

**Imfeld, Hans Louis**

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**From:** Sevilla, Javier A.  
**Sent:** Friday, May 05, 2006 8:42 PM  
**To:** Imfeld, Hans Louis  
**Subject:** RE: MMF

Hi Hans,

No active utilities are located inside the MM lab. The title II drawings are available on the CF website. However, they are not in document control yet.

Here is the URL: <https://www-lcls-internal.slac.stanford.edu/slaonly/cf/Issued-For-Construction/MMF-Bldg-081/08-19-05%20Issued%20for%20Construction/>

Take a look at the structural drawings.

Let me know if you have problems accessing the drawings.

I have a hard copy of the shop drawings as prepared by the concrete contractor for the installation of the new footings. On Monday I can let you make copies of the drawings.

Javier

-----Original Message-----

**From:** Imfeld, Hans Louis  
**Sent:** Friday, May 05, 2006 2:23 PM  
**To:** Sevilla, Javier A.  
**Subject:** MMF

Hi Javier,

I performed a ferroskan on the floor of Rm 114 (MM Lab) where I wish to install survey monuments. Are there any utilities in the slab that I need to be aware of? I would like the drawings of the floor. If they are available on line, what is the drawing number?

Thanks,

Hans Imfeld  
AEG  
X3472

HAZARDS AND REQUIRED CONTROLS (May reference JHAM, AHA, or EWP if hazards/controls are documented there):

<p><u>Hazards</u></p> <p>Type and size of energy sources present (including results from NDT, if used): Rebar in concrete. Positions were ferros scanned and marked.</p> <p>Hazards specific to the tools that will be used: Flying debris, excessive noise, jammed if drilled into rebar.</p> <p>Work environment hazards (such as moisture, lead, asbestos, etc.): N/A</p> <p>Other hazards: N/A</p>
<p><u>Controls</u></p> <p>Procedural requirements: Use depth gauge set to anchor depth.</p> <p>Types and classification of PPE: Eye protection, ear protection.</p> <p>Other controls: Ferros scan floor for rebar position.</p>

REVIEW, APPROVAL, AND AUTHORIZATION

Any deviation from the scope of work identified on this permit requires re-validation of this permit. This penetration permit expires 30 days after issuance.

CLASS 1 & 2 AUTHORIZATIONS:

I have discussed the hazards and controls with the workers and verified that they are trained/qualified to perform the work.

Harold J. J... DATE: 5-8-06  
Responsible Line Manager/Designee Signature

CLASS 2 AUTHORIZATION ONLY:

Jack Wolf DATE: 5/8/06  
Area Responsible Person



**Penetration Permit**

Work Request # (if applicable): \_\_\_\_\_ Date Permit Submitted: 5-8-06

**GENERAL INFORMATION**

Area/Location	Date(s) work will be performed	Job Description (location of penetration, material to be penetrated, tools, etc)
MMF B081 RM 114 MMLAB	Within 1 wk. of permit approval	Install Survey Monumentation
Responsible Line Manager or Designee Name/Organization)	Phone #	Other Information (e.g., depth of penetration, etc.)
Hans Imfeld AEG	X3472	3" Penetrations

**CLASS 1 PENETRATION CHECKLIST (HOLLOW WALLS, CEILINGS OR FLOORS, OR 2 INCHES OR LESS INTO SOLID MATERIAL) PENETRATION CHECKLIST**

	Yes	N/A
Checked other side of walls, under floors, or through false ceilings for hazards?	_____	_____
Verified stud locations?	_____	_____
Nonconductive tools to be used?	_____	_____
Masonry bits and hand tools to be used for initial penetration?	_____	_____
Drill bit stops or short drill bits (2 inches or less) to be used for solid material?	_____	_____
Electrical tools equipped with GFCIs or double insulated?	_____	_____
GFCIs tested?	_____	_____
Appropriate PPE specified (see page 2) and obtained?	_____	_____
PPE inspection(s) up to date?	_____	_____
Checklist completed by: _____	Date: _____	

**CLASS 2 PENETRATION CHECKLIST (GREATER THAN 2 INCHES INTO SOLID MATERIAL) PENETRATION CHECKLIST**

	Yes	N/A
Reviewed historical records, engineering plans, and drawings?	<input checked="" type="checkbox"/>	_____
Area Responsible Person /designee, customer/requester, or other personnel consulted?	<input checked="" type="checkbox"/>	_____
Visually inspected proposed location of penetration?	<input checked="" type="checkbox"/>	_____
Checked other side of walls, under floors, or through false ceilings for hazards?	_____	<input checked="" type="checkbox"/>
De-energized and locked/tagged-out energy sources as required?	_____	<input checked="" type="checkbox"/>
Non-Destructive Testing (NDT) used to determine if additional hazards exist? If yes, list results under "Hazards."	<input checked="" type="checkbox"/>	_____
NDT used to determine wall reinforcement?	_____	<input checked="" type="checkbox"/>
Electrical tools equipped with GFCI or double-insulated?	<input checked="" type="checkbox"/>	_____
GFCIs tested?	<input checked="" type="checkbox"/>	_____
Appropriate PPE specified (see page 2) and obtained?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PPE inspection(s) up to date?	<input checked="" type="checkbox"/>	_____
Short drill bits used or equipment marked to limit penetration depth?	<input checked="" type="checkbox"/>	_____
Checklist completed by: <u>Hans Imfeld</u>	Date: <u>5-8-06</u>	