

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-528

Number of Containers: 2 Size of Containers: 1 gallon

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: [Signature] C-941 Approval Number 8/9/02 Date

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

Requisition No. Purchase Order No.

Name and phone number of supplier: