

### DEI C.H.E.S.S.

# Hazardous Substance Application

Date:		Docum	nent ID#:							Version	#:
PVID#:		Contra	actor/Con	mpany Name:					Conti	ractor ID:	,
Camp/Base:				Location:				Site:			
SECTION A (C	omplete	this page ar	nd send t	to authorised L	DEI r	epresent	ative)				
Requested b	y: Nam	ne:		Email:					Phone	<del></del>	
Departmen	ıt:							Date:			
			New	Hazardous Sı	ubsta	ance (Che	eck Site Hazardo	us Sub	stance	s Registe	r)
<i>or</i> Cha	anged:		Volu	olume Concentration			Storage Location				
Hazardous Sul	bstance I	nformation.	Please	supply Safety	/ Dat	a Sheet (	(mandatory).				
Substance Name (and formula where applicable)			Supplier	innlier		Classification/s .g. 5.1.1B	_	UN Number		Concentration (%)	
How will th	ne produc	ct be deliver	ed:	Bulk		IBC	Other				
Containe	r type:			Container Size	e:		Maximum volume st			on site:	
Storage Lo	cation:										
Describe the	reason f	or the reque	est and h	ow substance	will	be used	•				

## New Zealand DEFENCE FORCE To Ope Kalna O Autreaves

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**SECTION B – Completed by DEI** Authorised HSNO Certifier:

Approval Criteria – (Indicate applicable items by ✓)								
	Issue:		Required Action:	Assigned To:	Due Date:	Completed:		
?		s the Location ertificate?						
?		res a Hazardous sphere Zone?						
?	Requi Zone?	res a Controlled						
?	Appro requir	eved Handlers red?						
?		ng required?						
?	Notification of Regulatory Authorities required?							
?	Notification of external Emergency Services?							
?	Medical Surveillance programme required?							
?	Safety Equipment							
?	Hazardous Substances Management Plan attached (HSMP)							
?	Other							
Autho	orised	Approv	red Declined	<u>Reasons:</u>				
HS	NO							
Certifier		Name: Signature:	Phone:					

#### **SECTION C - Administration**

Copy of completed Form sent to:	?	Requestor Environmental		<ul><li> Regional HSS</li><li> Filed</li></ul>	S	
Documentation Updates Required?	?	Site Dossiers ChemSafe	?	Chemwatch Emergency Response Plan	?	Site Maps & Drawings SDS (Hard & soft files)