



Appendix K - Forms Used in the Painting NESHAP Compliance Assurance Program

NEWPORT NEWS SHIPBUILDING
NESHAP COATING RECEIPT FORM

ID	Item	Description	Data
A.	Coating	Name/Identification:	
B.	Manufacturer	Name:	
C.	Batch ID	Number:	
D.	Date	Received at NNS:	
E.	VOC Content	Concentration, (g/l):	
F.	Person filling out form:	Name:	
	Contractor/Dept.:	Name:	
G.	Coating Category (check one below)	Code Description	VOC Limit, grams/liter coating
	General	<input type="checkbox"/> G1 General use	340
	Specialty	<input type="checkbox"/> S1 Air flask	340
		<input type="checkbox"/> S2 Antenna	530
		<input type="checkbox"/> S3 Antifoulant	400
		<input type="checkbox"/> S4 Heat resistant	420
		<input type="checkbox"/> S5 High-gloss	420
		<input type="checkbox"/> S6 High-temperature	500
		<input type="checkbox"/> S7 Inorganic zinc high-build	340
		<input type="checkbox"/> S8 Military exterior	340
		<input type="checkbox"/> S9 Mist	610
		<input type="checkbox"/> S10 Navigational aids	550
		<input type="checkbox"/> S11 Nonskid	340
		<input type="checkbox"/> S12 Nuclear	420
		<input type="checkbox"/> S13 Organic zinc	360
		<input type="checkbox"/> S14 Pretreatment wash primer	780
		<input type="checkbox"/> S15 Repair/ maintenance of thermoplastics	550
		<input type="checkbox"/> S16 Rubber camouflage	340
		<input type="checkbox"/> S17 Sealant for thermal spray aluminum	610
		<input type="checkbox"/> S18 Special marking	490
		<input type="checkbox"/> S19 Specialty interior	340
		<input type="checkbox"/> S20 Tack coat	610
		<input type="checkbox"/> S21 Undersea weapons systems	340
<input type="checkbox"/> S22 Weld-through precon. primer	650		

Form shall be forwarded, along with VOC Certification from Manufacturer, to EE, O27 in B79-1.



NN 9223 (REV 1)

NNS WAIVER REQUEST FOR THINNING COATINGS

SECTION 1, Waiver Request (To be completed by Contractor requesting waiver)	
Company Name: _____	Contract Coordinator: _____
Phone# _____	Fax# _____
Date: _____	Hull/Location: _____
Coating to be Thinned:	
Manufacturer: _____	Paint ID: _____
Batch# _____	NNPN: _____
Coating Category: _____	VOC Content (g/L or Lb/Gal): _____
Thinner to be Used:	
Manufacturer: _____	Product ID: _____
Batch: _____	Product Density (Lb/Gal): _____
Thinning required for cold weather (less than 40 Deg. F) Application? (Y / N)	

SECTION 2, Waiver Approval (To be completed by Contract Coordinator or O27)	
Maximum Allowable Amount of Thinner (ounces) per Gallon of Coating: _____	
Approver's Name: _____	Approver's Signature: _____

SECTION 3, Thinning Record (To be completed by Contractor)	
Amt. of Coating Applied (Gal): _____	Amt. of Thinner Added (oz.): _____
Supervisor's Name: _____	Supervisor's Signature: _____
Note: Only report the amount of thinner used to thin paint prior to application. Do not report solvents used to clean equipment and surfaces.	

Attach completed form to Paint Usage Form and submit to Contract Coordinator.



Environmental, Health and Safety Contractor Resource Manual

Newport News Shipbuilding

NN 9221 (REV 3)

NEWPORT NEWS SHIPBUILDING PAINT USAGE FORM

Company Name: _____ Actual Applicator: _____

Contract Coordinator: _____ Hull#/Location: _____

Print Name: _____ Signature: _____ Date: _____

Applicator must fill in this table completely. Mark "N/A" if not applicable.

Activity	Item	Description	Value
Coating (Complete before work)	1	Manufacturer Name	
	2	Product ID and color	
	3	Batch Number(s): Part A:	
	4	If used, Part B:	
	5	If used, Part C:	
	6	Coating Volume Issued (Gal)*	
Thinner Addition (ONLY if approved)	7	Manufacturer Name	
	8	Product ID	
	9	Amount of Thinner Added (Gal)*	
Mixing	10	Total Volume Mixed (Gal)*	
Coating Application	11	Actual Temperature (Deg. F)	
	12	Total Coating Volume Applied (Gal)*	

*For small coating volumes, use the following conversions:

- 1 oz = 0.008 gal
- 2 oz = 0.016 gal
- 4 oz = 0.031 gal
- 8 oz = (1 cup) = 0.06 gal
- 16 oz (1 pint) = 0.125 gal
- 32 oz (1 quart) = 0.25 gal
- 64 oz (2 quarts) = 0.5 gal

NOTE: Completed form must be turned in to the Foreman or Contract Coordinator on a daily basis.



PAINT/SOLVENT CONTAINER INTEGRITY INSPECTION FORM

MONTH: _____ YEAR: _____

GENERAL INFORMATION			
DATE:			
TIME:			
CONTRACT OR SHIP:			
LOCATION AT NNS:			
COMPANY NAME OR DEPT:			
PERSON INSPECTING:			
CONTRACT COORDINATOR /FOREMAN:			
INSPECTION RESULTS:			YES/NO
1) Are all containers, tanks, vats, drums, and piping systems housing VOC-containing material free of cracks, holes, and other defects?			
2) Are all containers, tanks, vats, drums, and piping systems housing VOC-containing materials closed at all times, unless material is being added to or removed from them?			
3) Is the handling and transfer of VOC-containing materials to and from containers, tanks, vats, drums, and piping systems is conducted in a manner that minimizes spills.			
If you answered NO to any of the questions above, fill in the section below:			
#	DESCRIPTION OF PROBLEM	CORRECTIVE ACTION TAKEN	DATE
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			



NOTE: Contractor/DEPT. shall submit form to Contract Coordinator/Foreman by the 3rd working day of the month following the month during which the inspection was conducted. Contract Coordinators/Foremen shall submit forms to EE (B79-1) by the 5th working of the month following the month during which the inspection was conducted.