FORM 5-10 JOB CORPS CENTER OPERATOR TRANSITION FACILITIES, HEALTH/SAFETY, AND FLEET VEHICLE CHECKLIST

INSTRUCTIONS

During transition of operators at a Job Corps Center, the incumbent operator is responsible for reviewing this checklist with the new operator and providing the applicable deliverables listed on this checklist to facilitate a successful transition of center facilities, health/safety, and fleet vehicle documentation. Both operators shall sign the checklist when complete and submit to the Region prior to transition completion.

	FACILITIES TRANSITION DELIVERABLES	YES	NO	N/A
1	Provide inventory and location of facility as-built drawings			
2	Provide inventory and location of facility equipment operations & maintenance manuals			
3	Provide all training materials for facility equipment and systems including video training and training manuals			
4	Provide list of all preventive and corrective maintenance vendors used by outgoing vendor (elevator, fire alarm/suppression, HVAC controls, pest management, etc.)			
5	Provide copy of preventive maintenance plan and all facilities maintenance records (corrective and preventive)			
6	Conduct review of all outstanding Work Orders in the Computerized Maintenance Management System (CMMS) Brightly			
7	Provide copy of required life safety system inspection reports			
a	Fire alarm annual inspection and maintenance reports			
b	Fire suppression annual inspection and maintenance reports			
c	Kitchen hood fire suppression annual inspection and maintenance reports			
d	Boiler inspection reports			
e	Backflow prevention device certification and inspection reports			
f	Elevator certificates and inspection/maintenance reports			
8	Food service health and safety inspection report and certificate			
9	Provide all facility keys and overview of keying system and key control measures			
10	Verify username and passcodes for all computer systems with the outgoing operator, such as HVAC controls software, CMMS system, Energy Watchdog, FNC/CRA Request System, etc.			
11	Provide copies of all utility bills and utility agreements			
12	Review list of all outstanding FNC and O&M deficiencies			
	FLEET/TRANSPORTATION TRANSITION DELIVERABLES	YES	NO	N/A
1	Provide vehicle daily logs and maintenance/repair logs			

	SAFETY/HEALTH TRANSITION DELIVERABLES	YES	NO	N/A
1	Center Occupational Safety and Health Plan (see Section 5.1 R15)			
2	Fire safety training, drills, and inspections (see Section 5.1 R17)			
3	Incidents requiring OSHA notification (see Section 5.4 R4)			
4	Hearing Conservation Plan related documents including noise surveys (Section 5.1 R25)			
5	Hazardous Materials Management documentation including inventory, spills, and releases (Section 5.9 R7)			
6	Polychlorinated Biphenyls (PCBs) containing equipment inventory and all related documents (Section 5.13 R2)			
7	Underground Storage Tanks (USTs)/Aboveground Storage Tanks (ASTs) documentation and records (see Section 5.13 R3)			
8	Spill Prevention, Control, and Countermeasure (SPCC) plan (if required) (see Section 5.13 R3)			
9	Lead documentation and records (see Section 5.9 R8)			
10	Asbestos documentation and records (see Section 5.9 R9)			
11	File containing SDSs for chemicals previously used on-center (see Section 5.9 R10)			
12	Mercury documentation and records (see Section 5.13 R4)			
13	Hexavalent Chromium documentation and records (see Section 5.9 R11)			
14	Respirable Crystalline Silica documentation and records (see Section 5.9 R12)			
15	Documentation as required by Safe Drinking Water Act (see Section 5.13 R6) (if center is Water Treatment Plant (WTP) operator)			
16	Influent and Effluent monitoring data and documentation as required by the discharge permit (see Section 5.13 R6) (if center is Waste-Water Treatment Plant (WWTP) operator)			
17	Confined Space Entry Program related documents including inventory (Section 5.1 R22)			
18	Previous five years - OSHA 300A for students (Section 5.9 R18)			
19	Temperature monitoring logs for refrigerators and freezers (Section 5.10 R1)			
SIGN	ATURES			

INCUMBENT (OPERATOR (Prin	ted Name, Title, Signatu	re, Date)	
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