

ARK PEST CONTROL
















Control of Substances Hazardous to Health (CoSHH) Assessment – SCA01

Product Name: *(Purchased product brand name)*

Reference No:

This CoSHH Assessment form is solely for purchased hazardous substances (e.g. Bleach). For the more complex hazardous substances use form FCA01.

Hazards identified on the container or Safety Data Sheet (SDS) (tick appropriate boxes)

							No Symbol Under GHS
							
	√	√		√		√	

Hazard/Risks Identification:

A brief description of how the substance is to be used:

Who is likely to be affected by the substance?

Employees	Visitors
Cleaners	Patients / Residents / Service Users / Clients
General Public	Contractors

Existing Controls *(Provide a brief description of how the hazards are currently controlled. You may use the MSDS as a guide)*

ARK PEST CONTROL

Control of Substances Hazardous to Health (CoSHH) Assessment – SCA01

Current storage arrangements and the quantity held in stock (*Consider the risk of fire when storing substances. The fire risk must be covered in a separate Fire Risk Assessment*)

Current Spillage/Release Arrangements. (*You may use the SDS as a guide*)

--

Current Disposal Arrangements. (*You may use the SDS as a guide but also consider residual left in the containers*)

--

Can the substance be removed or replaced by a substance less hazardous? YES / NO (*Circle as appropriate*)

How often do employees and others come into contact with the substance?

Continual use		Frequent use		Minimal use	
---------------	--	--------------	--	-------------	--

Using this information, it is now possible to determine the level of risk from the substance and decide on the controls required to remove or reduce the risks.

Do you consider the current control measures suitable and sufficient? YES / NO (*Circle as appropriate*)

EMERGENCY ARRANGEMENTS:

Fire Measures: *What fire fighting measures are required to extinguish the substance? This information will be indicated on the safety data sheet if applicable.*

WATER	FOAM	DRY POWDER	CO2	WET CHEMICAL	NONE
√	√	√	√		

What methods are used to fire fight without putting yourself at risk? Is suitable PPE required and if so what?

--

First Aid Measures: *These are the first aid measures required should contact with the substance arise. It identifies each route of entry to the body and indicates what action must be taken should somebody become exposed. This information will be indicated on the safety data sheet.*

Route of entry: **First Aid Measures:**

Inhalation:	
Absorption:	
Ingestion:	
Injection:	
Skin Contact:	
Eye Contact:	

Are the first aiders aware of the arrangements to deal with this substance in the event of a first aid emergency? YES / NO (*Circle as appropriate*)

Are there arrangements in place to deal with spillages? (eg is there an emergency procedure)? YES / NO (*Circle as appropriate*)

If you consider the controls adequate then sign the CoSHH assessment off. If further controls are required then identify them below. This CoSHH assessment must be reviewed at least annually. The CoSHH assessment must also be reviewed if there are any changes in circumstances and following an accident or incident.

Extra controls required to reduce the risks.

--

--	--	--

Initial Assessment Completed By:	Name:	Signature:	Date:

ARK PEST CONTROL

Control of Substances Hazardous to Health (CoSHH) Assessment – SCA01

ASSESSMENT REVIEW PROGRAM

Name, address and telephone number of supplier of substance:

PelGar International Ltd

Unit 13,

Newman Lane Industrial Estate,

Newman Lane, Alton,

Hampshire

GU34 2QR

Tel +44 (0) 1420 80744

Fax +44 (0) 1420 80733