

ARK PEST CONTROL

Control of Substances Hazardous to Health (COSHH) Assessment – APC26

Product Name: *(Purchased product brand name)*









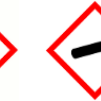

Reference No:
102000025363

RACUMIN FOAM AE0,4 6X500ML CAN

Rev: 30.09.2021

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)

									
√		√		√		√			

Hazard/Risks Identification:

Harmful if swallowed. Irritating to eyes and respiratory system. Toxic to aquatic organisms may cause long term adverse effects in the aquatic environment. Ignites readily. Product burns without a flame to give dense white harmful smoke.

*H222 Extremely flammable aerosol
 H229 Pressurised container. May burst if heated
 H360D May damage the unborn child
 H373 May cause damage to organs (Blood) through prolonged or repeated exposure
 H319 Causes serious eye irritation
 H411 Toxic to aquatic life with long lasting effects.*

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

SPRAY Applying

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)

Handle and open container with care.

Do not release into the environment. Do not allow to enter drains, sewers or watercourses. Do not eat, drink or smoke when using the product. Wash hands after handling. Remove contaminated clothing. Wash contaminated clothing before reuse. Personal protective equipment required: eye, hand, skin,

Engineering measures: Provide adequate ventilation.

Respiratory equipment: If ventilation is insufficient, suitable respiratory protection must be provided. Use respiratory equipment with particle filter, type P1. (EN 140/143)

Hand protection: Wear protective gloves (EN 374).

Eye protection: Avoid contact with eyes. Wear approved safety goggles (EN 166, field of use = 5 or equivalent).

Skin and body protection: wear standard coveralls and Category 3 Type suit. If there is a risk of significant exposure, consideration should be given to a higher protective suit.

Hygiene measures: No specific hygiene procedures noted, but good personal hygiene practices are always advisable, especially when working with chemicals.

Thermal hazards: No data available. Environmental Exposure Controls Do not release into the environment.

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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*)

No specific precautions are required when handling unopened packs / containers; follow relevant manual handling advice. Ensure adequate ventilation. Avoid contact with skin, eyes and clothing. The product is extremely flammable. Keep away from heat and sources of ignition. Take measures to prevent the build up of electrostatic charge. Fire or intense heat may cause violent rupture of packages. Avoid storing in extremes of temperature and direct sunlight.

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

The nature of the product, when contained in commercial packs, makes spillage unlikely.

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

Ensure aerosol container is empty before disposal. Dispose of empty and cleaned packaging safely. Not completely emptied packaging should be disposed of as hazardous waste.

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	
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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?

Extinguish with alcohol-resistant foam, carbon dioxide, dry powder or water fog. Use fire-extinguishing media appropriate for surrounding materials.

Do not use water jet as an extinguisher, as this will spread the fire.

Hazardous combustion products Toxic gases/vapours/fumes of: Hydrogen bromide (HBr). Oxides of: Nitrogen.

Carbon. Specific hazards Dike and collect extinguishing water. Avoid releasing to the environment. Do not discharge into drains, watercourses or onto the ground.

Special Fire Fighting Procedures In case of fire and/or explosion do not breathe fumes Protective equipment for fire-fighters

If safe to do so remove product from areas of fire, or otherwise cool containers with water in order to avoid pressure being built up due to heat.

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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:

General:	Remove affected person from source of contamination. CAUTION! First aid personnel must be aware of own risk during rescue! Place unconscious person on the side in the recovery position and ensure breathing can take place.
Inhalation:	Move the exposed person to fresh air at once. Immediately seek medical attention. When breathing is difficult, properly trained personnel may assist affected person by administering oxygen. If breathing stops, provide artificial respiration.
Absorption:	
Ingestion:	Rinse mouth thoroughly. Immediately seek medical attention. If breathing stops, provide artificial respiration. DO NOT Induce vomiting.
Injection:	
Skin Contact:	Remove contaminated clothing immediately and wash skin with soap and water. If available use polyethyleneglycol 400, subsequently rinse with water. Immediately seek medical attention.
Eye Contact:	Rinse immediately with plenty of water, also under the eyelids, for at least 15minutes. Remove contact lenses if present after the first 5 minutes then continue rinsing eye. Get medical attention if irritation develops and persists.

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.

Waste is classified as hazardous waste. Disposal to licensed waste disposal site in accordance with the local Waste Disposal Authority.
Waste treatment methods - Waste is suitable for incineration. Contact specialist disposal companies. Do NOT reuse empty containers. Empty containers can be sent for disposal or recycling.

Identify the persons who are required to implement the extra controls and set a realistic date for completion of these extra controls.

Action to be implemented by:	Target Date:	Completed Date:
n/a		

Initial Assessment Completed By:	Name:	Signature:	Date:
	Andy Owden	A. Owden	25.07.19

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ASSESSMENT REVIEW PROGRAM

Assessment Review Completed by:	Name		Signature		Date	
	Andy Owden		<i>A. Owden</i>		30.07.22	
Reason for review:	Annual Review	X	Changes	X	Accident/Incident	

Assessment Review Completed by:	Name		Signature		Date	
Reason for review:	Annual Review		Changes		Accident/Incident	

Assessment Review Completed by:	Name		Signature		Date	
Reason for review:	Annual Review		Changes		Accident/Incident	

Name, address and telephone number of supplier of substance:

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