

Disclosure of items to be taken in and used in controlled area

Items

Pressurized containers

Spray bottles

Chemicals

Flammable liquids

Company

Date

Name

Date of birth (yyyy.mm.dd)

The undersigned hereby undertake to only use these items to the extent required by the exercise of the profession.

Signature

Receiving official (name/dep)

Valid from

-

Valid until

Signature

Signed form shall be submitted to section GK for approval by the Chemical group.

Signature, Chemical group