COSHH Assessment Records Control of Substances Hazardous to Health (COSHH Regulations)

CAG/003

			RISK LEVEL RED	Examination of Control Measures	Supervisory Personnel	
SECTION: EN		/IRONMENTAL	REF. No. CAG/003	Routine monitoring of Exposure	Supervisory Personnel	
Material or Process	MIX	AND DILUTE CONCENTRATE	FOR CONTROL OF WEEDS	Surveillance Required (yes) Medical Health		
Trade Name		ROUND UP 480 VANTAGE		YES		
Substances in Use		Exposure Levels	Hazard Data Sheet Ref.	NO ✓		
Isopropylamine salt of glyphosate		NONE ESTABLISHED	CAG/003	Provision of Information, Instruction & Training	nvironmental Manager and NPTC Training	
				First Aid / Hygiene Arrangements:		
				Eyes:Immediately flush with plenty water/sterile eye was	h solution	
				Skin Contact:Take off contaminated clothing, wristwatch	n, jewellery. Wash affected skin with plenty of wate	
I				Wash clothes and clean shoes before re-use.		
FORMULATION;yellov w/w water	v to brown	liquid containing 41.5% w/w glyp	phosate 16% w/w surfactant and 42.5	Inhalation:Remove patient to fresh air.		
	SPRAY CERTIFICATE HOLDING OPERATIVES			Ingestion:Immediately offer water to drink. Do NOT induce vomiting unless directed by medical personnel If symtoms occur, get medical attention.		
Exposure Route;				Storage:Store in a secure, dry, well ventilated building in supplies and other materials, especially food and animal	-	
Inhalation; YES		Ingestion; YES	Eyes; YES	Spillage: Ensure use of PPE, absorb spillage onto sand or suitable absorbent material transfer to a suitable container for disposal. Wash spillage area with water,		
Skin Absorption; YES		Other;		Transport:Not regulated for transport		
				Fire Precautions:Not applicable, non flammable. Keep exposed	containers cool by spraying with water if	
P.P.E.required				Waste Disposal:Concentrated, diluted product and empty containers as per Control of Pesticide Regulation 1986 and NPTC training for disposal		
Eye/Face Protection		No special requirement when used as directed		Assessment Carried out by:	Management Acknowledgement	
Gloves	YES			Name:	Name:	
Mask/Respirator		No special requirement when used as directed		Signature:	Signature:	
Coveralls	VES			Position: Technical Officer	Position: Environmental Manager	

Coveraiis	TEO					
Other		Date:	01/06/2020	Date:	01/06/2020	
Precautions Required	Do not eat,drink or smoke when mixing or using.		Next Assessment due on or before:			
Action Required NO			kept in Service Managers Office			
HAZARDS IDENTIFICATON; This material is not expected to produce any significant adverse effects			Copy kept in Service Depot			
when recommended use instructions are followed						

COSHH Assessment Records Control of Substances Hazardous to Health (COSHH Regulations)

		DICK I EVEL DED	Examination of Control Measures	Supervisory Personnel		
ENVIRON	IMENTAL	REF. No. CAG/007	Routine monitoring of Exposure	Supervisory Personnel		
	NON SELECTIVE RESIDU	JAL HERBICIDE	ce Required (yes) Medical Health			
CHIKARA		YES				
Ехр	posure Levels	Hazard Data Sheet Ref.	NO ✓			
25%	WG Not Listed		Provision of Information, Instruction & Training	nvironmental Manager and NPTC Trainin		
			First Aid / Hygiene Arrangements:			
			Eyes: Rinse with water, take victim to an ophtalmologist if irritation persists			
			Skin Contact: Rinse with water, soap may be used, take victim to doctor if irritation persists			
er dispersible	granule formulation contai	ning 25% w/w flazasulfuron	Inhalation: Remove victim into fresh air. Respiratory prob	olems : consult a doctor/medical service		
			Ingestion: Rinse with water. Do not induce vomiting. Consult a doctor/medical service if you feel unwell			
			Storage: Keep container tightly closed. Keep only in the sources	original container. Meet the legal requirements. K		
Ingest	Illngestion: YES IIFves: YES		Spillage: Ensure suitable personnel protective is worn during removal of spillage. Absorb spillages onto sa			
"			Transport:No information required			
			Fire Precautions: Suitable media : Water spray, Polyvale	ent foam, ABC powder, Carbon dioxide		
ŗ	Exp 25% er dispersible perator made frecautions neco	Exposure Levels 25% WG Not Listed er dispersible granule formulation containerator made familiar with the hazards which recautions necessary to minimise risk Ingestion; YES	RISK LEVEL RED REF. No. CAG/007 NON SELECTIVE RESIDUAL HERBICIDE CHIKARA Exposure Levels Hazard Data Sheet Ref. 25% WG Not Listed er dispersible granule formulation containing 25% w/w flazasulfuron perator made familiar with the hazards which may arise and aware of required recautions necessary to minimise risk Ingestion; YES Eyes; YES	ENVIRONMENTAL RISK LEVEL RED REF. No. CAG/007 ROutine monitoring of Exposure CHIKARA Exposure Levels Hazard Data Sheet Ref. 25% WG Not Listed Provision of Information, Instruction & Training First Aid / Hygiene Arrangements: Eyes: Rinse with water, take victim to an ophtalmologist in Skin Contact: Rinse with water, soap may be used, take Inhalation: Remove victim into fresh air. Respiratory proter dispersible granule formulation containing 25% w/w flazasulfuron perator made familiar with the hazards which may arise and aware of required recautions necessary to minimise risk Eyes; YES Examination of Control Measures Routine monitoring of Exposure ce Required (yes) Medical Health YES NO ✓ First Aid / Hygiene Arrangements: Eyes: Rinse with water, take victim to an ophtalmologist in Skin Contact: Rinse with water, soap may be used, take Inhalation: Remove victim into fresh air. Respiratory protectutions necessary to minimise risk Storage: Keep container tightly closed. Keep only in the sources Spillage: Ensure suitable personnel protective is worn dissuitable absorbent material. Transfer into a container for Transport: No information required		

P.P.E.required		Always apply good standard of industrial hygiene, wash hands thoroughly before eating and after use	Waste Disposal: Remove to authorised incinerator and empty containers as per Control of Pesticide Reguland NPTC training for disposal.		
Eye/Face Protection	YES	Safety googles or Visor	Assessment Carried out by:	Management Acknowledgement	
Gloves	YES	Nitrile gloves	Name:	Name:	
Mask/Respirator	YES	P1 dust mask	Signature:	Signature:	
Coveralls	YES	Protective coverall	Position: Technical Officer	Position: Environmental Manager	
Other (Date: 01/06/2020	Date: 01/06/2020	
Precautions Req	uired: W	hen using do not eat, drink or smoke.	Next Assessment due on or before:		
Action Required YES / NO			Original kept in Service Managers Office		
HAZARDS IDENTIFIC Dangerous for the environment			Copy kept in Service Depot		