Hazardous Materials Notification

Please be informed that we will be bringing into OMC the following substances for our work purposes on ______ (Date / Time) and these shall be stored in our designated hazardous materials store equipped with the necessary precautionary measures to prevent accidents and unauthorized access.

| S/No. | Chemical Name | SDS No. | Special Storage Instructions |
|-------|---------------|---------|------------------------------|
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Person-in-charge : _____

(Name / Signature)

Company Name : _____