

Environmental Health & Safety Report

- Submit via campus mail (5132) or fax (x-8659). Include copy of *abstract or scope of work*.
- Consult x-4899, or x-3588 with questions.
- Web-version of this form has hot links and allows typed responses:
http://ehs.ucsb.edu/units/labsfty/labrsc/lscn_grants.html

ORBIT Record # _____	Department: _____
Granting Agency: _____	Principal Investigator: _____

Are/will any of the following materials or processes be used? (Check YES or NO)

- YES NO 1. Per Cal-OSHA and Cal-EPA, **documented training** of chemical workers is required on fume hood use, waste disposal, fire extinguishers, MSDS, etc. EH&S offers live and web-based training that meet these requirements. Have all your lab workers completed this training? If "NO", then [click here](#), or call x-4899, for instructions.
- YES NO 2. Toxic or pyrophoric compressed gases
Specify gas(es): _____
- YES NO 3. High pressure reactors/vessels (excluding gas cylinders)
- YES NO 4. Biological Issues (check those that apply)
 Recombinant DNA
 Infectious agents (Biosafety Level 2 or above)
 Select Agents (listed on the HHS select agent list)
 Human or primate tissue or fluids.
 Biosafety Authorization #: _____
- YES NO 5. Radioactive materials, or X-ray producing machines
Radiation Authorization #: _____
- YES NO 6. Non-ionizing radiation (laser, UV, microwave)
Specify type, power, wavelength, pulse frequency: _____
- YES NO 7. Small boat operations, research divers, diving equipment, (e.g., SCUBA, surface-supplied).
Specify equipment and diving locations: _____
- YES NO 8. Respirators (e.g. air purifying respirator)
- YES NO 9. Engineered nanoparticles/materials (particles with a dimension less than 100 nanometers)
- YES NO 10. All PIs using chemicals are required by Cal-OSHA to develop a lab-specific *Chemical Hygiene Plan* (CHP) and then document the training of their workers on it. Has your lab satisfied this requirement? If no chemical usage, check here: _____
If "NO" at left, then for instructions on completing CHP [click here](#), or call x-4899.
By signing below, the PI agrees to complete their CHP within 30 days.

(Required) Signature of Principal Investigator: _____ Date: _____