EXHAUST HOOD SUMMARY

When completing this form, please attach an engineering drawing of the fume hood as well as any available manufacturer's data associated with the equipment.

1. Company/Agency Name: ______________________________________________________

2. Equipment location:
   (Street Address and City)
   (Location Within the Facility, i.e. Building/Room Number)

3. Fume hood manufacturer: _____________________________________________________
   model: __________________ serial number: __________________

4. Dimensions of fume hood: (Please indicate the units of measurement)
   _______ Height _______ Width _______ Length _______ Fan blade size

5. Exhaust system's electric motor HP rating: ____________ CFM rating: ________________

6. Describe the equipment and process for which the fume hood is required:
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

7. Describe any equipment used for controlling the exhaust stream (e.g., carbon adsorption, scrubber, recondensing, oxidation) and provide manufacturer, model and serial no.:
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

8. If the fume hood or the equipment served by the fumehood is currently in place and operating, when was the fume hood and the associated equipment installed?
   Fume Hood: __________________ Assoc. Equipment: __________________
   (Date of Installation) (Date of Installation)

9. Additional comments: __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

10. This form was prepared by: ________________________________
    (Type or print name)
    on ____________________________
    (Date) ____________________________
    (Signature)
    Phone No. (____) ________________