

U. S. DEPARTMENT OF ENERGY, OFFICE OF SCIENCE
NATIONAL ENVIRONMENTAL POLICY ACT (NEPA)
ENVIRONMENTAL EVALUATION NOTIFICATION

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, refer to "Instructions for Preparing Environmental Evaluation Notification."

Solicitation/Award No. (if applicable): _____

Organization Name: _____

Proposed Action Title: _____

Total DOE Funding/Total Funding: _____

I. Project Description: (Use explanation pages if additional space is required)

A. Proposed Project/Action (if applicable, delineate Federally funded/Non-Federally funded portions)

B. Would the project proceed without Federal funding? Yes No

If "yes," use explanation page.

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

III. Preliminary Questions:

Yes No

- A.
- Is the DOE-funded work routinely administrative or *entirely* advisory or a “paper study?”

If “Yes”, ensure that the description in Section I reflects this and go directly to Section V.

- B.
- Is there any potential whatsoever for: (*Provide an explanation for each “Yes” response*)

1. Work to be performed outdoors?
2. Major modification of a building facade or interior?
3. Threat of violation of applicable statutory, regulatory, or permit requirements for environment, safety, and health?
4. Siting, construction or major expansion of waste treatment, storage, or disposal facilities?
5. Disturbance to hazardous substances, pollutants, or contaminants preexisting in the environment?
6. The presence of any environmentally-sensitive resources?
7. Any potential whatsoever for high consequence impacts to human health or the environment?
8. The work being connected to another existing/proposed activity that could potentially create a significant impact?
9. Nearby past, present, and/or reasonably foreseeable future actions such that collectively significant impacts could result?
10. Scientific or public controversy, uncertainty over potential impacts, or conflicts regarding resource usage?

If “No” to ALL Section III.B. questions, go directly to Section V.IV. Potential Environmental Effects: (*Provide an explanation for each “Yes” response*)

- A.
- Environmentally Sensitive Resources: Could the proposed action potentially result in changes and/or disturbances to any of the following resources?

Yes No

1. Threatened/Endangered Species and/or Critical Habitats
2. Other Protected Species (e.g., Burros, Migratory Birds, Pollinators)
3. Tundra, Coral Reefs, or Rain Forests
4. Cultural or Historic Resources
5. Important Farmland
6. Non-Attainment Areas for Ambient Air Quality Standards
7. Class I Air Quality Control Region
8. Special Sources of Groundwater (e.g., Sole Source Aquifer)
9. Navigable Air Space
10. Coastal Zones
11. Areas with Special National Designation (e.g. National Forests, Parks, Trails)
12. Floodplains and/or Wetlands

- B.
- Regulated Substances/Activities: Would the proposed action involve any of the following regulated Items or activities?

13. Natural Resource Damage Assessments
14. Invasive Species or Exotic Organisms
15. Noxious Weeds
16. Clearing or Excavation greater than one acre or Removal of Trees Governed by Local Requirement
17. Dredge or Fill (under Clean Water Act, Section 404, greater than one acre)

B. Regulated Substances/Activities: Would the proposed action involve any of the following regulated Items or activities? (continued)

- | | Yes | No |
|---|-----|----|
| 18. Noise (in excess of regulations) | | |
| 19. Asbestos Removal | | |
| 20. Polychlorinated biphenyls (PCBs) | | |
| 21. Import, Manufacture, or Processing of Toxic Substances | | |
| 22. Chemical Storage/Use Including Emerging Chemicals (e.g., PFAS) | | |
| 23. Pesticide Use | | |
| 24. Hazardous, Toxic, or Criteria Pollutant Air Emissions | | |
| 25. Liquid Effluents | | |
| 26. Spill Prevention/Surface Water Protection | | |
| 27. Underground Injection | | |
| 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 | | |
| 36. Off-Road Vehicles | | |
| 37. Biosafety Level 3-4 Laboratory | | |
| 38. Research on Human Subjects or other Vertebrate Animals | | |
| 39. Facility footprint exceeds 5,000 Square Feet | | |

C. Other Relevant Information: Would the proposed action involve the following?

- | | Yes | No |
|--|-----|----|
| 40. Disproportionate Nearby Presence of Minority and/or Low Income Populations | | |
| 41. Existing, Modified, or New Federal/State Permits | | |
| 42. Involvement of Another Federal Agency (e.g. license/permit, funding, approval) | | |
| 43. Action in a State with NEPA-type law | | |
| 44. Action Would Require Expansion of Public Utilities/Services | | |
| 45. Depletion of a Non-Renewable Resources | | |
| 46. Subject to an Existing Institutional Work Planning and Control Process | | |
| 47. Other Pertinent Information Which Could Impact Human Health or the Environment | | |

V. Applicant certification that to the best of their knowledge all information provided on this Notification is accurate:

Does this disclosure contain: classified, sensitive business, or other exempt information that DOE would not be obligated to disclose pursuant to the Freedom of Information Act.

	Yes	No
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A. Organization Official (Name and Title): _____

Signature: _____ Date: _____

e-mail: _____ Phone: _____

B. Optional Secondary Approval (Name and Title): _____

Signature: _____ Date: _____

e-mail: _____ Phone: _____

Remainder to be completed by DOE

VI. DOE Concurrence/Recommendation/Determination:

A. DOE Project Director/Program Manager or Contract/Grant Management Specialist:

Has the Applicant completed this Notification correctly?

Yes

No

Does an existing generic categorical exclusion apply?

If yes, indicate: _____

Name and Title: _____

Signature: _____ Date: _____

B. DOE NEPA Team Review (if requested):

Is the class of action identified in the DOE NEPA Regulations (Appendices A-D to Subpart D (10 CFR § 1021))?

Yes

No

If yes, specify the class(es) of action: _____

Name and Title: _____

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.

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 the SC Director of Field Operations. Recommend preparation of an Environmental Impact Statement.

Comments/limitations if any:

NEPA Compliance Officer:

Name: _____

Signature: _____ Date: _____

Optional Additional Narrative: (add additional detail to description to Sections I and II or explanations to responses in Sections 3 and 4.

