



# CoSHH Assessment

## Document No:

Division: Ark

Site / Location: As Required

### Supplier details:

PestFix, Units 1-3 Cedar Park, 30 Terminus Road, Chichester, West Sussex, PO19 8GT

Email: [sales@pestfix.co.uk](mailto:sales@pestfix.co.uk) Telephone number: 01903 538488

### Name of substance and any supplier reference numbers:



Woodworm Killer RTU

### Relevant Identified Uses:

PC8: Biocidal products (e.g. Disinfectants, pest control). (BPR) HSE 10136

Refer to product label for detail on use and restrictions.

Number of personnel exposed	Direct	Indirect	Client	Sub Contractor	Public	Others
	1	0	0	0	0	0

Substances used / exposed to?	Quantity used	Frequency	SDS Yes/No	WEL	Hazards	Exposure route
<b>Ingredients:</b> <ul style="list-style-type: none"> <li>ALCOHOLS, C9-11,</li> <li>ETHOXYLATED 1-10%</li> <li>Permethrin &lt;1%</li> </ul>	As per product label following site survey.	As per product label following site survey.	Yes	No data available.	 	Ingestion  Skin Contact

Do any of the substances produce a significant risk to health? **H319: Causes serious eye irritation.**

Can any of the substances be replaced with less hazardous substances? **No**

### What measures are provided to control the risk?

**Ventilation** General

**PPE – state the type.** Tick the PPE Required:

								
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	Face Visor	Goggles	Safety Glasses	Safety Shoes	Overall/ Uniform	Apron (coveralls)	Dust Mask	Fume/ Vapour Mask	Protective Gloves
	<p>Self-contained breathing apparatus must be available in case of emergency.</p> <p>Ensure eye bath is to hand.</p>								
<b>Management Controls</b> Refer to the hierarchy of control in procedure V(P)213, page 3	<p><b>Precautions for safe handling:</b>            Avoid direct contact with the substance.            Ensure there is sufficient ventilation of the area.            Do not handle in a confined space.            Avoid the formation or spread of mists in the air</p> <p><b>Conditions for safe storage, including any incompatibilities</b>            Storage conditions: Store in a cool, well ventilated area.            Keep container tightly closed.            The floor of the storage room must be impermeable to prevent the escape of liquids.</p>								
Are the control measures adequate?	Yes								
Is health surveillance required? (Consult your local QHSE Advisor)	No								
Are there any specific emergency procedures necessary related to the use or storage of any of the substances?	No								
Are there any specific requirements related to the disposal of any of the substances in use?	Recover, if possible. Send to authorised disposal plants or for incineration under controlled conditions. In so doing, comply with the local and national regulations currently in force.								
What information, instruction and training are required for operatives using the substance or carrying out the process?	<ul style="list-style-type: none"> <li>All operatives are required to complete a Health &amp; Safety induction (including training on correct use of PPE, storage, and transport of pest control products), training, and receive instruction and assessment in the use of substance before being deemed competent to carry out the process.</li> <li>Operatives instructed to follow CoSHH and Risk Assessment in the transport, storage, and application of substance.</li> <li>Risk Assessment on rodenticide use available on Smart Phone and in site folder (if applicable).</li> </ul>								



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	<ul style="list-style-type: none"><li>• CoSHH Assessment for product available on Smart Phone and in site folder (if applicable).</li><li>• Manufacturer's Safety Data Sheet available from: <a href="https://arkpestcontrol.com/coshh-msds-labels">https://arkpestcontrol.com/coshh-msds-labels</a></li></ul>
<b>First aid measures in the event of accidental exposure?</b>	<p><b>Skin contact:</b> Remove all contaminated clothes and footwear immediately unless stuck to skin. Wash Immediately with plenty of soap and water.</p> <p><b>Eye contact:</b> Bathe the eye with running water for 15 minutes. Consult a doctor.</p> <p><b>Ingestion:</b> Wash out mouth with water. Consult a doctor.</p> <p><b>Inhalation:</b> Remove casualty from exposure ensuring one's own safety whilst doing so. Consult a doctor</p>
<b>When was the information, instruction and training provided?</b>	Enter who provided the training and date? <b>Refer to technicians training record.</b>
<b>CoSHH Assessor</b>	Print Name: _____ Signature: _____
<b>Date of assessment</b>	Date for review _____