

 Environmental, Health, and Safety	Document Owner: EHS	Release Date: 3/29/07
Document Title: MacroTechnology Works -- Chemical Approval Form		Document Rev: 02.1

NEW CHEMICAL MATERIAL REQUEST

Requestor(s) Name: _____ Requestor(s) Phone Number: _____ Date: _____

Name of new material being requested (attach copy of MSDS and send electronic copy of MSDS to dave.yost@asu.edu):

Initial quantity of the material to be ordered, and anticipated maximum quantity to be on-site at any time:

Detailed description of the material being requested and its intended use:

Describe how you will dispose of used or waste material:

Estimated start date for use of material and term of usage (**NOTE:** material can not be delivered or used until approval is obtained):

Where is this material to be used (location on the site, room number, etc.)? _____

How is this material to be used? (Check all that apply) R&D Production Maintenance & Operations

Is there any new capital equipment required to safely use this new material? Yes No

If yes, describe the new equipment:

Will this new material require modification of existing equipment and/or facilities (consider scrubbers, ventilation, piping, spill or hazardous material detection, toxic gas monitoring, waste handling, chemical delivery & storage, etc.)? Yes No

If yes, please describe the modifications required in detail:

Signature of Requestor

Signature of Principal Investigator, Fab/Lab Director, Manager, or Supervisor

NOTE: The manager of every department and lab must ensure that copies of all MSDS are available for all personnel.

NEW MATERIAL REQUEST TRACKING

Date of receipt by EHS/review committee: _____ Date of review: _____

EHS/committee response: _____

Request Disposition (circle one): Approved Rejected Rejected, but re-consideration possible

Signature of EHS Representative or Review Committee Chairman: _____