

ATTENTION

Emergency Information - Unattended Operations

Contact Name: _____

Contact Phone Number: _____

Date: _____

Start time: _____ End time: _____

Identity and Quantity of Chemical or other Hazardous Materials:

Compressed Gases:

Hazards:(circle all that apply)

Corrosive

Toxic

Reactive

Flammable

Pressurized

Water Reactive

Electrical

In Case of Emergency Shut off:

Electricity

Vacuum

Gas Source

Water Source

Hot Plate/Ignition Sources

Instructions: This form should be filled in complete and attached to or near the laboratory hood or other appropriate location whenever a process is left unattended. Assume the worst-case scenario when determining which hazards apply.