



DEPARTMENT OF ENVIRONMENTAL HEALTH & SAFETY
 Chemical Safety Office
 1200 Carothers
 Tallahassee, Florida 32306-4481
 Phone: 850.644.7682 Fax: 850.644.8842 Web: www.safety.fsu.edu

HAZARDOUS MATERIALS REGISTRATION UPDATE

Researcher information

Principal Investigator	Position title	Department
Building	Room	Campus phone
		Email address

Research Facility Information

Chemical Inventory

Federal and state laws require that inventories of laboratory chemicals to be maintained. It is important that the chemical inventories be comprehensive and accurate. Please attach an inventory listing of chemicals in your laboratory. A *Chemical Inventory Worksheet* is available at our website at www.safety.fsu.edu under the [Forms and downloads](#) section

Safety Information and Training

Have all individuals who are working in the laboratory reviewed the chemical safety information on our website at www.safety.fsu.edu/chem.htm? If no, be sure that all individuals working in the laboratory review the information. Yes No

Have all individuals who are working in the laboratory attended the safety training class? If no, contact the Chemical Safety Office to schedule training class. Yes No

Emergency Spill Procedures

Is there a written spill procedure posted at the site for chemical spills? If no, contact the Chemical Safety Office for assistance. Yes No

Are emergency spill supplies available? If no, contact the Chemical Safety Office for assistance on assembling supplies. Yes No

Have personnel been trained in emergency spill procedures? If no, contact the Chemical Safety Office to schedule a training class. Yes No

Hazardous Materials Use Areas

Indicate room number(s) for the following:

Fume Hood _____	Flammable Storage Cabinets _____	Chemical Storage _____	Other Hazardous Materials Area _____
Refrigerators _____	Compressed Gas Cylinders _____	Freezer _____	Other Hazardous Materials Area _____

Disposal Methods

Identify any of the following anticipated wastes. Please note all waste disposal methods must be approved through the Chemical Safety Office and all waste containers must be labeled.

<input type="checkbox"/> Halogenated Waste	Annual Amount _____	Gallons	<input type="checkbox"/> Solid Waste	Annual Amount _____	Pounds
<input type="checkbox"/> Non-Halogenated Waste	Annual Amount _____	Gallons	<input type="checkbox"/> Other Materials	Annual Amount _____	

Principal Investigator Acknowledgement

I understand that I will be required to comply with the federal, state and local regulations that pertain to research conducted in my laboratory. I accept responsibility for providing, through scheduling or teaching, safety training to all personnel involved in my laboratory. The information here is accurate and complete.

Name (please print)	Signature	Date
---------------------	-----------	------