

7.14 Prompt Notification Report Form

For use by the ORPS Manager

- 1) The Facility Manager must e-mail the **prompt notification** of the reportable occurrence to the DOE **and** follow up transmission with a phone call to the DOE HQ OC to ensure receipt of the e-mail.
- 2) The Prompt Notification must clearly state/select the Significance Category (1, R, 2, 3, or 4) and identify the specific reporting criteria associated with the occurrence.
- 3) Prompt Notification to the DOE HQ OC must include all information listed on the attached 2-page form.
- 4) All information should be clear and succinct. Avoid jargon. Uncommon or site/facility-specific abbreviations and acronyms should be fully described.
- 5) DOE Notification E-mail address is: doehqeoc@oem.doe.gov (backup e-mail is: wtchofc2oem.doe.gov);
- 6) Phone number to verify receipt of e-mail notification is: (202) 586-8100. HQ EOC FAX number is still: (202)586-8485;

Name of Facility: **FERMI NATIONAL ACCELERATOR LABORATORY**

Facility Manager or Designee

Title: **Chief Operating Officer**Telephone Number: **(630) 840-6650**

Originator/Transmitter: (usually head of Division/Section issuing report)

Name: _____ Phone: (630) 840- _____

Title: _____

Significance Category: **1 () R () 2 () 3 () 4 ()****LOCATION and DESCRIPTION OF EVENT:**

DISCOVERY DATE: _____ TIME: _____

DAMAGE and CASUALITIES:

IMPACT of EVENT ON OTHER ACTIVITIES AND OPERATIONS:

*FERMI NATIONAL ACCELERATOR LABORATORY***PROTECTIVE ACTIONS TAKEN OR RECOMMENDED:**

WEATHER CONDITIONS AT THE SCENE:

LEVEL OF MEDIA INTEREST AT SCENE/FACILITY/SITE:

OTHER NOTIFICATIONS MADE:

Time	Number	Agency
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signatures

Facility Manager/Designee

Signed by: _____ Date: _____

Typed Name: _____

DOE Facility Representative/Designee

Signed by: _____ Date: _____

Typed Name: _____