YOUNGSTOWN STATE UNIVERSITY

WARNING!
UNATTENDED OPERATIONS TAKING PLACE

INSTRUCTIONS

An ***Unattended Operations Sign*** must be filled out completely and posted to the laboratory/equipment room door exterior (facing hallway), whenever any equipment, experiment, process, or operation is left unattended and could pose a potential risk to health, safety, or property.

This information is used to inform other building occupants, Facilities Maintenance personnel, Safety/support staff and other Emergency Responders, in the event of an unexpected reaction, overheating, odor, or emergency incident.

Building Name:	**Room Number:**
Date:	**Start Time:** _____ **AM** ☐ **PM** ☐ **End Time:** _____ **AM** ☐ **PM** ☐
Name:	**Phone:**
Supervisor Name:	**Supervisor Phone:**
Will Check Again in:	#_____**min's**, #_____**hrs**, #_____**day(s)**

The Unattended Operation taking place involves the following hazards: **Select ALL** that apply and list specifics as requested.

Equipment	**Hazard**
Chemical Fume Hood: **YES** – In Use ☐ **NO** – Not in Use ☐	Chemicals in Use: _____ CAS: _____ Amount: _____ Corrosive ☐ Toxic ☐ Reactive ☐ Flammable ☐
Muffle Furnace: Yes ☐ No ☐	Temp: _____ F ☐ C ☐ What is being heated in oven/furnace?
Compressed Gas: Yes ☐ No ☐	Gas Type:
Vacuum Pump: Yes ☐ No ☐	Type of Oil:
Electrical: Yes ☐ No ☐	Volts/Watts: _____AC ☐ DC ☐
Hot Plate/Ignition Sources: Yes ☐ No ☐	Type/Temp:
Continuous Water Flow: Yes ☐ No ☐	
Other:	Describe "Other":

Provide an additional description of what is taking place:

_____

Emergency Shut Off Location: _____