearby area. Monitoring performed to support response actions did not readily identify a source, as readings indicated that further response action was not necessary.

All four (4) affected workers filled out odor response cards and did not report any symptoms. All affected workers were offered and declined medical evaluations. No odor sources were identified.

21. Positive Aspects Identified:

Personnel responded promptly to the event, implementing the applicable TFC-OPSOPER-C-67 procedure and response actions.

22. Key Take Aways / Learning Opportunities:

None.

23. Event Investigation:

- An Event Investigation will be completed per [TFC-OPS-OPER-C-14](#).
- This event will be managed by another process, i.e., Operability Evaluation, Engineering Technical Evaluation, etc.
- This event does not require continuation of the Event Investigation process.

Responsible Manager Approval:

[Redacted]

Name (First, Middle Initial, Last)

[Redacted]

Signature / Date

CAS Manager Approval:

[Redacted]

Name (First, Middle Initial, Last)

[Redacted]

INDUSTRIAL HYGIENE EVENT INVESTIGATION REPORT (IHIR)

Event Title: TFC-OPS-OPER-C-67 Response to Stronger than Normal Odors South of 277-A (ATCO)		IHIR Number: IHIR-00120
		IHEI Number: N/A

Date: 07/11/2025	Time: 08:20	Location: 200E, South of 277A ATCO Shop
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Event Summary and Timeline:

Event Summary:

On Friday 07/11/2025 at approximately 08:20 four (4) Electricians reported encountering stronger than normal odors while performing a LOTO Boundary walkdown near 277-A ATCO Shop. At 08:38, the Field Work Supervisor notified the CSM that workers were encountering "strong sewage type odors" and the CSM directed personnel to place work in a safe configuration and exit the area. At 08:45 CSM entered "C-67 Response to Stronger than Normal Odors". Affected workers did not report any symptoms and declined medical evaluations. No odor sources were identified.

Field Response Timeline:

0820 - Electrician Field Work Supervisor (FWS) Dan Chestnut calls Central Shift Manager (CSM) to report that electricians performing clean and inspects near 277-A on the west side of Buffalo Ave. encountered stronger than normal odors. Reported odors include septic/sewer, musty, rotten, smoky, and earthy. Work performed was LOTO walkdown around 277-A with odors on the north side of 277-A and near an electrical transformer southeast of 277-A. The workers did not observe any obvious odor sources.

0845 - CSM enters C-67 Odor Response at 277-A and directs personnel to exit the area. Access restricted to the area around 277A. Winds are west to east at approximately 8 mph. SOEN sent. Radio announcement complete. Notified DOE FR Jim Paul.

0859 - CSM directs OE to work with NCOs on setting access restriction boundary north and south of 277-A.

0900 - CSM receives odor response cards from affected employees (4 electricians). Employees did not report any symptoms and all declined medical evaluation. The workers did not observe any obvious odor sources.

0918 - CSM contacts Retrieval West Operations (RWO) Industrial Hygienist (IH) for direction on response actions. RWO IH recommends Industrial Hygiene Technicians (IHTs) perform monitoring via Direct Reading Instrumentation (DRI) per IHSP-POE-MULTI-TFCOPSOPERC67:

- Ammonia (NH₃) – Action Limit: 12 ppm
- Hydrogen Sulfide (H₂S) – Action Limit: 0.5 ppm
- Sulfur Dioxide (SO₂) – Action Limit: 0.1 ppm
- Volatile Organic Compounds (VOCs), 10.6 eV PID – Action Limit: 2 ppm

0944 - Per DFAS SmartSite, the mixing height is > 100 ft (reported as 700 feet). SST Retrieval is performing water additions to A-101.

0953 – CSM initiates Event Investigation EIR-2025-058, "C-67 Response at 277-A". POC: ██████████ SOEN sent. Notified DOE FR ██████████

1012 - IHT monitoring results are at or below background levels and post-function tests are complete. CSM directs NCOs to restore normal access to 277-A and surrounding areas.

Washington River Protection Solutions
INDUSTRIAL HYGIENE EVENT INVESTIGATION REPORT (IHIR) (Continued)

Event Summary and Timeline:

1110 – CSM completes C-67 Odor Response at 277-A. Response actions for C-67 odor event are complete. Normal access to 277-A is restored. SOEN sent. Radio announcement complete. Notified DOE [REDACTED]

Sampling/Monitoring Results:

SWIHD Survey: 25-05069 C-67 Odor Response (277-A)

Sample Plan: IHSP-POE-MULTI-TFCOPSOPER – Industrial Hygiene Odor Evaluation OPER-C-67

IHT Comments:

2 IHTs responded to a C-67 that was called around 277-A (ATCO Shop). It was reported that there was a smell of sewer/septic around the 277-A and an electrical box further south near MO-131. When the IHTs got there the odor had dissipated. The IHTs did a sweep around the 277-A building then went to the electrical box. The wind was blowing from the northeast to the southwest. All the readings were less than zero.

DRI Results:

Area: Northeast Corner near 277A (ATCO Shop)

Date/Time: 07/11/2025 09:56

<i>Agent</i>	<i>Result</i>	<i>Action Limit</i>
<i>Sulfur Dioxide</i>	0.000 ppm	0.1 ppm
<i>Ammonia</i>	0.000 ppm	12 ppm
<i>Hydrogen Sulfide</i>	0.000 ppm	0.5 ppm
<i>Volatile Organic Compound</i>	0.000 ppb	2 ppm

Area: Southeast Corner near 277A (ATCO Shop)

Date/Time: 07/11/2025 09:59

<i>Agent</i>	<i>Result</i>	<i>Action Limit</i>
<i>Sulfur Dioxide</i>	0.000 ppm	0.1 ppm
<i>Ammonia</i>	0.000 ppm	12 ppm
<i>Hydrogen Sulfide</i>	0.000 ppm	0.5 ppm
<i>Volatile Organic Compound</i>	0.000 ppb	2 ppm

Area: Electrical Box North of MO131

Date/Time: 07/11/2025 10:02

<i>Agent</i>	<i>Result</i>	<i>Action Limit</i>
<i>Sulfur Dioxide</i>	0.000 ppm	0.1 ppm
<i>Ammonia</i>	0.000 ppm	12 ppm
<i>Hydrogen Sulfide</i>	0.000 ppm	0.5 ppm
<i>Volatile Organic Compound</i>	0.000 ppb	2 ppm

SWIHD References:

SWIHD Survey: 25-05069 C-67 Odor Response (277-A)

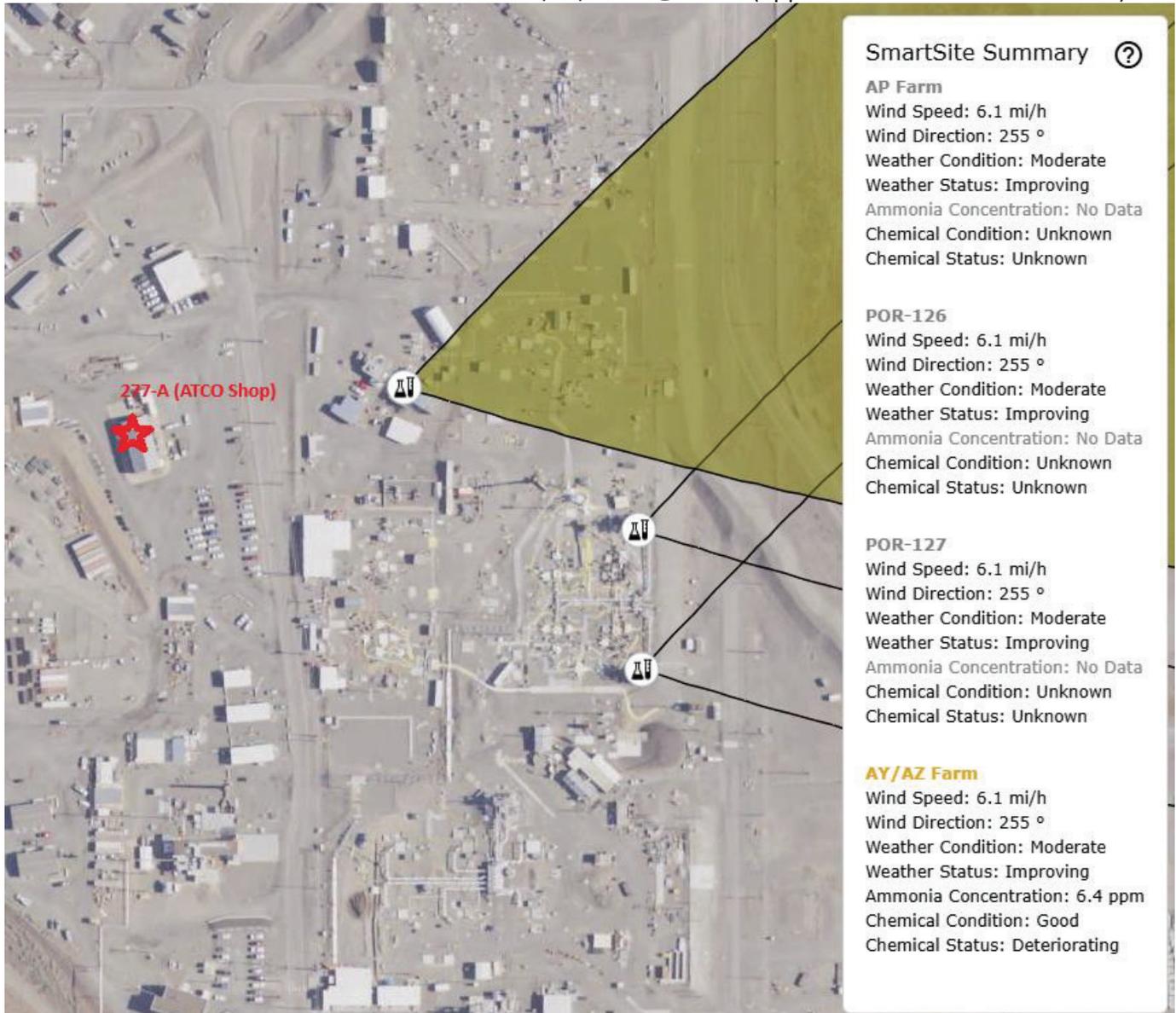
(See Above Section for Direct Reading Instrumentation, DRI, monitoring results)

Washington River Protection Solutions
INDUSTRIAL HYGIENE EVENT INVESTIGATION REPORT (IHIR) (Continued)

Additional Information:

The results of DRI Monitoring along with the prevailing wind direction indicate that the reported odors are unlikely to be produced by Tank Chemical Vapors. Below is the DFAS SmartSite Summary and Exhauster Plume Model and the Exhauster readings for the area at the approximate time workers reported stronger than normal odors.

DFAS Multi-Farm View Exhauster Plume Model: 07/11/2025 @ 08:20 (approximate time of Odor Event)

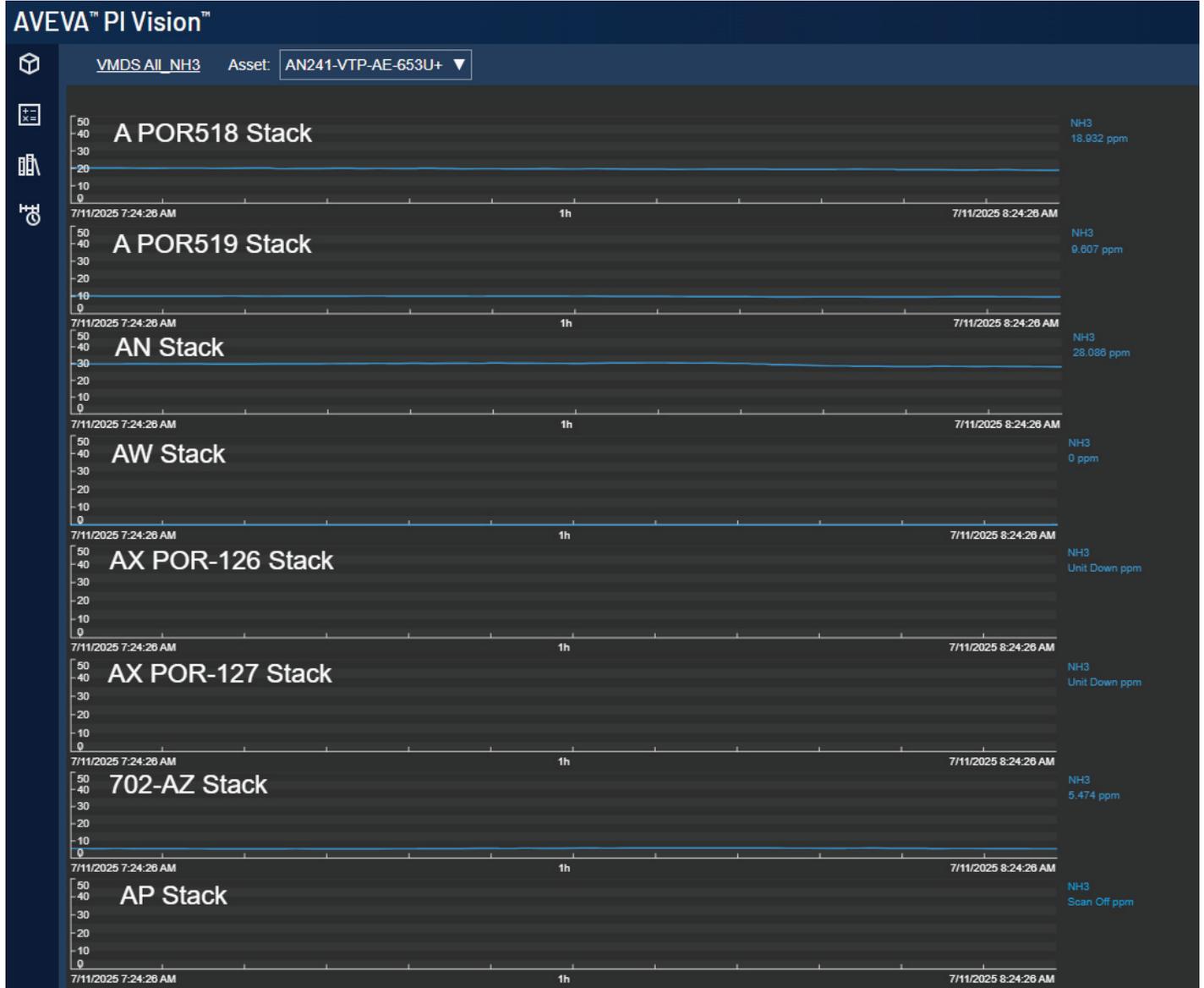


Vapor Monitoring Detection System (VMDS) Exhauster Ammonia Readings on 07/11/2025 @ 0824:

- POR518 (A Farm): 18.932 ppm
- POR519 (A Farm): 9.607 ppm
- AN-Farm Stack: 28.086 ppm
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- POR-126 (AX Farm): (Unit Down)
- POR-127 (AX Farm): (Unit Down)
- 702-AZ Stack: 5.474 ppm
- AP Farm Stack: (Scan Off)

Washington River Protection Solutions
INDUSTRIAL HYGIENE EVENT INVESTIGATION REPORT (IHIR) (Continued)

AVEVA PI Vision VMDS Ammonia Concentrations for 07/11/2025 @07:24- 08:24



Recommendations/Conclusions:

Recommendations:

No Recommendations at this time.

Conclusions:

Direct Reading Instrumentation monitoring performed during response actions did not indicate further action was necessary to protect worker safety and health. As a result, the area was released from restricted access and work was allowed to continue. Odor descriptors provided by affected workers are consistent with potential sewage sources in the area. IH concluded odors were not indicative of Tank Vapor sources in the nearby area. Monitoring performed to support response actions did not readily identify a source, as readings indicated that further response action was not necessary.

Washington River Protection Solutions
INDUSTRIAL HYGIENE EVENT INVESTIGATION REPORT (IHIR) (Continued)

Recommendations/Conclusions:

Others:

All four (4) affected workers filled out odor response cards and did not report any symptoms. All affected workers were offered and declined medical evaluations. No odor sources were identified.

Associated Documents:

iCAS Number: N/A

EIR Number: EIR-2025-058

Industrial Hygienist:

Print First and Last Name

Signature / Date

Industrial Hygiene Level 3 Manager

Print First and Last Name

Signature / Date

Industrial Hygiene Level 2 Manager:

Print First and Last Name

Signature / Date

ODOR/VAPOR RESPONSE CARD

1. Complete below information and map (Page 1).

- Date and time of event: 7-11-25 8:20am
- Check Applicable:
 Odor Ammonia Alarm (6 ppm) Ammonia Alarm (12 ppm) Alarm (other - describe): _____
- Your name and the work you were performing:
[REDACTED] clean and inspect on 277A
- Other Work Underway? Describe:
lotto and walk down
- Location of event (mark area on map and wind direction):
North and South of 277A
- Name(s) of others in or near the affected area:
[REDACTED]
- Was Industrial Hygiene present, who?
No
- Describe the odor:

<input type="checkbox"/> Sweet	<input type="checkbox"/> Sour	<input checked="" type="checkbox"/> Smoky	<input checked="" type="checkbox"/> Septic/Sewer	<input checked="" type="checkbox"/> Musty	<input checked="" type="checkbox"/> Rotten
<input type="checkbox"/> Metallic	<input type="checkbox"/> Onion	<input checked="" type="checkbox"/> Earthy	<input type="checkbox"/> Ammonia	<input type="checkbox"/> Citrus	<input type="checkbox"/> Solvent
<input type="checkbox"/> Other (describe): _____					
- Is source known/likely? Describe:

- Your symptoms? None

<input type="checkbox"/> Headache	<input type="checkbox"/> Dizziness	<input type="checkbox"/> Nausea	<input type="checkbox"/> Cough	<input type="checkbox"/> Fatigue
<input type="checkbox"/> Weakness	<input type="checkbox"/> Sore Throat	<input type="checkbox"/> Difficulty Breathing	<input type="checkbox"/> Eye Irritation	<input type="checkbox"/> Rash
<input type="checkbox"/> Itch	<input type="checkbox"/> Tingling	<input type="checkbox"/> Numbness	<input type="checkbox"/> Taste	
<input type="checkbox"/> Other (describe): _____				

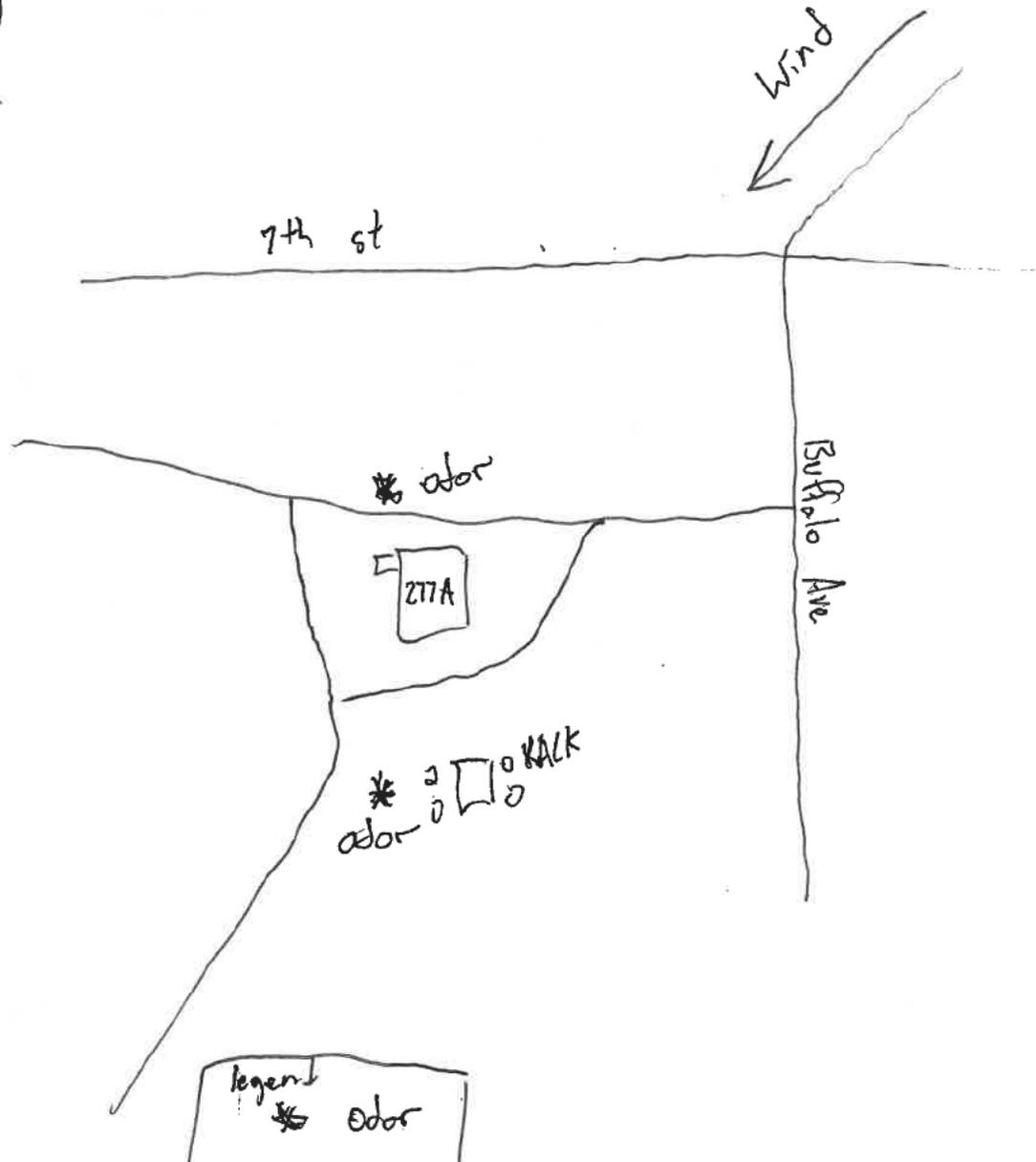
2. Provide this completed card (Page 1 & 2) to Supervisor, Industrial Hygiene, your Union Safety Representative or the CSM.
If received by Supervisor/IH/U-SR, Supervisor/IH/U-SR will ensure card is provided to the CSM.

ODOR/VAPOR RESPONSE CARD

Instructions:

1. Notify Immediate Supervisor.
2. Contact Central Shift Manager (CSM), at (509) 373-2689.
3. Complete both pages of this form and include as many details as possible, including:
 - a. Approximate location, see map at right;
 - b. Wind direction, speed and description, such as stable or gusty wind;
 - c. Environmental conditions, such as hot, cold, windy, rainy;
 - d. Other work or contractors in the area;
 - e. Anything else you think is relevant.
4. Provide the completed card to your Supervisor*, Industrial Hygiene*, Union Safety Representative* or the CSM.

* If received by Supervisor, IH, or Union Safety Representative, the Supervisor/IH/ Union-SR will ensure card it is provided to the CSM.



ODOR/VAPOR RESPONSE CARD

1. Complete below information and map (Page 1).

- Date and time of event: 7-11-25 0820
- Check Applicable:
 - Odor Ammonia Alarm (6 ppm) Ammonia Alarm (12 ppm) Alarm (other - describe): _____
- Your name and the work you were performing:
277A Clean and inspect
- Other Work Underway? Describe:

- Location of event (mark area on map and wind direction):
277A SE wind
- Name(s) of others in or near the affected area:
- Was Industrial Hygiene present, who?

- Describe the odor:

<input type="checkbox"/> Sweet	<input type="checkbox"/> Sour	<input type="checkbox"/> Smoky	<input checked="" type="checkbox"/> Septic/Sewer	<input checked="" type="checkbox"/> Musty	<input checked="" type="checkbox"/> Rotten
<input type="checkbox"/> Metallic	<input type="checkbox"/> Onion	<input type="checkbox"/> Earthy	<input type="checkbox"/> Ammonia	<input type="checkbox"/> Citrus	<input type="checkbox"/> Solvent
<input type="checkbox"/> Other (describe): _____					
- Is source known/likely? Describe:

- Your symptoms? None

<input type="checkbox"/> Headache	<input type="checkbox"/> Dizziness	<input type="checkbox"/> Nausea	<input type="checkbox"/> Cough	<input type="checkbox"/> Fatigue
<input type="checkbox"/> Weakness	<input type="checkbox"/> Sore Throat	<input type="checkbox"/> Difficulty Breathing	<input type="checkbox"/> Eye Irritation	<input type="checkbox"/> Rash
<input type="checkbox"/> Itch	<input type="checkbox"/> Tingling	<input type="checkbox"/> Numbness	<input type="checkbox"/> Taste	
<input type="checkbox"/> Other (describe): _____				

2. Provide this completed card (Page 1 & 2) to Supervisor, Industrial Hygiene, your Union Safety Representative or the CSM.
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ODOR/VAPOR RESPONSE CARD

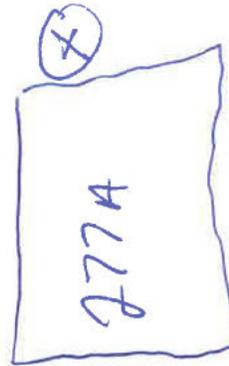
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 - c. Environmental conditions, such as hot, cold, windy, rainy;
 - d. Other work or contractors in the area;
 - e. Anything else you think is relevant.
4. Provide the completed card to your Supervisor*, Industrial Hygiene*, Union Safety Representative* or the CSM.

* If received by Supervisor, IH, or Union Safety Representative, the Supervisor/IH/ Union-SR will ensure card it is provided to the CSM.

Wind ↓SE

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North



Buffalo

ODOR/VAPOR RESPONSE CARD

1. Complete below information and map (Page 1).

• Date and time of event: July 11 2025 around 8:20am

• Check Applicable:

Odor Ammonia Alarm (6 ppm) Ammonia Alarm (12 ppm) Alarm (other - describe): _____

• Your name and the work you were performing:

[REDACTED], electrical work

• Other Work Underway? Describe: _____

• Location of event (mark area on map and wind direction):

West of 277 building

• Name(s) of others in or near the affected area:

[REDACTED]

• Was Industrial Hygiene present, who?

NO IH

• Describe the odor:

Sweet Sour Smoky Septic/Sewer Musty Rotten
 Metallic Onion Earthy Ammonia Citrus Solvent
 Other (describe): _____

• Is source known/likely? Describe: _____

• Your symptoms? None

Headache Dizziness Nausea Cough Fatigue
 Weakness Sore Throat Difficulty Breathing Eye Irritation Rash
 Itch Tingling Numbness Taste
 Other (describe): _____

2. Provide this completed card (Page 1 & 2) to Supervisor, Industrial Hygiene, your Union Safety Representative or the CSM.
If received by Supervisor/IH/U-SR, Supervisor/IH/U-SR will ensure card is provided to the CSM.

ODOR/VAPOR RESPONSE CARD

Instructions:

1. Notify Immediate Supervisor.
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3. Complete both pages of this form and include as many details as possible, including:
 - a. Approximate location, see map at right;
 - b. Wind direction, speed and description, such as stable or gusty wind;
 - c. Environmental conditions, such as hot, cold, windy, rainy;
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odor smell
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Buffalo

X/KFMR

ODOR/VAPOR RESPONSE CARD

1. Complete below information and map (Page 1).

- Date and time of event: 7/6/25 8:20 am
- Check Applicable:
 Odor Ammonia Alarm (6 ppm) Ammonia Alarm (12 ppm) Alarm (other - describe): _____
- Your name and the work you were performing:
[REDACTED] Electrical pm's
- Other Work Underway? Describe: _____
- Location of event (mark area on map and wind direction):
277A, XFMR
- Name(s) of others in or near the affected area:
[REDACTED]
- Was Industrial Hygiene present, who?
No
- Describe the odor:

<input type="checkbox"/> Sweet	<input type="checkbox"/> Sour	<input type="checkbox"/> Smoky	<input checked="" type="checkbox"/> Septic/Sewer	<input type="checkbox"/> Musty	<input checked="" type="checkbox"/> Rotten
<input type="checkbox"/> Metallic	<input type="checkbox"/> Onion	<input type="checkbox"/> Earthy	<input type="checkbox"/> Ammonia	<input type="checkbox"/> Citrus	<input type="checkbox"/> Solvent
<input type="checkbox"/> Other (describe): _____					
- Is source known/likely? Describe: _____
- Your symptoms? None

<input type="checkbox"/> Headache	<input type="checkbox"/> Dizziness	<input type="checkbox"/> Nausea	<input type="checkbox"/> Cough	<input type="checkbox"/> Fatigue
<input type="checkbox"/> Weakness	<input type="checkbox"/> Sore Throat	<input type="checkbox"/> Difficulty Breathing	<input type="checkbox"/> Eye Irritation	<input type="checkbox"/> Rash
<input type="checkbox"/> Itch	<input type="checkbox"/> Tingling	<input type="checkbox"/> Numbness	<input type="checkbox"/> Taste	
<input type="checkbox"/> Other (describe): _____				

2. Provide this completed card (Page 1 & 2) to Supervisor, Industrial Hygiene, your Union Safety Representative or the CSM.
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Wind ↙ N ↑



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