ENVIRONMENTAL HEALTH AND SAFETY
CHEMICAL USAGE QUESTIONNAIRE

Chemical Name	CAS #	Date:

Training taken (i.e. annual lab safety, bloodborne pathogens):

Emergency Phone Number: 475-3333	Requestor:	Phone:	Dept. Name:	Rm #:	Floor:	Bldg:	Hood:

Number of Potential Users:
 (list names)

Physical State of Chemical:	Amount Used per Procedure:
Storage of Chemical:	Amount of Chemical Stored:
Frequency of Use:	Temperature of Procedure: **Ambient Temp**

1. How is the chemical used in the laboratory? (details of the process)

2. What are the handling and disposal procedures?

3. Is the chemical used in a posted regulated area in the lab? (signage and MSDS/SDS)	Yes No	Comment, if needed.

4. What personal protective equipment (PPE) is used for this operation?

Gloves:	Eye Protection:	Protective clothing:	Respirators:
Nitrile Neoprene Latex N. rubber Other:	Face shield Goggles Glasses w/ side shields Other:	Lab Coats Aprons Tyvek Suits Other:	Supplied Air Full face Half face Disposable Other:

5. What engineering controls are used?

Exhaust Type:	Exhaust operational:	Date of Certification	Flow Rate:
Certified hood	Yes No		
Balance enclosure	Yes No		
Local exhaust	Yes No		

Is emergency safety equipment in vicinity?
Where is it located?
(i.e. eyewash, safety shower, fire extinguisher)

6. Are there applicable buddy system requirements? (if yes, indicate tier)

Yes No	Comments:
Tier 1 _____ Tier 2 _____ Tier 3 _____ Tier 4 _____	

*RIT EH&S must be notified of any changes that would increase employee exposure to these chemical(s)

This section to be completed by RIT EH&S:

Is representative exposure monitoring data available?	YES		NO	

Rational:

Anticipate Exposure:	Comments:
< AL	
>AL <PEL	
>PEL/TLV	
> STEL	
>Ceiling	

Approved by CHO:	Yes	No	By:		Date:	