
APPENDIX E

**SAMPLE HAZARDOUS ASSESSMENT
AND RECOGNITION
PLAN (HARP) INSTRUMENT**

**CALIFORNIA DEPARTMENT OF JUSTICE
DIVISION OF LAW ENFORCEMENT
BUREAU OF NARCOTIC ENFORCEMENT**

HAZARD ASSESSMENT AND RECOGNITION PLAN

A. FILE INFORMATION

FIELD OFFICE	AGENCY ASSISTED	DATE SEIZED	CASE NO.
SITE SAFETY OFFICER (Name)		AFFILIATION (If other than BNE enter Agency name)	

B. SITE DESCRIPTION

LAB ADDRESS
SITE LOCATION & DESCRIPTION
STRUCTURE DESCRIPTION
WEATHER CONDITIONS Temperature _____ Rain _____ Snow _____

C. OTHER AGENCY FIELD SUPPORT

FIELD SUPPORT	NAME (Include jurisdiction by City, State or County)	TELEPHONE NUMBER	STANDBY LOCATION	OFFICIAL CONTACTED (Name)	NOTIFIED DATE/TIME
Fire Dept.					
Medivac Helicopter					
Health Dept.					
Hospital Emergency Rm					
Disposal Co.					
Other					

D. TEAM MEMBER ASSIGNMENTS

TEAM MEMBERS (Include Name, Affiliation & check Assignment box.) <small>E=Entry, PA=Pre-Assessment, A=Assessment, P=Processing</small>	E	PA	A	P	

E. TRUCK CHECKLIST

- | | |
|--|--|
| <input type="checkbox"/> References | <input type="checkbox"/> Video/Camera |
| <input type="checkbox"/> Plastic | <input type="checkbox"/> TSP/Cleaner |
| <input type="checkbox"/> Duct Tape | <input type="checkbox"/> Extension Cord |
| <input type="checkbox"/> Traffic Cones | <input type="checkbox"/> SCBA/Tanks |
| <input type="checkbox"/> 5 gal. Bucket/Brush | <input type="checkbox"/> Respirator Cartridges |
| <input type="checkbox"/> Hand Cleaner/Rags | <input type="checkbox"/> Tyvek Suit |
| <input type="checkbox"/> Exhaust Fan | <input type="checkbox"/> Saranex Suit |
| <input type="checkbox"/> Generator | <input type="checkbox"/> Poly Tyvek Suit |
| <input type="checkbox"/> Gas Can | <input type="checkbox"/> Booties |
| <input type="checkbox"/> Gastech 1314 | <input type="checkbox"/> Nitrile Gloves |
| <input type="checkbox"/> Drager Kit/Tubes | <input type="checkbox"/> Glove Liners |
| <input type="checkbox"/> Pump Sprayer | <input type="checkbox"/> Neoprene Gloves |
| <input type="checkbox"/> Plastic Bags | <input type="checkbox"/> Shower/Eye Wash |
| <input type="checkbox"/> Sample Bottles | <input type="checkbox"/> First Aid Kit |
| <input type="checkbox"/> Water Hose | <input type="checkbox"/> Fire Extinguisher |
| <input type="checkbox"/> Escape Pack | <input type="checkbox"/> Drinking Water |
| <input type="checkbox"/> Bung Wrench | <input type="checkbox"/> Other |

F. LABORATORY TYPE AND HAZARDS

LABORATORY TYPE (Circle)

Methamphetamine	Fentanyl	LSD
Amphetamine	P2P	Other _____
Cocaine	PCP	Method _____

CHEMICAL HAZARDS (Circle)

Carcinogens	Oxidizers	Other chemical hazards: _____ _____
Corrosives	Water Reactives	
Flammables		
Explosives		

OTHER POTENTIAL HAZARDS (Circle)

Comp. Gas Cylinder	Slip/Trip/Fall Hazard	Damaged Structure
Heat Stress	Electrical	Excavation
Confined Space	Burn Hazard	Other: _____
Limited Egress	Leaking containers	_____

REV 2/1/86 (9/81)

EQUIPMENT REQUIREMENTS	G. STAGES OF RAID			
	ENTRY	PRE-ASSESSMENT	ASSESSMENT	PROCESSING
R=Required	Primary Hazard			
S=Standby	Duration			
Enter R or S under each stage of raid to indicate equipment requirement.	Personnel			
	Level of Protection			

	H. EQUIPMENT USED				NO. OF ITEMS USED
	ENTRY	PRE-ASSESSMENT	ASSESSMENT	PROCESSING	
SCBA					
Escape Pack					
Extra Bottles					
Air Purifying Respirator					
Canisters					
Disposable Suits					
Outer Gloves					
Inner Gloves					
Nomex Suit					
Field Boots					
Neoprene Boots					
PVC Boots					
Safety Goggles					
Other					

Combustible Gas Indicator/Oxygen Meter

I. HAZARD ASSESSMENT FINDINGS

LEL	% Oxygen	PPM	LOCATION IN LAB

Drager Tubes (check all used/tested)	Results (circle)	Color changed to:	PPM Level	X	Conversion Factor	=	Adjusted Reading	Max Value
Acetic Acid 5/a	+ -			X		=		
Acetone 100/b	+ -			X		=		
Benzene 5/a	+ -			X		=		
Carbon Disulfide .04	+ -			X		=		
Ethyl Acetate 200/a	+ -			X		=		
Formic Acid	+ -			X		=		
Hydrocyanic 5/a	+ -			X		=		
Methanol 50/a	+ -			X		=		
O-Toluidine 1/a	+ -			X		=		
Trichloroethane 50/d	+ -			X		=		
Triethylamine 5/a	+ -			X		=		
Other	+ -			X		=		

J. COMMENTS:

SITE SAFETY OFFICER (Sign & Date)

CASE AGENT (Sign & Date)

SPECIAL AGENT SUPVSR (Sign & Date)