U. S. DEPARTMENT OF ENERGY, OFFICE OF SCIENCE INTEGRATED SUPPORT CENTER—CHICAGO OFFICE

NATIONAL ENVIRONMENTAL POLICY ACT (NEPA) ENVIRONMENTAL EVALUATION NOTIFICATION FORM

To be completed by "Applicant," i.e., organization with responsibilities for a "Federal action" involving application to DOE for a permit, license, exemption or allocation, or other similar actions. For assistance with this Form, refer to "Instructions for Preparing ISC-CH F-560, Environmental Evaluation Notification Form."

Solicitation/Award No. (if applicable):		
Organization Name:		
Proposed Action Title:		
Total DOE Funding/Total Funding:		
I. <u>Project Description</u> : (Use explanation pages if additional space is required)		
A. <u>Proposed Project/Action (if applicable, delineate Federally funded/Non-Federally funded portion</u>	<u>ins)</u>	
	Yes	No
B. Would the project proceed without Federal funding?		
If "yes," use explanation page.		

II. <u>Description of Affected Environment</u>: (Use explanation pages if additional space is required)

		DOE NEPA Tracking	Number				
Pre	eliminar	y Questions:					
A.	Is the	e DOE-funded work routinely administrative or <i>entirely</i> advisory or a "paper study?"	Yes	No □			
<i>,</i>			- 1/				
	IT "Y	If "Yes", ensure that the description in Section I reflects this and go directly to Section V.					
B.	Is the	ere any potential whatsoever for: (Provide an explanation for each "Yes" response)					
	1.	Work to be performed outdoors?					
	2.	Major modification of a building interior?		닏			
	3.	Threat of violation of applicable statutory, regulatory, or permit requirements for	Ш	Ш			
	4.	environment, safety, and health? Siting, construction or major expansion of waste treatment, storage, or disposal					
	т.	facilities?					
	5.	Disturbance to hazardous substances, pollutants, or contaminants preexisting in the					
		environment?					
	6.	The presence of any environmentally-sensitive resources?	님	님			
	7.	Any potential whatsoever for high consequence impacts to human health or the environment?	Ш	Ш			
	8.	The work being connected to another existing/proposed activity that could	П				
	0.	potentially create a significant impact?	_	_			
	9.	Nearby past, present, and/or reasonably foreseeable future actions such that collect	ively□				
	4.0	significant impacts could result?	\Box				
	10.	Scientific or public controversy, uncertainty over potential impacts, or conflicts regard resource usage?	ding 🗀				
<u>Po</u> A.	<u>Envir</u>	Environmental Effects: (Provide an explanation for each "Yes" response) conmentally Sensitive Resources: Could the proposed action potentially result in change	jes and/or				
	<u>distu</u>	rbances to any of the following resources?	V	NI.			
	1.	Threatened/Endangered Species and/or Critical Habitats	Yes □	No □			
	2.	Other Protected Species (e.g., Burros, Migratory Birds, Pollinators)	H	H			
	3.	Sensitive Environments (e.g., Tundra/Coral Reefs/Rain Forests)					
	4.	Cultural or Historic Resources					
	5.	Important Farmland					
	6.	Non-Attainment Areas for Ambient Air Quality Standards	님	님			
	7. 8.	Class I Air Quality Control Region Special Sources of Groundwater (e.g. Sole Source Aquifer)	H	H			
	9.	Navigable Air Space	H	H			
	10.	Coastal Zones	Ħ	Ħ			
	11.	Areas with Special National Designation (e.g. National Forests, Parks, Trails)					
	12.	Floodplains and/or Wetlands					
B.		ulated Substances/Activities: Would the proposed action involve any of the following re	gulated Ite	ms or			
	activities?						
	13.						
	4.4	Natural Resource Damage Assessments					
	14.	Natural Resource Damage Assessments Invasive Species or Exotic Organisms					
	15.	Natural Resource Damage Assessments Invasive Species or Exotic Organisms Noxious Weeds					
		Natural Resource Damage Assessments Invasive Species or Exotic Organisms Noxious Weeds Clearing or Excavation greater than one acre or Removal of Trees Governed by					
	15.	Natural Resource Damage Assessments Invasive Species or Exotic Organisms Noxious Weeds					

DOE NEPA Tracking Number

	B. Regulated Substances/Activities: Would the proposed action involve any of the following regulated Items or activities? (continued)			ns or	
		activition	es : (continueu)	Yes	No
		18.	Noise (in excess of regulations)	T es	
		10. 19.	Noise (in excess of regulations)	봄	H
			Asbestos Removal	H	H
		20.	Polychlorinated biphenyls (PCBs)	\vdash	H
		21.	Import, Manufacture, or Processing of Toxic Substances	님	님
		22.	Chemical Storage/Use	님	H
		23.	Pesticide Use	Ц	Ц
		24.	Hazardous, Toxic, or Criteria Pollutant Air Emissions	Ц	Ц
		25.	Liquid Effluents	Ц	
		26.	Spill Prevention/Surface Water Protection	Ш	Ш
		27.	Underground Injection	Ш	
		28.	Hazardous Waste		
		29.	Underground Storage Tanks		
		30.	Radioactive or Radioactive Mixed Waste		
		31.	Radiation Exposure		
		32.	Nanoscale Materials		
		33.	Genetically Engineered Microorganisms/Plants or Synthetic Biology		
		34.	Ozone Depleting Substances		
		35.	Greenhouse Gas Generation/Sustainability		\Box
		36.	Off-Road Vehicles	П	\sqcap
		37.	Biosafety Level 3-4 Laboratory	Ħ	Ħ
		38.	Research on Human Subjects or other Vertebrate Animals	Ħ	Ħ
		39.	Facility footprint exceeds 5,000 Square Feet		
	_	041	Deleverable forms of the Wardel Handward and a characteristics for the fall and a con-		
	C.	Otner i	Relevant Information: Would the proposed action involve the following?	\/	NI-
		40	Diagram estimate Name. December of Minarity, and Jan Laur Income Descriptions	Yes	No
		40.	Disproportionate Nearby Presence of Minority and/or Low Income Populations	\vdash	H
		41.	Existing, Modified, or New Federal/State Permits	\vdash	H
		42.	Involvement of Another Federal Agency (e.g. license/permit, funding, approval)	H	H
		43.	Action in a State with NEPA-type law	Ц	Ц
		44.	Expansion of Public Utilities/Services	\sqcup	Ц
		45.	Depletion of a Non-Renewable Resources	Ц	Ц
		46.	Subject to an Existing Institutional Work Planning and Control Process	Ш	Ш
		47.	Other Pertinent Information Which Could Impact Human Health or the Environment		
V.	App	olicant ce	ertification that to the best of their knowledge all information provided on this form is acc	<u>urate</u> :	
	Das	ام مناطع مع	inclosure contains placeified consisting business or other exponent information that DOF	Yes	No
			isclosure contain: classified, sensitive business, or other exempt information that DOE e obligated to disclose pursuant to the Freedom of Information Act.		
	WUL	ט אונו ווונו	e obligated to disclose pursuant to the Freedom of information Act.		
	A.	Organ	ization Official (Name and Title):		
		Signat	ure: Date:		
		e-mail:			
	B.	Option	al Secondary Approval (Name and Title):		
		Signat	ure: Date:		
		e-mail:	Phone:		

DOE NEPA	Tracking	Number	

Remainder to be completed by DOE

VI. DOE Concurrence/Recommendation/Determination: A. DOE Project Director/Program Manager or Contract/Grant Management Specialist: Yes No Has the Applicant completed this Form correctly? Does an existing generic categorical exclusion apply? If yes, indicate: _____ Name and Title: Signature: _____ Date: _____ DOE NEPA Team Review (if requested): Yes No Is the class of action identified in the DOE NEPA Regulations (Appendices A-D to П Subpart D (10 CFR § 1021))? If yes, specify the class(es) of action: Signature: _____ Date: _____ C. DOE Counsel (if requested): Name and Title: Signature: Date: D. DOE NEPA Compliance Officer: The preceding pages are a record of documentation required under DOE Final NEPA Regulation, 10 CFR § 1021.410. П Action may be categorically excluded from further NEPA review. I have determined that the proposed action meets the requirements for Categorical Exclusion referenced above. Action requires approval by Head of the Field Organization. Recommend preparation of an Environmental Assessment. Action requires approval by Head of the Field Organization or a Secretarial Officer. Recommend preparation of an Environmental Impact Statement. Comments/limitations if any: **NEPA Compliance Officer:** Signature: _____ Date: _____

Optional Additional Narrative: (add additional detail to description to Sections I and II or explanations to responses in Sections III and IV.