## Jobs Safety Analysis (JSA)

**JOB/ACTIVITY NAME:**
Alignment of IMBCS4

**JSA #:**

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**DEPARTMENT/GROUP NAME**
MET / AEG

**BLDG/AREA LOCATION(s):**
LCLS Dump Area

**OTHER INFORMATION:**

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### REQUIRED PERSONAL PROTECTIVE EQUIPMENT FOR ENTIRE JOB

- safety glasses
- safety shoes
- chemical resistant gloves
- other reflective vest
- other flashlight
- chemical goggles
- hard hat
- welding gloves
- face shield
- harness lanyard
- gloves when handling tools
- other
- long pants / sleeves
- other

### Basic Steps

#### Set Up Equipment and Targeting
- Set up survey instruments (includes Class 2 or 3R laser instruments)
- Place targets on and around components including magnets
- Plug in instruments
- Use illumination if necessary

#### Perform Survey
- Make measurements

### Potential Hazards

- Radiation
- Falling off ladders
- Exposure to electrical energy
- Confined Space
- Eye injuries or electrical shock

### Controls

- Inspect power cords for any defects and use GFCIs (never daisy chain cords)
- If N₂ is present in the area follow the directions attached to the confined space permit
- Do not stare continuously at a laser instrument (Class 2 lasers are safe due to natural blink reflex and Class 3R are safe with restricted beam viewing)
I understand & will adhere to the steps, hazards & controls as described in this JSA. I understand that performing steps out of sequence may pose hazards that have not been evaluated, nor authorized. I will contact my supervisor prior to continuing work, if the scope of work changes or new hazards are introduced. I understand I have the authority and responsibility to stop work I believe to be unsafe.

Worker Name (please print)  Signature  Date
Francis Gaudreault
Michael Rogers

I have reviewed the steps, hazards & controls described in this JSA with all workers listed above and authorize them to perform the work. Workers are qualified (i.e. licensed or certified, as required & in full compliance with SLAC training requirements) to perform this activity.

Georg Gassner  Signature  4/28/2009
Supervisor

I have communicated area hazards with the supervisor or listed worker(s) for this activity and have coordinated the described activity with affected occupants. The above listed workers are released to perform described scope of work in the following area(s): ________________

Work has been released at the ROD meeting on 4/27/09

Area or Building Manager  Signature  Date