

HAZARD IDENTIFICATION CHECKLIST

JLab Proposal No.: _____

Date : _____

(For JLab U/I Liaison Office use only.)

Check all items for which there is an anticipated need.

Cryogenics _____ beamline magnets _____ analysis magnets _____ target type: _____ flow rate: _____ capacity: _____	Electrical Equipment _____ cryo/electrical devices _____ capacitor banks _____ high voltage _____ exposed equipment	Radioactive/Hazardous Materials List any radioactive or hazardous/toxic materials planned for use: _____ _____ _____ _____
Pressure Vessels _____ inside diameter _____ operating pressure _____ window material _____ window thickness	Flammable Gas or Liquids type: _____ flow rate: _____ capacity: _____ Drift Chambers type: _____ flow rate: _____ capacity: _____	Other Target Materials _____ Beryllium (Be) _____ Lithium (Li) _____ Mercury (Hg) _____ Lead (Pb) _____ Tungsten (W) _____ Uranium (U) _____ Other (list below) _____ _____
Special Target Materials _____ * Helium (³ He) _____ Deuterium		
Vacuum Vessels _____ inside diameter _____ operating pressure _____ window material _____ window thickness	Radioactive Sources _____ permanent installation _____ temporary use type: _____ strength: _____	Large Mech. Structure/System _____ lifting devices _____ motion controllers _____ scaffolding or _____ elevated platforms
Lasers type: _____ wattage: _____ class: _____ Installation: _____ permanent _____ temporary Use: _____ calibration _____ alignment	Hazardous Materials _____ cyanide plating materials _____ scintillation oil (from) _____ PCBs _____ methane _____ TMAE _____ TEA _____ photographic developers _____ other (list below) _____ _____	General Experiment Class: _____ Base Equipment _____ Temp. Mod. to Base Equip. _____ Permanent Mod. to _____ Base Equipment _____ Major New Apparatus Other: _____ _____