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| **Company Name:**  Site: | |  | **COSHH**  **Assessment** | |
|  |  |  |  |  |
| Supplier: | Bostik | | COSHH Number | 33 |
|  |  | | | page 1 |
| Assessment By: | Activity: | | Review Date | Assessment Date |
|  | **Sealing bonding and filling various materials.** | |  |  |
|  | Persons/Groups at Risk | |  |  |
|  | **User** | |  |  |

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| **NAME OF HAZARDOUS SUBSTANCE USED OR CREATED** |
| **Substance: Silicone Sealant** |

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| **FLAMMABLE** | |  | **OXIDISING** | |  | **EXPLOSIVE** | |  | **IRRITANT** | |  | **HARMFUL** | |  | **CORROSIVE** | | |
| **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | NO | |
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| Insert ✓ in appropriate boxes | | | | | | | | | | | | | | | | | |
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| **COMPRESSED GAS** | |  | **TOXIC** | |  | **HARMFUL TO THE EINVIRONMENT** | |  |  | |  |  | |  |  | | |
| **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | NO | |
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| Insert ✓ in appropriate boxes | | | | | | | | | | | | | | | | | |

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| Please add comments into boxes where required. | | Insert ✓ in appropriate boxes and add comment below | | **YES** | **NO** | |
| Is Manufacturers Safety Data Sheet available? | | |  | ✓ |  | |
| Does the Substance have a Workplace Exposure Limit (WEL)? | | |  |  | ✓ | |
| If the substance has a WEL please state. if un-sure check HSE document – EH40 | | |  |  |  | |
| Can a safer substance be used or can the substance be enclosed or extracted. | | |  |  | ✓ | |
| Will employees be given information and training? | | |  | ✓ |  | |
| Will Personal Protective Equipment be provided for employees? | | |  | | | |
| State the standard of RPE (respirators) | | |  |  | ✓ | |
| State the standard of Goggles or Spectacles | | | If risk of splashing use goggles or face shield | ✓ |  | |
| State the standard of Gloves | | | Rubber Gloves | ✓ |  | |
| State the standard of Overalls | | |  |  | ✓ | |
| State the standard of Boots | | |  |  | ✓ | |
| Other Equipment | | | Attach details if YES |  | ✓ | |
| Will Exposure Monitoring and/or Control Measures be required? | | | Attach details if YES |  | ✓ | |
| Will Health Surveillance be necessary? | | | Attach details if YES |  | ✓ | |
| Does this Substance need to be disposed of by a Waste Disposal Contractor? | | | | ✓ |  | |
| Have all necessary First-aid and welfare requirements been provided? | | |  | ✓ |  | |
| Have Storage requirements for the substance been provided / arranged on site? | | |  | ✓ |  | |
| **FIRST AID, FIRE FIGHTING, STORAGE & HANDLING, DISPOSAL AND ACCIDENTAL RELEASE INSTRUCTIONS ARE PROVIDED ON PAGES 2 & 3** | | | **Number of Sheets attached to this Assessment** | | |  |
| FIRST AID INSTRUCTIONS | | | | | | |
| **Route of Exposure, or**  **Type of Injury** | **First Aid Treatment** | | | | | |
| Skin Contact | **Wash skin with plenty of warm water. Seek medical advice.** | | | | | |
| Eye Contact | **Flush the eyes for 10 minutes with clean running water. Seek medical advice.** | | | | | |
| Inhalation | **Remove to fresh air and keep casualty warm and at rest. Take to hospital if breathing difficulties occur.** | | | | | |
| Ingestion | **Seek medical advice and do not induce vomiting** | | | | | |
| General Information | Strong Ammonia type smell | | | | | |

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| **FIRE FIGHTING MEASURES** | |
| **Hazard** | **Measures** |
| Fire | This product is not flammable. Use fire-extinguishing media appropriate for surrounding materials. |
| Stability | Stable under normal temperature conditions. |
| Decomposition Products | Fire creates: Carbon monoxide (CO). Carbon dioxide (CO2). |

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| **MANUFACTURERS INFORMATION** | |
| **Manufacturers Name and Address** | BOSTIK LIMITED  COMMON ROAD  STAFFORD  STAFFORDSHIRE  ST16 3EH |
| **Manufacturers Health & Safety Data Sheet Reference** | SKU 240702, 243801 |
| **24 Hour Emergency Telephone Number** | +44 1785 272650 |
| **Regulatory Information: Warning Label Phrases** | R65 Harmful: may cause lung damage if swallowed.  R66 Repeated exposure may cause skin dryness or cracking  H304 May be fatal if swallowed and enters airways. EUH066 Repeated exposure may cause skin dryness or cracking. |

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| **STORAGE AND HANDLING** | |
| **Hazard** | **Measures** |
| Handling | **Do not handle broken packages without protective equipment. Use mechanical ventilation in case of handling which causes formation of dust. Avoid spilling, skin and eye contact** |
| Storage | **Store in cool, dry conditions. Protect from freezing.** |

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| DISPOSAL MEASURES | |
| **Hazard** | Measures |
|  | **Dispose of in a designated skip to be transported by a Waste Transfer Licensed Company.** |

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| ACCIDENTAL RELEASE MEASURES | |
| **Hazard** | Measures |
|  | Stop leak if possible without risk. Do not contaminate water sources or sewer. Pick up with vacuum or absorbent solid, store in closed container for disposal. Avoid generation and spreading of dust. Avoid contact with skin or inhalation of spillage, dust or vapour. Wear necessary protective equipment. Containers with collected spillage must be properly labelled with correct contents and hazard symbol. |

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| USAGE/EXPOSURE | |
| **Frequency and Duration of use** |  |
| **Maximum number of people involved in activity** |  |
| **Quantities stored/used** |  |
| **Exposure levels** |  |

**Safe System of Work**

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**Operatives Acknowledgement**

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| **Name:** | **Signature:** | **Date:** | **Name:** | **Signature:** | **Date:** |
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