

PI/Supervisor:

chemicalsafety@okstate.edu

Building: _____ Room #: ____

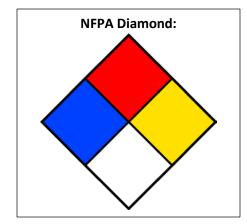
Department: _____ Lab Type: _____ Date: ____

Number of Lab Entry Doors:

The emergency contact information card is also required. You can get it here.

Where would you like the placards sent?

CAUTION: The Selected Hazards May Be Present







Gas Cylinders



Acutely Toxic



Exclamation Mark



Flammables



Corrosives



Health Hazard



Oxidizers



Other Hazards:

High Pressure Equipment

High Voltage > 480 Volts

Natural Gas

Air/Water Reactive

Hazardous Waste Storage

Cryogenic Materials

Bloodborne Pathogens

Other _____

PPE Requirements:

Safety Glasses

Safety Goggles

Gloves

Closed-toed Shoes

Boots

Apron

Lab Coat

Respirator (Type:_____)