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: ________________________________

Intended Temperature: ________________________________

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.