

## **CoSHH Risk Assessment**

A COSHH assessment should be undertaken for all substances used in the workplace that are hazardous for health. In undertaking your assessment you should aquire a copy of the Material Safety Data Sheet (MSDS) for the substance you are using from the manufacturer and attach it to the assessment. This assessment should be retained in line with the company retention policy

Substance/Material		Trade Name		
What is it used for?				
List the hazardous				
elements in the				
substance				
If any substances have one please state the Workplace Exposure Limit (WEL):				
(WELs can be found in EH40 which is available from the HSE Website or via this link)				
Short Term Exposure				
Limit (STEL):				
Long Term Exposure				
Limit (TWA):				
Is the Substance?(Please p	ut a <b>X</b> )			
	in a red square on the produ			
Extremely Flammable:	Harmful:		Irritant:	
Highly Flammable:	Toxic:		Sensitising:	
Flammable:	Very Toxic:	(	Other:	
Oxidising:	Corrosive:			
Is the substance hazardous	s when: (Please put a X)			
In contact with skin	Swallowed	(	Other	
In contact with eyes	Breathed in			
How is the substance				
used?				
(e.g. How is it applied?)				
Who is exposed?				
A .1 11111 1				
Are there additional				
risks?				
(e.g. Does the substance have additional risks to				
nave daditional risks to new & expectant				
new & expectant				

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Version: Version 1.1



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Is there a less hazardous alternative that could be used? (Contact the supplier to see if they advise a safer alternative)	ernative that could be ed? ontact the supplier to e if they advise a safer
What controls are required? (e.g. PPE required, use of ventilation, storage requirements)	<b>quired?</b> g. PPE required, use ventilation, storage

## Declaration

Based on information provided to me by experts, suppliers and manufacturers where required, combined with my training and experience, I am satisfied that this document constitutes a proper and adequate COSHH assessment in respect of the substances being used and that the precautions identified above are sufficient to control the risks to an acceptable level. To be effective the controls described in this risk assessment must be fully implemented

Risk assessment written by:				
Name:		Date Signed:		
Signature:				
I have attached a copy of the Material Safety Data Sheet (MSDS) to this assessment (Please Tick the box):				

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