

PUSAT PENGURUSAN MAKMAL UNIVERSITI (PPMU)

No. Dokumen:	CMU/F/08
No. Revisi:	00
Tarikh Kuatkuasa:	01/10/2023
Muka surat:	1/2

UNIT PENGURUSAN BAHAN KIMIA (CMU) CHEMICAL APPLICATION & DECLARATION FOR RESEARCH

Applicant must fill in item no. 1,2 & 4 before reviewed by Appointed Officer at no 3.

		ONAL PARTICULARS Staff – academician (pr		f lahoratory, suni	ervisor) or resear	ch officer for a	laboratory or facility
		egulated chemicals wi		j iuborutory, supi	crvisory or rescur	en ojjicer jor u	inaboratory or judinity
	of Staff						
UTM S	Staff ID No.			Hand Phone N	0.		
e-Mail				Research Alliance			
Faculty& Block No.			Laboratory & Door No.				
Grant	/ Cost Center No.						
Purpo	se of chemical ased	Research & Deve	-	nsultation	Services		
_	EMICAL DETAILS	nazardous or regulated	chemicals at https:/	//ppmu.utm.my/	cmu/chemical-pr	ocurement/	
No.		of Chemical	CAS & product	Hazard Sign	Current stock	Purchase	Legislation related
	- Tallie o	, chemica	number	1102010 01811	in store	Quantity	(*if any)
• Plea	l ase attached the qu	otation and form relate	ed with the purchase.	Examples: poisor	n signed order, EU	ID form.	
		Occupational Safety		on of Use of S	ubstances) Orde	r 1999, pleas	e attach the
mai	nual/procedure of ti	he chemicals being used	d.				
3. RE\	/IEWED BY APPO	INTED OFFICER					
		ess- Purchasing process					
"I here	eby declare that the	e above information ha	is been reviewed and	d applicant is allo	wed to proceed v	vith the chemi	cal purchase."
Signation Date:		Stamps					



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4. HAZARDOUS OR REGULATED CHEMICALS PURCHASING CHECKLIST (Fill in before purchasing process).						
NO.	ITEM	ACTION				
		YES	NO			
1.	Existing chemical stock in the laboratory has been checked.					
2.	Study method/ guideline/ procedure/ manual is available as reference.					
3.	The size and quantity of item purchased has been considered in accordance with the rate of material					
	consumption.					
4.	Proper Personal Protective Equipment (PPE) is provided for the use of hazardous chemicals.					
5.	Appropriate location and facility are available for storage of chemical.					
	Please state the location for chemical storage:					
6.	Safe location for the use and handling of chemical has been identified.					
	Please state the location for chemical handling:					
7.	Emergency response plan has been prepared in case of spillage/ fire/ incident.					
8.	Possible scheduled wastes code generated from the chemical activity has been identified.					
	Please state the scheduled waste code:					
9.	Have received a safety briefing or training related to the safe use of chemicals.					
5. CH	ECKLIST UPON RECEIVING CHEMICALS FROM SUPPLIER					
NO.	ITEM		ACTION			
		YES	NO			
1.	Clear labeling and packaging that comply to CLASS Regulation 2013.					
2.	Packaging is free from contamination.					
3.	Delivered chemicals is as described when ordered.					
4.	Chemical Inventory & Chemical Register has been updated.					
5.	Latest SDS (preparation/ revision date not more than 5 years) is received from the supplier.					
6.	Write date of receipt on chemical container.					
7.	Store the chemicals correctly and safely.					
8.	Invoice and delivery order is provided by the supplier.					
	EMICAL RECEPTION DECLARATION (*Before payment process)					
	eby declare that the above information is true and I will be fully responsible in managing chemical health and safety re	quirem	ent for			
the ch	emical listed."					
Applicant's signature & stamp Applicant's signature & stamp						
Appli	Appointed office a stamp					

- Item 6 (Before payment process) Payment process will be declined without approval from the appointed officer.
- Appointed officers need to notify Chemical Management Unit (CMU) through email to cmcutm@utm.my for any purchasing of hazardous or regulated chemicals.