

# NOTICE

**The following hazards  
are present in this area:**

**Building:**

**Room:**

<input type="checkbox"/>	Ionizing radiation	<input type="checkbox"/>	Carcinogen	<input type="checkbox"/>	Moving machinery
<input type="checkbox"/>	Radioactive Materials Mgmt. Area	<input type="checkbox"/>	Acute toxic	<input type="checkbox"/>	Electrical source
<input type="checkbox"/>	Flammables	<input type="checkbox"/>	Reproductive hazardous chemical	<input type="checkbox"/>	High pressure
<input type="checkbox"/>	Reactive chemicals	<input type="checkbox"/>	High noise	<input type="checkbox"/>	Explosives
<input type="checkbox"/>	Nonionizing radiation	<input type="checkbox"/>	Biohazards	<input type="checkbox"/>	Other (list): _____ _____ _____

**Hazards & Precautions:**

<input type="checkbox"/>	Eye protection required	<input type="checkbox"/>	No eating, drinking or smoking	<input type="checkbox"/>	Other precautions _____ _____ _____
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Additional guidance about precautions is found in the following safety plans/documentation.

Applicable OSHA standard:  Chemical Hygiene  Hazard Communication

Material Safety Data Sheets are available at ext. 4-4404, and through the LLNL MSDS website.

**Additional information can be obtained from:**

Responsible Individual:	Page:	Ext:	Home phone:
Facility point of contact:	Page:	Ext:	Home phone:
ES&H Team representative:	Page:	Ext:	
HWM technician:	Page:	Ext:	Date prepared:

For off-shift support call ext. 2-7595