PRODUCT / CHEMICAL USAGE RECORD

2012 - 2013

First Name_____ Last Name_____ SS #_____
(last four digits)

(Home) Street Address_____

City_____ Zip Code_____

Position _____ Supervisor _____

Location/Program _____ Room # _____

The following is a listing of materials/compounds/products which I use or handle in my work area which contain health or hazard warnings or which I believe may have toxic properties: **Please edit the information below, print additional products used and delete others no longer used. Return to your supervisor.** *(Use page 2 of this form if you need more space)* If you do not use hazardous substances write "none" in the space below and return to your supervisor.

Product Name *(ex. Red Enamel Spray Paint #13-5467)*	**Manufacturer** *(ex. Rust-Oleum Inc.)*
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

_____ _____
Employee Signature Date

_____ _____
Supervisor's Review Date

EMPLOYEE EXPOSURE RECORD

2012 - 2013

First Name_____ Last Name_____

Product Name *(ex. Buckeye Mint-Quat)*	**Manufacturer** *(ex. Buckeye International)*