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| BangorLogoRGB-1 | **LF1: REGISTRATION OF LASER EQUIPMENT CLASS 3R, 3B / 4** | | | |
|  | Project Supervisor to complete this Form and the *Laser Survey Form* for all Class 3R, 3B and 4 lasers and submit to the LSO for approval. | | | |
| **School / Service** | |  | | |
| **Laser Make** | |  | | |
| **Model** | |  | **Type** |  |
| **Serial No** | |  | **Class** |  |
| **Power** | |  | **Wavelength** |  |
| **Building** | |  | **Room** |  |

|  |  |
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| **Proposer (Project Supervisor (or other) responsible for laser system)** | |
| **Name** |  |

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| --- | --- | --- | --- | --- |
| **Laser a new acquisition? YES - complete A, NO – complete B (delete as appropriate)** | | | | |
| **A** | Anticipated date of first use: | | | |
| Outline work to be undertake and persons involved (UG, PG, PhD, Staff etc): | | | |
| **For Class 3R, 3B, 4 LASERS:** | | | |
| Laser Survey attached (see over) | **YES** | **NO** | If NO explain: |
| Risk Assessment attached | **YES** | **NO** | If NO explain: |
| **B** | Detail changes in use / status of the laser |  | | |

**AUTHORISATION**

|  |  |  |  |
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| **Project Supervisor** | | | |
| **Name** |  | | |
| **Signature** |  | **Date** |  |

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| **Laser Safety Officer** | | | | |
| **Name** | |  | | |
| **Signature** | |  | **Date** |  |
| BangorLogoRGB-1 | **LF1: LASER SURVEY FORM - CLASS 3R, 3B / 4** | | | |
|  | Project Supervisor to submit this Form with the *Registration of Laser Equipment Form* for all set ups involving Class 3R, 3B and 4 lasers **before** the laser is put into use for the first time and **annually** thereafter for all Class 3B / 4 lasers. | | | |
| **School** | |  | **Location** |  |
| **Make** | |  | **Model** |  |
| **Type** | |  | **Serial No** |  |
| **Wavelength** | |  | **Max Power & Class** |  |
| **Experiment Summary** | |  | | |

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|  | **Precautions** | **Class 1 / 1M** | **Class 1C** | **Class 2/2M** | **Class 3R** | **Class 3B** | **Class 4** |
| **Physical/Engineering Controls** | Door signage (standard warning symbol and including highest class of laser in use) |  |  |  |  |  |  |
| Emission Indicator |  |  |  |  |  |  |
| Remote Interlock |  |  |  |  |  |  |
| Key Control |  |  |  |  |  |  |
| Beam Shutter |  |  |  |  |  |  |
| Beam Stop |  |  |  |  |  |  |
| Beam Level (avoiding eye level if user seated or standing nearby) |  |  |  |  |  |  |
| Beam Enclosure (interlocked enclosure, shielding, covers, flight tubes etc) |  |  |  |  |  |  |
| **Administrative Controls** | Open Beam Working – justified in Risk Assessment if not prevented via engineering controls |  |  |  |  |  |  |
| Laser Labels (on equipment, close if device small) |  |  |  |  |  |  |
| Eye Protection (available, correct for lasers, stored correctly, undamaged, labelled) |  |  |  |  |  |  |
| Protection Clothing (eg for skin) |  |  |  |  |  |  |
| Paperwork (Risk Assessments, SOPs, MPE Calcs., High Risk Tasks covered (eg alignment) |  |  |  |  |  |  |
| Laser Users Registered & Trained (recorded) |  |  |  |  |  |  |

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| **Additional Controls** (engineering / administrative) | |
| **Recommended Actions** | |
| **Completed by** | **Signature** |