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|  | **COSHH Assessment Form** |
| Product name & Manufacturer | **Two Part Polyurethane Foam Part A**  |
| Stored | **Props COSHH Cupboard** |
| Storage Instructions | **Restricted access****Keep away from heat, direct sunlight and sources of ignition****Keep below 40ºc** |
| Fire Fighting Measures | **Appropriate measures for the environment**  |
| Process/Appearance | **Clear,Viscous Liquid** |
| Where is Product used | **Props Department** |
| When is product used | **During working hours 07:00-22:00 Mon-Sun** |
| Identify the persons at risk: | Employees**X** | Contractors  | Students**X** |
| Classification *(state the category of danger)* |
| Extremely FlammableToxic**X**IrritantVery ToxicHighly FlammableSensitisingFlammableBiologicalCorrosiveEnvironmentalOxidisingHarmful |
| Hazard Type |
| **X**  Gas Vapour Mist Fume Dust Liquid Solid Other (State) |
| Route of Exposure**X** |
| **X** Inhalation Skin Eyes Ingestion Other (State)  |
| Control Measures: *(for example extraction, ventilation, training, supervision). Include special measures for vulnerable groups, such as disabled people and pregnant workers.* *Take account of those substances that are produced from activities undertaken by another employer’s employees.*  |
| See Safety Data sheet for more information |
| Personal Protective Equipment*(state type and standard)* |
| Dust mask |  | Visor |  |
| **X**Respirator |  | Goggles |  |
| **X**Gloves |  | Overalls |  |
| Footwear |  | Other |  |
| First Aid Measures |
| **X**Ingestion | Rinse mouth throughly, do not induce vomiting seek medical attention |
| **X**Skin | Rinse with plenty of water, seek medical advice |
| **X**Eyes | Rinse with water for 15 mins, seek medical attention |
| **X**Inhalation | Remove to fresh air, seek medical advice |
| Is exposure adequately controlled?  | **X**YesNo |

Assessed by: **Elliott Barnes** Position: **Facilities Manager** Date: **29.7.11**