

PUSAT PENGURUSAN MAKMAL UNIVERSITI (PPMU)

No. Dokumen:	CMU/F/02
No. Revisi:	01/2023
Tarikh Kuatkuasa:	01/11/2023
Muka surat:	1/2

UNIT PENGURUSAN BAHAN KIMIA (CMU)

CHEMICAL HANDOVER FORM

1. (1. CHEMICAL OWNER DETAILS					
Nam	e					
Staff No.		Hand Phone No.				
Laboratory (Door No.)		Email				
Faculty/ Department						
2. L	IST OF CHEMICALS	(Kindly use attachment if the space p	provided is insufficie	nt)		
NO.	N.	AME OF CHEMICAL	CAS NUMBER		SIZE (ML/L/G/KG)	AMOUNT (Bottles)
Decla	ration:					
Declaration: "I hereby declare that the above information is true and all the chemicals listed are now handed over to the respective receiver."						
Signature & Official Stamp						
Date:						



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CHEMICAL HANDOVER FORM

3. RECEIVER DETAILS							
Name of Student							
UTM Student ID No.		Hand Phone No.					
Laboratory (Door No.)		Email					
Faculty/ Department							
Declaration: "I hereby declare that the above information is true. All the chemicals received are now under my responsibility and I will manage the chemicals according to the national and university law and regulations." Signature & Official Stamp Date:							
4. VERIFIED BY (LABORATORY/ FACILITY MANAGER)							
Declaration: "I hereby declare that the above information is true. All the chemicals declared have been managed accordingly as required by the authorities."							
Signature & Official Stamp							
Date:							