

**ATTACHMENT 3 – Hazardous Materials Requiring Approval Form**

Department	Identify the department name
Building/Room	Identify the room(s) where the chemical(s) will be used and stored
Chemical	Identify the common chemical name
CAS #	Identify the numeric CAS Number as detailed in Section 3 on the Safety Data Sheet (SDS)
Quantity	Identify how much of the desired material is being request

Is the desired chemical/item listed above, identified as a consumer product?

<input type="checkbox"/> No	<input type="checkbox"/> Yes
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Using the Safety Data Sheet (SDS) for the desired chemical/item listed above, does **Section 2, 3, 13 and/or 15** identify the material as a Hazardous Material?

<input type="checkbox"/> No	<input type="checkbox"/> Yes
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\*If No, there is no need to fill out the rest of the form

Is the desired chemical/item identified as a Hazardous Material on any of the links listed on Attachment 2?

1 <input type="checkbox"/> Hazardous Material is not listed in any Category requiring EH&S approval	6 <input type="checkbox"/> CARCINOGENS / POTENTIAL HUMAN CARCINOGENS
2 <input type="checkbox"/> RADIOACTIVE MATERIALS	7 <input type="checkbox"/> EXTREMELY HAZARDOUS SUBSTANCES
3 <input type="checkbox"/> DEA CONTROLLED SUBSTANCES	8 <input type="checkbox"/> PYROPHORIC MATERIALS AND COMPOUNDS
4 <input type="checkbox"/> REGULATED BIOLOGICAL MATERIALS	9 <input type="checkbox"/> PEROXIDES OR PEROXIDE FORMING MATERIALS
5 <input type="checkbox"/> EXPLOSIVES	10 <input type="checkbox"/> SHOCK SENSITIVE MATERIALS AND COMPOUNDS

As stated in the Hazardous Material Procurement Program, you as an Authorized Requester are stating that the end users of the requested hazardous material, have been trained in the following:

- \* Proper selection, usage and disposal of required Personal Protective Equipment (PPE) as indicated on the SDS.
- \* Safe handling, use, and storage of the hazardous material
- \* Proper disposal of the hazardous material and it waste products (e.g., Hazardous Waste Generation and Disposal training)
- \* Adding/Removing the chemical(s) to the Departmental or faculty Chemical Inventory using RSS

Department Authorized Purchaser

Signature	Department
Name	Date

Environmental Health and Safety Approval (Required for all purchases)

Signature	Expires on:
Name	