

Notification of use and consignment of biological agents

The Control of Substances Hazardous to Health (Northern Ireland) Regulations 2003.

Purpose of Notification

There are three courses of action relating to the notification required by the COSHH Regulations.

Tick the appropriate box to indicate the purpose of your notification and complete the sections of the form, as shown.

1. First use of biological agent(s) Hazard Groups 2, 3 or 4
(You must complete sections 1 - 4)
2. Subsequent use of biological agent(s) in Part V
(You must complete sections 1 - 4)
3. Intended consignment or receipt from abroad of Hazard Group 4 biological agents (You must complete sections 1, 3 and 5)

Section 1 - Details of premises

1a. Name and address of employer responsible for using, or consigning the biological agent(s) in question

Name:

Address:

Postcode:

Telephone number:

Fax number:

Email address:

1b. Address of premises where biological agent(s) will be used or consigned from (if different from 1a.)

Address:

Postcode:

Telephone number:

Fax number:

Email address:

Section 2 - Health and safety

2a. Name the employee with specific responsibility for the health and safety of fellow employees

Name:

Address:

Postcode:

Position:

Email address:

2b. Qualifications and relevant experience of that person:

Section 3 - Hazard Groups of Biological Agent(s)

(See Approved List of Biological Agents at www.hse.gov.uk)

Tick the appropriate box to indicate the hazard group(s) to which the biological agent(s) is assigned:

Group 2

Group 3

Group 4

Please give name of agent(s) being used:

Section 4 - Risk assessment / Preventative and Protective Measures

Section 5 - Consignment / Importation of Biological Agents in Part V of Schedule 9 of COSHH 1994

Please give the following details:

5a. Address to which agent will be consigned

Address:

5b. Name of transport operator responsible for transportation

5c. Name of individual accompanying consignment

5d. Volume of consignment

5e. Packaging and containment precautions that will be taken.
(See 'The Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations (Northern Ireland) 2010').

5f. Method of transportation (please tick appropriate box)

Road

Rail

Air

5g. Name of individual accompanying consignment

5h. Proposed date of transportation

5i. Route (for eg, roads,towns)

**Please save this document and email it to HSENI at:
mail@hse ni.gov.uk**