



LABORATORY REGISTRATION FORM

Date

Instructions – Each lab room or group must have a separate form completed. Please fill in the shaded fields. Save the form for each registration separately before beginning a new form for a new room or group. Please submit completed forms via email to the EHS Department at ehsoffice@uncc.edu.

General Information

Building		Room No.		Department	
Principal Investigator (PI)				Affiliate ID (800#)	

Emergency Contact Information

Emergency Contact	Lab Position or Title	Affiliate ID (800 #)	Emergency Phone

Biosafety (Check all that apply)

<input type="checkbox"/> Biosafety Level (BSL1 or BSL2)	<input type="checkbox"/> Animals (including transgenic animals)
<input type="checkbox"/> Human specimens (e.g., blood, cells, tissues, urine)	<input type="checkbox"/> Animal specimens (e.g., blood, cells, tissues)
<input type="checkbox"/> Microorganisms	<input type="checkbox"/> Toxins of biological origin (e.g., venom, tetrodotoxin)
<input type="checkbox"/> Recombinant or synthetic nucleic acids	<input type="checkbox"/> CDC/APHIS Select Agents or Toxins

Hazards or Special Concerns (Check all that apply)

<input type="checkbox"/> Carcinogens	<input type="checkbox"/> Ionizing radiation / radioactive materials
<input type="checkbox"/> Compressed gas	<input type="checkbox"/> Lasers - Indicate highest laser class:
<input type="checkbox"/> Corrosive liquids (acids or strong base)	<input type="checkbox"/> Magnetic field generator
<input type="checkbox"/> Cryogenics	<input type="checkbox"/> Pyrophorics
<input type="checkbox"/> Flammable liquids	<input type="checkbox"/> X-rays
<input type="checkbox"/> High voltage equipment (>600 volts)	<input type="checkbox"/> Oxidizers
<input type="checkbox"/> Hydrofluoric acid	<input type="checkbox"/> Designated hot work area (welding, cutting, grinding)

Describe other hazards or special concerns (e.g., inorganic mercury):

Describe any restricted areas in which the Principal Investigator's or lab staff presence is required for entry: