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| **Room Hazard Details as of:**  | Click here to enter a date. |

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| **Building and** **Room Number** |  | **Local Room** **Name** |  | **Department &****Division** |  |

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| **Hazard** | **Warning** | **Hazard Description** | **Hazard Location** |
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| **Additional Hazard / Emergency Information** |
| Click here to provide brief details of any other significant safety hazards or information that people entering the room in an emergency need to know about. |
|  |  |  |  |  |
| **Power and Gas Isolation Details** |
| Click here to provide brief details of how to isolate the electrical, mains gas and any compressed gas supplies to the room. This information is for people to use in the event of an emergency. |
|  |  |  |  |  |
| **Primary Contacts for Room** |
| **Name** | **Direct Dial** | **Mobile / Out of Hours** | **Location (Building & Room No.)** |
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**Select the emergency details for your site from the options on this drop down list**

|  |  |
| --- | --- |
| **Document Owner:**  |  |

Cut and paste the relevant Hazard and Warning from this table (**DO NOT** Print this page)

|  |  |  |  |
| --- | --- | --- | --- |
| **Hazard** | **Warning** | **Hazard** | **Warning** |
|  | **Corrosive Material** |  | **Oxidant Material** |
|  | **Explosive Material** |  | **Toxic Material** |
|  | **Flammable Material or High Temperature\*** |  | **Low Temperature or Cryogenic material\*** |
|  | **Ionising Radiation** |  | **Non-ionising Radiation** |
|  | **Laser Beam** |  | **Strong Magnetic Field** |
|  | **Noise** |  | **Danger: Electricity** |
|  | **Biological Risk** |  | **General Danger** |
|  | **Gas under pressure** |  | **Asphyxiation Risk** |

\* Select description that applies