

Chemical Hygiene Permit Prior Approval of Hazardous Laboratory Activities

Requestor:

Date:

Location where hazardous activity is to occur:

Reason for Request:

Off-Hours Work

Sole Occupancy of Building

Hazardous Work

Unattended Operations

Other:

Description of activity to be performed:

Hazards associated with activity:

Special precautions to be implemented:

Approved

Rejected

(Lab Supervisor Signature)

(Date)

(Department Chair Signature)

(Date)

Permit Expiration Date