

# AOE DEPARTMENT SAFETY REVIEW FORM FOR **EXPERIMENTAL WORKSPACES**

Before experimental activities can begin in any room in the Department of Aerospace and Ocean Engineering, and **at least once per year** thereafter, a copy of this form must be completed, signed and submitted by the responsible faculty/staff member (usually the principal investigator). Completed forms should be submitted to the AOE Assistant Department Head for Facilities (William Devenport) and should also be made available to other faculty/staff with relevant expertise, or with direct involvement in the space. Any advice resulting from this interaction should be copied to the Assistant Department Head, as well as being transmitted back to the responsible faculty/staff member. Once the responsible faculty/staff member is satisfied that all safety concerns have been met the final version of the form should be signed and submitted and a copy prominently displayed on the door to the space and on the department safety website. The responsible faculty/staff member may then authorize experimental activities.

Date of form 9/19/24

Form expires (no more than 1 year after form date): 9/19/25

Name and location of workspace AOE Machine Shop 501 Industrial Park Dr.

Faculty/staff member responsible for Experimental Workspace and its safety James Lambert

Office Address 501 Industrial Park Dr.

Phone 540-231-6752

Email Jalamber@vt.edu

## **GENERAL SAFETY REVIEW**

1. *The workspace houses the following potentially hazardous experimental rigs. A 'Facility Review Form' has been completed, posted, and is current for each of these.*

*No experimental Rigs*

2. *An evaluation of the above experimental workspace has been performed and the following safety risks have been identified, in addition to those associated with the above facilities (append details where necessary)*

*Machinery poses threat if improperly used*

3. *The following actions have been taken to minimize those risks (append details where necessary)*

*Everyone that uses AOE Machine Shop must take Machine Shop Safety course provided by EHSS*

4. *All users of this workspace have been registered and are listed on the EHS training website at [https://secure.hosting.vt.edu/www.ehss.vt.edu/training/training\\_report.php](https://secure.hosting.vt.edu/www.ehss.vt.edu/training/training_report.php). Users have taken all appropriate safety training courses from Environmental Health and Safety. Their training is current and is recorded on the EHS website, under the workspace name Hancock, John W. Jr., Hall, 115*

*The appropriate safety courses are (list here):*

Personal Protective Equipment

Portable fire extinguishers

Lockout/tagout Awareness

HAZCOM RTK

Machine shop safety

Compressed Gas Cylinder Safety

Electrical awareness

Ladder safety

Overhead crane safety

## HAZARD COMMUNICATION PLAN

1. A Chemical Hygiene Plan (CHP) is required for this work space. (The responsible faculty/staff member is required to contact EHS to make this determination before answering this question)

No  X. Continue to step 2

Yes . Sign below to certify that a current and complete Chemical Hygiene Plan has been completed for this space. Provide the location of the CHP in the workspace

2. In signing below I am acknowledging that I am responsible for managing the Hazard Communication Plan for this workspace, specifically, it is my responsibility to ensure:

- a) that all workspace users (include students, staff, other faculty) understand and follow this plan through Scheduled HazCom training, all necessary EHS training, and disciplinary action.
- b) that a hazardous chemical inventory is compiled and maintained, using the EHS Chemical Registration System at [https://secure.hosting.vt.edu/www.ehss.vt.edu/programs/ChemInventory/inventory\\_entry.php](https://secure.hosting.vt.edu/www.ehss.vt.edu/programs/ChemInventory/inventory_entry.php). A list of hazardous chemicals, downloaded from that site, is appended to the paper copy of this form to be posted on the door to the space. Note that consumer products intended for household use, and used in a manner consistent with that intent need not be listed.
- c) that all containers of classified hazardous chemicals associated with or stored in the workspace are clearly and prominently labeled, in English, with the original manufacturers label. If that label is not available then a label based on information from the Safety Data Sheet (product name, danger/warning indication, pictogram...) that clearly communicates the hazard to the user will be used.
- d) that procedures are reviewed at least annually, on or about the expiration/renewal date of this form.
- e) that Safety Data Sheets (SDS) are available for all chemicals in the attached list are available to lab users at (give location) In yellow cabinet by window in center of shop
- f) that EHS has been consulted on all other training requirements, and these training requirements have been met and are properly recorded on the EHS training website.
- g) that meetings to communicate health hazards associated with the use of all hazardous chemicals and the use of proper PPE will be held

X with all new workspace users before they begin work,

X with all workspace users when a new chemical or other hazard is added to the workspace (and at least annually)

- h) that all HazCom information and training of employees will at a minimum meet the requirements of OSHA 29 CFR 1910.1200(h), see below .

Signature of faculty/staff member responsible  
for workspace and its safety



Date 9-19-2024

**OSHA CFR 29 1910.1200(h)**

**1910.1200(h)**

*Employee information and training.*

**1910.1200(h)(1)**

Employers shall provide employees with effective information and training on hazardous chemicals in their work area at the time of their initial assignment, and whenever a new chemical hazard the employees have not previously been trained about is introduced into their work area. Information and training may be designed to cover categories of hazards (e.g., flammability, carcinogenicity) or specific chemicals. Chemical-specific information must always be available through labels and safety data sheets.

**1910.1200(h)(2)**

*Information.* Employees shall be informed of:

**1910.1200(h)(2)(i)**

The requirements of this section;

**1910.1200(h)(2)(ii)**

Any operations in their work area where hazardous chemicals are present; and,

**1910.1200(h)(2)(iii)**

The location and availability of the written hazard communication program, including the required list(s) of hazardous chemicals, and safety data sheets required by this section.

**1910.1200(h)(3)**

*Training.* Employee training shall include at least:

**1910.1200(h)(3)(i)**

Methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area (such as monitoring conducted by the employer, continuous monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc.);

**1910.1200(h)(3)(ii)**

The physical, health, simple asphyxiation, combustible dust, and pyrophoric gas hazards, as well as hazards not otherwise classified, of the chemicals in the work area;

**1910.1200(h)(3)(iii)**

The measures employees can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective equipment to be used; and,

**1910.1200(h)(3)(iv)**

The details of the hazard communication program developed by the employer, including an explanation of the labels received on shipped containers and the workplace labeling system used by their employer; the safety data sheet, including the order of information and how employees can obtain and use the appropriate hazard information.

# Environmental Health and Safety

## 501 Industrial Park Drive, Room AOE Machine Shop, Ground Floor

### Emergency Contact, Primary

**Name:** James Lambert **Work Phone #:** 231-6752  
**Home Phone #:** 5402397867 **Cell Phone #:**

### Emergency Contact, Secondary

**Name:** Cameron Hollandsworth **Work Phone #:** 231-6752  
**Home Phone #:** 5403570091 **Cell Phone #:**

**Last Chemical Inventory Submit Date: 2024-06-14**

## Oxidizing Gases

Chemical Name	Total Amount in Storage and Use	% by Volume	Comment
Oxygen	2 Standard Cylinders	100%	
	<b>2 Total</b>		

## Flammable Gases

Chemical Name	Total Amount in Storage and Use	% by Volume	Comment
Acetylene	2 Standard Cylinders	100%	
	<b>2 Total</b>		

## Peroxide Formers

Chemical Name	Total Amount in Storage and Use
Other	Methyl ethyl keytone 1gal
	<b>0 Total</b>

## Flammable Liquid (Class IA, IB, IC)

Chemical Name	Total Amount in Storage and Use
Acetone	2 Gallons
Isopropyl Alcohol	2 Gallons
	<b>4 Total Gallons</b>

[< Back to Lab Description](#)