

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)

In Case of Emergency Shut off:

Corrosive

Electricity

Toxic

Vacuum

Reactive

Gas Source

Flammable

Water Source

Pressurized

Hot Plate/Ignition Sources

Water Reactive

Electrical

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.