Silverglide ltd

COSHH ASSESSMENT FORM

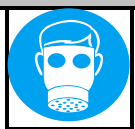
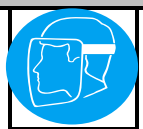
Product Name(s)	N/A	**Product Code:**	
Use / Description of Product:		**Date:**	
Chemical Name:		**Assessed for Site By:**	
Process Task/Activity:		**Project /**	
Workplace Exposure Limits & Contents:		**Premises**	

Hazards Identification

						
Flammable/ Highly Flammable	Explosive	Harmful	Toxic/ Very Toxic	Irritant	Dangerous to the Environment	Corrosive
no	no	no	no	no	no	no

ROUTE OF EXPOSURE (✓✗ N/A)						PERSONS AT RISK					
Skin		Ingestion		Inhalation		Users of the product		Members of Public		Visitors	
Eyes		Cuts/ Abrasions		Injection		Other Workers		Young Persons			

PPE REQUIREMENTS

						Safety shoes
no	no	no	no	no	no	Yes

Exposure Controls / Personal Protection (SDS8)

General Precautions / Engineering Measures	Control Measures / Protection

First Aid Measures (Symptoms) (SDS4)	

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Regulatory Information (SDS15)	
Risk Phrases (R)	**Safety Phrases (S)**

Fire-Fighting Measures (SDS5)	Handling and Storage Requirements (SDS7)

Accidental Release Measures (SDS6)	Disposal Requirements (SDS13)

Monitoring Requirements / LEV Requirements	Stability and Reactivity (SDS10)

Transport Arrangements (SDS14)	Training / Instruction Required

Comments / Additional Information (SDS16)
This is only a preliminary assessment based on generic information for similar products. This assessment must be reviewed and amended by a competent person prior to