

TO: INFORMATION SECTION

PLEASE DESTROY ALL OLD FORMS

HASKELL LABORATORY TEST SUBSTANCE EVALUATION FORM

- i. Fill out a test substance evaluation form as completely as possible for each test substance submitted
- ii. If a test substance is being submitted for mutagenicity testing, pay special attention to Sections 6, 8 and 9.
- iii. Unless otherwise requested, test substances will be returned to submitter within six months after the final report is written.

Haskell No.: 20367
(to be assigned by Haskell Personnel)

1. Chemical Abstracts nomenclature: NA

Chemical Abstracts Registry No.: NA

2. Other name(s): LEAD CONTAMINATED SOIL
AEC-9-3

3. Cost Center identification code and/or lot number: _____

4. Structural formula: NA

(a) Molecular weight NA

5. Composition of mixtures by % (include all additives and solvents): 570 ppm
LEAD IN SOIL

6. Purity NA % (a) Impurities present: _____

7. Physical characteristics:

(a) Color: _____ (b) Form: _____ (c) m.p.: _____

(d) b.p. at 760 mm Hg.: _____ (e) Density: _____ (f) pH: _____

(g) Vapor pressure at 25 degrees C: _____ 37 degrees C: _____ (h) Vapor density _____

UNKNOWN (attach curve if available)

(i) Maximum process temp. _____ in presence/absence of air. (delete one)

- Estimated
8. Solubility: <0.1% 0.1% - 1% 1% - 10% or >10% (w/v)
- (a) Water: <0.1% (b) Dimethylsulfoxide: _____ (c) Ethanol: _____
 (d) Acetone: _____ (e) Vegetable Oil: _____ (f) Dimethylformamide: _____
9. Reactivity: NO
 (a) Will there be any significant reaction with water? NO
 If so, would the half-life be: <10 min., 10 min.-1 hr., 1 hr.-24 hrs., >24 hrs.
 (b) Will there be any significant reaction expected with either the solvents specified in (8) or sugars or amino acids? _____
10. Special handling instructions and/or toxicity information: AS PER MSDS
11. Will this test substance be used in a product subject to State, Federal or International approval? NO Please List Agency(ies) _____
12. Name of person completing form and date completed:
HANAN GHANTOUS 01/1/1993
 Cost Center/Location: _____
13. Name of person having knowledge of chemical properties of the test substance:
T. BINGMAN Phone No.: 8-571-7761
 Cost Center/Location: CHEMICALS
14. Test Substance Submitted By: T. BINGMAN Phone No.: 8-571-7761
 Cost Center/Location: CHEMICALS
15. General Ledger & Sub-Account Cost Code: _____ or MR: 9727

- FOR SHIPPING PURPOSES ONLY -
 U.S. DEPT. OF TRANSPORTATION HAZARD CLASSIFICATION FOR SHIPPING, LABELING, AND PACKAGING
 HAZARDOUS MATERIAL* NO YES (IF YES, COMPLETE CLASSIFICATION BELOW.)
 (Check PRIMARY hazard applicable and identify all other hazards by underlining.)

Explosive Class A B C

Enologic Agent	_____	Oxidizer	_____
Organic Peroxide	_____	Flammable Sol.	_____
Radioactive Material	_____	Corrosive Material (Liquid)	_____
Poisonous Gas, Class A	_____	Poisonous Liquid, Class B	_____
Poisonous Liquid, Class A	_____	Poisonous Solid, Class B	_____
Flammable Gas	_____	Corrosive Material (Solid)	_____
Nonflammable Gas	_____	Irritating Material	_____
Flammable Liquid	_____	Combustible Liquid	_____
If flash point is below 100°F**	_____	Other Regulated Material A <u> </u> B <u> </u> C <u> </u> D <u> </u> E <u> </u>	

* As defined in 49 CFR part 173.

** Flash point - Tag C.C. _____ F.

Rev. 5/18/84