

**CHEMICAL REQUISITION REVIEW SHEET**

**•THIS SPACE TO BE FILLED OUT BY REQUISITIONER•**

Requested by: Jim Chrzanowski Ext.: 3051 Dept.: NCSX Date: 8/9/02

Type of Purchase: Credit Card Requisition Number: \_\_\_\_\_

Item trade name and description:  
**Epoxy system CTD-101K**

Number of Containers: 3 Size of Containers: 10 gallons total

How will this item be used?:  
**R&D for NCSX Coil systems**

Where will this item be used and/or stored? (Include room and cabinet number if applicable):  
**RESA building**

Will this item be used in a Radiologically Controlled Area (RCA)?: No

Do you have an MSDS for this product?: Yes List MSDS Number (upper right corner): \_\_\_\_\_

Which Right-to-Know Information Station do you use? (List the Station R-T-K number): \_\_\_\_\_

**•FORWARD TO INDUSTRIAL HYGIENE•**

**•THIS SPACE TO BE FILLED OUT BY INDUSTRIAL HYGIENE•**  
**The Following Information Applies Only To The Use Specified Above**

**HAZARDS**

- Flammable
- Corrosive
- Reactive
- High Toxicity
- Special Hazard

**PERSONAL PROTECTIVE EQUIPMENT**

- Apron
- Face shield
- Coveralls
- Gloves
- Safety Glasses
- Chemical splash goggles
- Respirator
- Other

**SPECIAL REQUIREMENTS**

- Air Monitoring
- Training
- Medical Surveillance
- Other

**Contact Industrial Hygiene, Ext. 2533 Before Use**

Comments:

**This product has a corrosive and a suspect carcinogen in the components. Goggles, rubber gloves and coveralls must be worn when handling. This product must be used with local exhaust ventilation. All users must be informed on the contents of this form and the MSDS.**

APPROVED for use Specified     APPROVED ONLY with Requirements     REORDER APPROVED IF no changes     NOT APPROVED (see Comments above)

Signature:  C-942 8/9/02  
(Cognizant Person) Approval Number Date  
**INDUSTRIAL HYGIENE**

**•THIS SPACE TO BE FILLED OUT BY PROCUREMENT•**  
(If Applicable)

Requisition No. \_\_\_\_\_ Purchase Order No. \_\_\_\_\_

Name and phone number of supplier: \_\_\_\_\_