

CHEMICAL PRE-PURCHASE CHECKLIST

Microsoft Word 2010 document

CHEMICAL NAME	Supervisor:	
	Laboratory/Area:	
	Quantity:	
	Date:	

Is a safer alternative available?		Is this a Schedule 5.3, 5.4 or 5.5 substance?		Is a Poisons Permit required?		Is the substance within storage limits?		Has a Risk Assessment been completed?	
Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Exposure Limits		Principle Health Hazards
TWA (ppm or mg/m ³)		
STEL (ppm or mg/m ³)		

Note: TWA = Time Weighted Average and STEL = Short Term Exposure Limit

Precautions For Use	
Engineering Controls	
Personal Protection	
Safe Work Procedure	

Safe Handling and Storage	
Reactivity	
Storage and Handling	
Spills and Exposure	
Disposal	

Fire and Explosion	
Extinguishing Media	
Fire Fighting	
Fire and Explosion Hazard	