

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/26/16

FACILITY ID: HWAD 110-52

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD MISMATCH/INCOMPLETE, UNAUTHORIZED QTY ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input checked="" type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

Vegetation is excessive
~~BE~~ droppings on dock
Died

[Signature] 7/26/16
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D	A. LAST	6. Type of Storage	
A	5-17-16		
T	B. THIS	and Specific Warehouse location:	Warehouse: 110-52
E	7-26-16	Depot Area Open Storage Area:	

7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material Is Stored In the Manner Prescribed in the Storage Manual	X	
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material Is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A
			(3) CLASS III N/A

PRO-GRAM	Type (Pile, case, ingot, bale etc.)	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9462	719,112
	30 Gal								
							TotalPallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

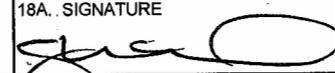
See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
			<input type="checkbox"/> OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whsc/110-

Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m3 and lowest 0.0mg/m3. DNSC action level for mercury vapor presence is 25mg/m3. Action level for OSHA is 100 mg/m3. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

**MERCURY STORAGE FACILITY
INSPECTION REPORT**

DATE: 7/26/16

FACILITY ID: HWAD 110-66

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

Good shape

Rob Matthews 7/26/16
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D	A. LAST	6. Type of Storage	
A	5-17-16	and Specific Warehouse location:	Warehouse: 110- 660
T	B. THIS	Depot Area Open Storage Area:	
E	7-26-16		

7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA <small>(check and complete. Explain negative responses)</small>		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material Is Stored In the Manner Prescribed in the Storage Manual	X	
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	N/A	N/A
		N/A	N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pile, case, ingot, bale etc.)	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	2400	467,400
	30 Gal								
							Total Pallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total Inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
			<input type="checkbox"/> OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110- # Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

**MERCURY STORAGE FACILITY
INSPECTION REPORT**

DATE: 7/26/14

FACILITY ID: HWAD 110-77

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input checked="" type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

wind sock is missing
EXCESSIVE VEGETATION

Colo M. Jones 7/26/14
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV		2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas		3. Serial No. 4
D A T E	A. LAST 5-17-14 B. THIS 7-26-14	6. Type of Storage and Specific Warehouse location: Depot Area Open Storage Area: Warehouse: 110-77		4. ID NO. N/A

7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor		7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA <small>(Check and complete. Explain negative responses)</small>		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material Is Stored In the Manner Prescribed in the Storage Manual	X	
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A
			(3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM a.	Type (Pile, case, ingot, bale etc.) b.	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9480	720,480
	30 Gal								
							TotalPallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total Inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: _____

Inspector: Stuart Doshier

Air Monitoring Instrument: _____

Make: Jerome

Model: 505

Whse/110- # Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks: _____

**MERCURY STORAGE FACILITY
INSPECTION REPORT**

FACILITY ID: HWAD 110-78

DATE: 7/26/16

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|---|---|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD MISMATCH/INCOMPLETE, UNAUTHORIZED QTY ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|---|--|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION

Bob Malins 7/26/16
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity <p style="text-align: center;">Quarterly Inspection of Mercury Storage Areas</p>	3. Serial No. <p style="text-align: center;">4</p> 4. ID NO. N/A
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D A T E	A. LAST 5-17-14 B. THIS 7-26-14	6. Type of Storage and Specific Warehouse location: Depot Area Open Storage Area:	Warehouse: 110-78
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA <small>(Check and complete. Explain negative responses)</small>	YES	NO
8. STORAGE A. Storage Facilities Are of the Type Prescribed in the Storage Manual B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL A. Material Is Stored in the Manner Prescribed in the Storage Manual B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS A. Depot Manager Confirmed that all entries have been Posted B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS A. Material is Stored in Proper Containers (Check only if applicable) B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual C. Condition of Containers (Give exact number in Class III under remarks)	X	
	X	
	(1) CLASS I N/A	(2) CLASS II N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pile, case, ingot, bale etc.)	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9480	720,480
	30 Gal								
							Total Pallets		

15. REMARKS
(Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total Inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/20/18

FACILITY ID: HWAD 110-87

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION

Colo M... 7/20/18
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity <p style="text-align: center;">Quarterly Inspection of Mercury Storage Areas</p>	3. Serial No. <p style="text-align: center;">4</p> 4. ID NO. <p style="text-align: center;">N/A</p>
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D	A. LAST	6. Type of Storage	and Specific Warehouse location: Warehouse: <u>110-87</u>
A	5-17-16		
T	B. THIS		
E	7-26-16	Depot Area Open Storage Area:	

7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA <small>(Check and complete. Explain negative responses)</small>		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material Is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pile, case, ingot, bale etc..)	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9475	720,100
	30 Gal								
							TotalPallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.

Jerome 505 Mercury Vapor testing conducted by the undersigned.

Total Inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110-

Readings: 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m3 and lowest 0.0mg/m3. DNSC action level for mercury vapor presence is 25mg/m3. Action level for OSHA is 100 mg/m3. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

MERCURY STORAGE FACILITY
INSPECTION REPORT

FACILITY ID: HWAD 110-88

DATE: 7/26/16

CRITICAL DEFICIENCIES = A MAJOR DEFICIENCIES = B

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD MISMATCH/INCOMPLETE, UNAUTHORIZED QTY ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD FACILITIES MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION

[Signature]
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity <p style="text-align: center;">Quarterly Inspection of Mercury Storage Areas</p>	3. Serial No. <p style="text-align: center;">4</p> 4. ID NO. N/A
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D A T E	A. LAST 5-17-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Depot Area Open Storage Area: Warehouse: 110-88
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material Is Stored In the Manner Prescribed in the Storage Manual	X	
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A
			(3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pile, case, ingot, bale etc.)	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9480	720,480
	30 Gal								
							TotalPallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil	
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil	
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil	
	SOC Environmental DIV	<input checked="" type="checkbox"/>		<input type="checkbox"/> OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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DATE: 7/26/10

MERCURY STORAGE FACILITY
INSPECTION REPORT

FACILITY ID: HWAD 110-89

CRITICAL DEFICIENCIES = A MAJOR DEFICIENCIES = B

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD FACILITIES MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

Excessive vegetation
East exit door found unsecured

[Signature]
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-17-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Warehouse: 110-89 Depot Area Open Storage Area:
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
--	--	----------------

INSPECTION AREA		(Check and complete. Explain negative responses)		
		YES	NO	
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X		
	B. Storage Facilities Are Maintained in Good Order	X		
9. MATERIAL	A. Material Is Stored In the Manner Prescribed in the Storage Manual	X		
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X		
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A		
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A		
11. UNITS	Quantity indicated in item 14h reflects EBS Posting and agrees with actual and/or computed count	X		
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X		
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material Is Stored in Proper Containers (Check only if applicable)	X		
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X		
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A	(3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM a.	Type (Flk, case, mgul, bale etc.) b.	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9348	710,448
	30 Gal								
							Total Pallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph. Jerome 505 Mercury Vapor testing conducted by the undersigned. Total Inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority)

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynnton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18B. DATE OF SIGNATURE 7-27-16
---	--------------------	-----------------------------------

Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110-

Readings: 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/26/16

FACILITY ID: HWAD 110-92

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES** **MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD**

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION

Rob Mallick 7/26/16
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-17-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Warehouse: 110-92 Depot Area Open Storage Area
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A (3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pile, case, ingot, bale etc.)	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	I. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum 30 Gal			29"	20"	N/A	N/A	9480	720,480
							Total Pallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority)

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harden@dlia.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynon@dlia.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dlia.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110-

Readings: 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m3 and lowest 0.0mg/m3. DNSC action level for mercury vapor presence is 25mg/m3. Action level for OSHA is 100 mg/m3. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/26/16

FACILITY ID: HWAD 110-93

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION / CO₂ SYSTEM IS UNSATISFACTORY
EXCESSIVE WEBS ON CO₂ SYSTEM
WEST ENTRY FIRE EXTINGUISHER OVERCHARGED

[Signature]
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-17-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Depot Area Open Storage Area Warehouse: 110-93
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A (3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pkt, case, ingot, bale etc.)	WIDTH	LENGTH	HEIGHT	DIAM-ETER	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks n.	i. TOTAL WEIGHT
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9474	720,024
	30 Gal								
							Total Pallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority)

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harden@dlia.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynnton@dlia.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dlia.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110- # Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks: _____

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/26/16

FACILITY ID: HWAD 110-94

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input checked="" type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input checked="" type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

missing chemtron CO₂ warning sign on east end of building
excessive vegetation
cat infestation west entry door

Ko DeWalt
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-11-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Depot Area Open Storage Area. Warehouse: 110-94
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No. Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III and/or reprints)	(1) CLASS I N/A	(2) CLASS II N/A
		(3) CLASS III N/A	

PRO-GRAM	Type (Fls, cans, Ingot, etc.)	WIDTH	LENGTH	HEIGHT	DIAMETER	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS (Flasks, h.)	i. TOTAL WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum 30 Gal			29"	20"	N/A	N/A	9430	716,680
							Total/Pallets		

15. REMARKS (Review all other appropriate guidelines contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete (a) and (b) block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched plenograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with corrective measures beyond the scope of authority)

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harden@dlm.mil
	DLA/SMPM	<input checked="" type="checkbox"/>	jason.boytan@dlm.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dlm.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

19. NAME OF INSPECTOR (Type or Print): Stuart Doshier	16A. SIGNATURE 	16 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whsc/116-

Readings: 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HGT analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE:

7/26/14

FACILITY ID: HWAD 110-95

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

Vegetation excessive
webs on CO₂ system

Kalo Maltes 7/26/14

DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-17-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Warehouse: 110-95 Depot Area Open Storage Area:
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A (3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM a.	Type (Pile, case, ingot, bale etc.) b.	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9480	720,480
	30 Gal								
							TotalPallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.

Jerome 505 Mercury Vapor testing conducted by the undersigned.

Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynnton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110-

Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m3 and lowest 0.0mg/m3. DNSC action level for mercury vapor presence is 25mg/m3. Action level for OSHA is 100 mg/m3. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

**MERCURY STORAGE FACILITY
INSPECTION REPORT**

DATE: 7/26/16

FACILITY ID: HWAD 110-96

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- A1 SAFETY IN STORAGE
- A2 EVIDENCE OF LEAKING
- A3 HIGH VAPOR CONCENTRATION LEVEL
- A4 PACKAGING
- A5 MARKINGS
- A6 STORAGE CONFIGURATION

- B1 PORTABLE DOCK (If present)
- B2 RECORDS MISMATCH
- B3 ITEM LOCATION MISMATCH
- B4 INVENTORY RECORD CARD MISMATCH/INCOMPLETE, UNAUTHORIZED QTY ADJUSTMENT
- B5 HOUSEKEEPING

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS
- AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS
- AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE
- AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD
- AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH
- AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION
- AD7 HOLES IN THE ROOF
- AD8 CO₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED

- BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED
- BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION
- BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE
- BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY
- CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens
- CD2 EXCESSIVE VEGETATION
- CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK
- CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS
- NO DEFICIENCIES NOTED

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

*EXCESSIVE VEGETATION
EXIT LIGHT WEST DOOR OUT*

[Signature]
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-17-16 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Warehouse: 110-96 Depot Area Open Storage Area:
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material Is Stored In the Manner Prescribed in the Storage Manual	X	
	B. Material Is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A (3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM a.	Type (Pile, case, Ingot, bale etc.) b.	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum 30 Gal			29"	20"	N/A	N/A	9090	690,840
							Total Pallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
Jerome 505 Mercury Vapor testing conducted by the undersigned.
Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110- # Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/26/16

FACILITY ID: HWAD 110-97

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION
Fire Extinguisher west dock overcharged

[Signature] 7/26/16
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
		4. ID NO. N/A

D A T E	A. LAST 5-17-14 B. THIS 7-26-16	6. Type of Storage and Specific Warehouse location: Warehouse: 110-97 Depot Area Open Storage Area:
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
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INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A (3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM	Type (Pile, case, ingot, bale etc.)	WIDTH	LENGTH	HEIGHT	DIAM-ETER	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS Flasks h.	i. TOTAL WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum 30 Gal			29"	20"	N/A	N/A	9478	720,328
							Total Pallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
 Jerome 505 Mercury Vapor testing conducted by the undersigned.
 Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority).

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynnton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 9-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110-

Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m3 and lowest 0.0mg/m3. DNSC action level for mercury vapor presence is 25mg/m3. Action level for OSHA is 100 mg/m3. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks:

MERCURY STORAGE FACILITY
INSPECTION REPORT

DATE: 7/26/16

FACILITY ID: HWAD 110-98

CRITICAL DEFICIENCIES = A **MAJOR DEFICIENCIES = B**

- | | |
|--|--|
| <input type="checkbox"/> A1 SAFETY IN STORAGE | <input type="checkbox"/> B1 PORTABLE DOCK (If present) |
| <input type="checkbox"/> A2 EVIDENCE OF LEAKING | <input type="checkbox"/> B2 RECORDS MISMATCH |
| <input type="checkbox"/> A3 HIGH VAPOR CONCENTRATION LEVEL | <input type="checkbox"/> B3 ITEM LOCATION MISMATCH |
| <input type="checkbox"/> A4 PACKAGING | <input type="checkbox"/> B4 INVENTORY RECORD CARD
MISMATCH/INCOMPLETE, UNAUTHORIZED QTY
ADJUSTMENT |
| <input type="checkbox"/> A5 MARKINGS | <input type="checkbox"/> B5 HOUSEKEEPING |
| <input type="checkbox"/> A6 STORAGE CONFIGURATION | |

CRITICAL DEFICIENCIES = AD **FACILITIES**
MAJOR DEFICIENCIES = BD / MINOR DEFICIENCIES = CD

- | | |
|--|---|
| <input type="checkbox"/> AD1 MISSING/INCORRECT FIRE AND/OR CHEMICAL SYMBOLS | <input type="checkbox"/> BD1 DOORS AND/OR WINDOWS ARE NOT WORKING PROPERLY AND CANNOT BE SECURED |
| <input type="checkbox"/> AD2 DAMAGED OR DEFECTIVE CONTAINMENT CURBS | <input type="checkbox"/> BD2 BROKEN LIGHTING WITHIN THE SITE - SPECIFY GRID LOCATION |
| <input type="checkbox"/> AD3 GEO-MEMBRANE FLOOR DAMAGED, RIPPED, TORN OR UNSERVICEABLE | <input checked="" type="checkbox"/> BD3 VENTILATION REGISTERS ARE CLOSED, BROKEN AND/OR INOPERABLE |
| <input type="checkbox"/> AD4 LOOSE/BROKEN DOCK BUMPERS POSING A SIGNIFICANT HAZARD | <input checked="" type="checkbox"/> BD4 WIND SOCK POLES ARE NOT IN PLACE AND WIND SOCKS ARE NOT WORKING PROPERLY |
| <input type="checkbox"/> AD5 CRACKS IN WALLS EXCEEDING 1/4" IN WIDTH | <input type="checkbox"/> CD1 DOOR DEFECTS - Missing ground, missing/broken door hooks, broken/damaged/ missing hinges, cannot access/missing/damaged/defective vent screens |
| <input type="checkbox"/> AD6 WAREHOUSE FOUNDATION/STEPS - EVIDENCE OF DETERIORATION | <input checked="" type="checkbox"/> CD2 EXCESSIVE VEGETATION |
| <input type="checkbox"/> AD7 HOLES IN THE ROOF | <input type="checkbox"/> CD3 INCORRECT LOCK OR NON-FUNCTIONING LOCK |
| <input type="checkbox"/> AD8 CO ₂ FIRE SUPPRESSION SYSTEM SHOWS EVIDENCE OF CORROSION, INTRUSION OR IS PHYSICALLY DAMAGED | <input type="checkbox"/> CD4 EVIDENCE OF RAT INFESTATION I.E., NESTS, DROPPINGS |
| | <input type="checkbox"/> NO DEFICIENCIES NOTED |

COMMENTS (CONTINUE ON REVERSE IF ADDITIONAL SPACE IS REQUIRED)

EXCESSIVE VEGETATION wind sock missing DAMAGED ROOF VENT	OVERCHARGED FIRE EXTINGUISHER WEST DOOR NEST BUILT UNDER CO ₂ SYSTEM
--	--

Rob Malters 7/26/16
DLA SIGNATURE/DATE

DLA SIGNATURE/DATE

NOTIFICATION OF STOCKPILE INSPECTION

1. Name and Location of Depot or Facility DLA-SM-HWAD Hawthorne, NV	2. Name and Type of Commodity Quarterly Inspection of Mercury Storage Areas	3. Serial No. 4
6. Type of Storage and Specific Warehouse location: Warehouse: <u>110-98</u>		4. ID NO. N/A

D A. LAST A <u>5-17-16</u> T B. THIS E <u>7-26-16</u>	6. Type of Storage and Specific Warehouse location: Depot Area Open Storage Area:
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7. NAME AND TITLE OF PERSON RESPONSIBLE FOR MATERIAL Robert Mathias, DLA Strategic Materials Supervisor	7A. TEL. NO. OR CODE (330) 623-0267	7B. EXT N/A
--	--	----------------

INSPECTION AREA (Check and complete. Explain negative responses)		YES	NO
8. STORAGE	A. Storage Facilities Are of the Type Prescribed in the Storage Manual	X	
	B. Storage Facilities Are Maintained in Good Order	X	
9. MATERIAL	A. Material is Stored in the Manner Prescribed in the Storage Manual	X	
	B. Material is Free of Deterioration, Infestation, Contamination, Commingling, Migration and Erosion	X	
10. RECORDS	A. Depot Manager Confirmed that all entries have been Posted	N/A	
	B. Depot Postings are: Last RR No. Date OSR No Dated	N/A	
11. UNITS	Quantity indicated in Item 14h reflects EBS Posting and agrees with actual and/or computed count	X	
12. SECURITY AND FIRE PROTECTION	Security and Fire Protection are being provided in accordance with Quality Assurance and Materials Inspection Handbook and Storage Manual Requirements	X	
13. CONTAINERS, PILES, OR OTHER UNITS	A. Material is Stored in Proper Containers (Check only if applicable)	X	
	B. All Containers, Piles and/or Units Are Marked as Prescribed in the Storage Manual	X	
	C. Condition of Containers (Give exact number in Class III under remarks)	(1) CLASS I N/A	(2) CLASS II N/A (3) CLASS III N/A

14. DESCRIPTION OF CONTAINERS, PILES, OR OTHER UNITS									
PRO-GRAM a.	Type (Pile, case, Ingot, bale etc.) b.	WIDTH c.	LENGTH d.	HEIGHT e.	DIAM-ETER f.	g. WEIGHT OF UNIT		TOTAL NUMBER OF UNITS OF UNITS Flasks h.	i. TOTAL WEIGHT NET WEIGHT POUNDS
						(1) GROSS	(2) NET		
DLA/SM	Drum			29"	20"	N/A	N/A	9452	718,352
	30 Gal								
							TotalPallets		

15. REMARKS (Review all other appropriate questions contained in "guide for the inspection of stockpiled materials and storage facilities", and if deficiencies are found, give the appropriate guide numbers and complete details in this block)

See Attached Sheet for other pertinent information.

Actual count of flasks could not be verified, thus no drums were opened at the time of inspection, Drum count was verified and matched planograph.
Jerome 505 Mercury Vapor testing conducted by the undersigned.
Total inventory of Mercury flasks are contained within steel drums with no evidence of leaking.

16. RECOMMENDATIONS (Not to be construed by storage depot or facility as authorization to proceed with remedial measures beyond the scope of authority)

NONE

17. DISTRIBUTION	DLA/SM/Chief	<input checked="" type="checkbox"/>	charles.harder@dla.mil
	DLA/SM/PM	<input checked="" type="checkbox"/>	jason.boynton@dla.mil
	DLA/SM/HWAD Manager	<input checked="" type="checkbox"/>	robert.mathias@dla.mil
	SOC Environmental DIV	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	OTHER

18. NAME OF INSPECTOR (Type or Print) Stuart Doshier	18A. SIGNATURE 	18 B. DATE OF SIGNATURE 7-27-16
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Location: Hawthorne, NV

Quarter 4

Date of Inspection: 7-26-16

Inspector: Stuart Doshier

Air Monitoring Instrument:

Make: Jerome

Model: 505

Whse/110- # Readings : 30

Range: 0.0-0.1 mg/m³

Findings: This date, a visual and Mercury detection inspection was done for section containing Mercury listed above. Inspection revealed breathing air is safe, and acceptable. Air surveillance was accomplished using Jerome 505 HG analyzer in 15 second mode. Manufactures calibration process was conducted prior to use and found to be in tolerance. All samples were taken along aisles rows at approximately 36" above the floor and Breathing zones. Highest reading retrieved was 0.20 mg/m³ and lowest 0.0mg/m³. DNSC action level for mercury vapor presence is 25mg/m³. Action level for OSHA is 100 mg/m³. Inspection of drums and drip pans was also conducted and all found to be in excellent condition. Doors were opened during this inspection by SOC Fire Department.

Remarks: