

APPENDIX 1
REGISTRATION FORM
For
RESEARCH LASERS

Directions:

Complete this registration form for each Class 3B and 4 research laser.

DEPARTMENT:		PI/SUPERVISOR:	
BULDING:		LASER SAFETY OFFICER:	
ROOM #:			

MANUFACTURER	
MODEL NO.	
SERIAL NO.	
HAZARD CLASS (1,1M, 2,2M, 3R, 3B, 4)	
YEAR MANUFACTURED	
TYPE (CW or PULSED)	
LASING MEDIUM	
MAXIMUM OUTPUT	
OPERATIONAL WAVELENGTH(s) [NM]	
PULSE WIDTH / REPETITION RATE	
BEAM DIVERGENCE	
EMERGENT BEAM DIAMETER	
ACTIVE/INACTIVE	
PROPERTY TAG NO.	
PURPOSE	
Laser Eyewear wavelength range and OD	
Is Beam fully enclosed, partially enclosed or open	

Name (print): _____ Signature: _____

Date: ____/____/____

Send a copy of the inventory form to:
Environmental Health and Safety, Box 278878, Fax #274-0001