

illustrative Notice

Unit No.: _____

Company: _____

CONTACT	NAME	POSITION	PHONE NO.
Person In Charge			
Emergency Contact			

MAJOR HAZARDS (e.g. Corrosives, Biological Hazard, Non-flammable compressed gas & etc.)

PROTECTION (e.g. Entry Restrictions, protective clothing, Eye protection & etc.)

Signed with company chop: _____ (_____)

Date: _____