

#	Work Order #
y:	Reviewed by:
2:	Date:
# :	Approval #:

Dess-Martin Periodinane

Generator Name:				Generator Code:				
Generator Address:	erator Address:			Contact Name	e:			
Generator Phone:				Contact Phon	e:			
Important! Upon discove to gain access to the labe to gain information, do so	ling information	. You should make every		-		•		•
Has the container ever be	een opened?	Yes	_ No		If Yes, en	ter the date o	opened:	
Is the material stabilized?		Yes	No		describe			
*Stabilizer is a chemical that alter its stability and self-acc				mposition of th	e material. TI	ne decomposit	ion of this ma	terial may
Is there evidence of impu	rities; cloudines	s, wisp-like structures, ic	e-like structuı	es, solid mass	ses			
or any other indication of	contamination	? Yes		No_		describe		
Has water, or any aqueou	ıs solution ever	been added to the conte	nts?	Yes_		No		_
Has the container been u	nder pressure, k	oulging, etc.? (confirm with	h customer)		Yes		No	ı
Container information								
Is the product in the origi	nal manufacture	er's container?	Yes		No			
Manufacturer:			Purchase Dat	te:				
Lot Number:			Expiration Da	ate:				
Container Size:			Volume/ We	ight remainin	g in containe	r:		
Container type	Glass	Plastic		Metal				_
Cap Type:	Glass	Plastic		Metal		Cork		
Condition:	Rusted	Bulging		Dented		Other		
Storage Conditions (confin	rm with customer,)						
Was the material								
Subjected to fire?		Yes		No		Unknown		
Stored in a refrigerator?		Yes		No		Unknown		
Subject to direct sunlight? Yes				No		Unknown		
Subject to fluctuations in humidity? Yes				No		Unknown		
Subject to thermal or physical shock? Yes				No		Unknown		
Subject to fluctuations in temperature? Yes				No		Unknown		
Stored indoors? Yes				No		Unknown		
Stored outdoors? Yes				No		Unknown		
For approval, contact Ma	iterials Manage	ment						