

The University of Alabama in Huntsville
Office of Environmental Health and Safety
PROJECT REGISTRATION

Instructions: Contact the OEHS at 824-2171 for any questions associated with this registration. Submit a completed and signed hard copy to the Office of Environmental Health & Safety at JRC 151. A notification of receipt will be sent to the address indicated in Section I.

I Name (Principal Investigator/Title): _____

Email address: _____

Title of Project: _____

Campus/Business Phone No.: _____

Location of Project (Building and Room): _____

UAH Working Dept Center or Institute: _____

Is this an addition or change to original form? **Yes** **No**

Please indicate original project title and date: _____

Personnel involved in project: _____

II Instructions: Respond to all questions in this section by checking yes, no, or NA and completing the appropriate information. A chemical inventory must be provided with this form if answering yes to numbers 2 - 6. The inventory must include the chemical name, manufacturer and chemical container size.

Does this project involve:
1. Radioisotopes or x-ray generating equipment **Yes** **No**

List the radioisotopes and their chemical form to be used and or the x-ray generating instrumentation utilized:

How will the radioisotope or equipment be used: _____

Has the Radiation Safety Committee approved this use? **Yes** **No**

If yes, date approved: _____

Authorized User: _____ Phone No.: _____

2. Provide a list of carcinogenic/mutagenic/teratogenic chemicals that will be used or generated: **NA**

3. Provide a list of the highly toxic chemicals that will be used or generated: **NA**

4. Provide a list of toxins or toxic products that will be used or generated: **NA**

5. Provide a list of pressurized gases that will be used or generated: **NA**

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6. Provide a list of other (not previously listed) hazardous chemicals that will be used or generated: NA

7. List the classification, type and intensity of the laser(s) that will be used or produced: NA

8. List microbial and viral agents or their products that will be used or generated: NA

9. Will select agents or high consequence livestock pathogens or toxins be used? Yes No

10. Will human blood, body fluids, tissues, or human subjects be utilized in this project? Yes No

11. Recombinant DNA or RNA molecules Yes No

The host/vector system in this project is: _____

This project is exempt from NIH guidelines as per section _____.

A Recombinant DNA Registration Form must be completed when research is not exempt from NIH guidelines.

12. Animal subjects (species) _____ Yes No
Will any of the agents listed on this form be administered to animals? Yes No

If yes, answer the following:

Agents administered: _____

Route of Administration: _____

Building and room procedure will take place: _____

Animal housing location: _____

Precautions used to protect personnel and animals: _____

Animal disposal method/location: _____

Bedding disposal method/location: _____

III All persons working in the laboratory will receive relevant safety training. Yes No

Safety procedures and guidance manuals are available from the Office of Environmental Health & Safety, Johnson Research Center 151, 824-2171.

The signature of the Principal Investigator (PI) indicates that he/she is familiar with UAHuntsville safety policies and procedures relevant to the nature of work resulting from the listed proposal/project. Additionally, the PI's signature indicates that safety training, practices, and procedures are incorporated into laboratory routines.

Date: _____ **Signature:** _____