

Instructions:

Please submit this form to the Office of Environmental Health and Safety (OEHS) at hu0003@uah.edu or PPB 113B. This form will enable OEHS to document the specific hazards present in the new laboratory. Once the form has been received, an OEHS representative will schedule an on-site visit to meet with the new Principal Investigator and discuss overall research safety compliance. This meeting also serves as an opportunity for the new researchers to learn where to access the required safety resources, and ask questions regarding the safety policies, procedures and training programs that are applicable for setting up the new lab.

Principal Investigator: _____ Building/Room: _____

Department: _____ Building/Room(s): _____

Phone #: _____ E-mail: _____

Attach a Brief Description of Research / Work to be conducted.

Anticipated start date: _____

Please provide a list of all hazardous materials that will be used in the laboratory and any additional hazardous materials that you anticipate will be used in the near future.

| | | | |
|--|--|---|---|
| Biological Agents <i>(check column 1 and 3 if present; specify in column 2 and 4)</i> | | | |
| <input type="checkbox"/> recombinant DNA | | <input type="checkbox"/> human-derived materials | |
| <input type="checkbox"/> bacteria | | <input type="checkbox"/> biological toxins | |
| <input type="checkbox"/> viruses | | <input type="checkbox"/> lab animals | |
| <input type="checkbox"/> fungal agents | | <input type="checkbox"/> Other biological materials | |
| Chemicals <i>(check if present)</i> | | | |
| <input type="checkbox"/> acids | <input type="checkbox"/> flammable liquids | <input type="checkbox"/> non-flammable gas | <input type="checkbox"/> cryogen |
| <input type="checkbox"/> bases | <input type="checkbox"/> flammable solid | <input type="checkbox"/> flammable gas | <input type="checkbox"/> strong oxidizers |
| <input type="checkbox"/> acutely toxic | <input type="checkbox"/> carcinogen | <input type="checkbox"/> peroxide formers | <input type="checkbox"/> other (specify) |
| Other Hazardous Materials and Equipment <i>(check if present)</i> | | | |
| <input type="checkbox"/> Nanomaterials | <input type="checkbox"/> DEA Controlled | <input type="checkbox"/> Radioisotopes | <input type="checkbox"/> Lasers, X-rays |
| <input type="checkbox"/> High magnetic field | <input type="checkbox"/> Pressurized systems | <input type="checkbox"/> Other (list) | |