

**Naval Hospital Oak Harbor  
Preconstruction Risk Assessment**

**Project Number:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Project Manager:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This risk assessment is used to identify and document required protective measures. This assessment must be performed and adhered to for all facility work and must be filled out, signed and retained in the project file for facility projects.

**Facility Operations and Engineering**

**Y N** Will project require utility or area outages or connections to existing utilities?

*If yes, an approved utility outage must be obtained in advance from the Facility Manager. In some cases, temporary power may need to be provided.*

**Y N** Will project require excavation?

*If yes, an approved excavation permit must be obtained from NASWI Public Works.*

**Y N** Does project involve the installation of any equipment which weighs more than 40 lbs per square feet of bearing area?

*If yes, consult with NASWI Public Works to ensure adequate structural support exists.*

**Y N** Will the project involve cutting of walls or boring into concrete?

*If yes, consult with NASWI Public Works to ensure utilities or structural components are not affected.*

**Y N** Does project involve penetration of a floor, firewall or smoke wall?

*If yes, project scope must include proper fire stopping, including application by qualified installer, labeling and delivery of record drawing and/or inventory list showing the location where fire stopping systems are used. Contact OPMAN for label format.*