**Peroxide-Forming Chemical Evaluation Sheet**

This form must be completed prior to disposal of any peroxide forming chemicals. For submission email this form to the EH&S Office at [hazwaste@fit.edu](mailto:hazwaste@fit.edu). For questions or concerns call the regulated materials officer (321) 674- 7562. Any immediate hazards or dangerous peroxide formations leave the area and immediately call the EH&S’s emergency contact number (321) 419-8021.

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| Department: | | |  | | | | | | | | | | | | | |  | Room: | | | | |  | | | | | | | | | | | | |  | Date: | | | | |  | | | | | | | | | |  |
| Building: |  | | | | | | | | | |  | Evaluator: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| ***Hazard Evaluation*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Chemical: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | Manufacturer: | | | | | | | | | | | |  | | | |  |
| Peroxide former category: | | | | | | | | | | A | | | | | B | | | | C | | | D | | | | |  | | Within expiration date? | | | | | | | | | | | | | | | | | Yes | | | No | |  |  |
| Date chemical purchased: | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | Date chemical opened: | | | | | | | | | | | | | | | |  | | | | |  |
| Inhibitor added? | | | | | Yes | | | No | | | | | |  | | Inhibitor name: | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  |
| ***Container and condition*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Container type: | | | | Steel | | | | Glass | | | | | | | | | Plastic | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| Container volume: | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | Remaining liquid volume: | | | | | | | | | | | | | | | | |  | | | |  |
| Container in good condition (no deformation cracks, etc.)? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | No\* | | | | | | | | |  | | |  |
| Closed container free of evaporative odors? | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | No\* | |  | | | | | | | | | | | | | | | | |  |
| Container and cap free of crystals (DO NOT OPEN TO DETERMINE)? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No\* | | |  | |  |
| Container free of stratification, cloudiness & wisp-like structures? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No\* | | | |  | | |  |
| ***Storage Conditions*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How was it stored? | | | | | | | Flammables cabinet | | | | | | | | | | | | | | | | | Refrigerator | | | | | | | | | | | Other: | | | | | | | |  | | | | | | | | |  |
| Protected from sunlight or UV source? | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | | | | | | | |  | | | | | | | | | | | | | | | | | |  |
| ***Hazard Determination*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is container safe to open and test for the presence of peroxides? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No\* | | | | |  | | |  |
| Peroxide concentration (ppm): | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | Test method: | | | | | |  | | | | | | | | | | | | | |  |
| **\*If any of the asterisked answers are “No” do not move container. Contact EH&S for assistance with the information provided at the top of this form.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |