Laser Inventory Form				
Principal Investigator Office Ph. #				
Department Date				
Please complete for each laser (excluding laser printers, pointers, bar code readers).				
Use additional sheets, if necessary.				
Laser Manufacturer		Model		Serial Number
Wavelength(s):	um □nm	Max. Beam Powe	r/Energy:	□mW □mJ
Wavelength(s):				
Wavelength(s):				
Wavelength(s):				□mW □mJ
Wavelength(s):	Jum □nm	Max. Beam Powe	r/Energy:	□mW □mJ
Wavelength(s):				
Wavelength(s): □µm □nm				
by manufacturer: $\Box 1$ $\Box 2a$ $\Box 2$ $\Box 3a$ $\Box 3b$ $\Box Yes$ $\Box N\Box$ $\Box D\Box n't$ $Kn\Box w$				
□4 □Unknown				
Laser Location-Bldg:	.0 ,,,,,	Room #:		Lab. Ph.#:
Laser Manufacturer		Model		Serial Number
Wavelength(s):	lµm □nm	Max. Beam Powe	r/Energy:	□mW □mJ
Wavelength(s):				
Wavelength(s):				□mW □mJ
Wavelength(s):				□mW □mJ
Wavelength(s):				□mW □mJ
Wavelength(s):				□mW □mJ
Wavelength(s):	Jµm □nm	Max. Beam Powe	r/Energy:	 □mW □mJ
Hazard class of laser as indicated Has laser been modified and the hazard class changed?				
by manufacturer: □1 □2a □2 □3a □3b □Yes □N□ □D□n't Kn□w				
☐4 ☐Unkn	own			
Laser Location-Bldg:	i	Room #:		Lab. Ph.#:
Manufacturer		M□del		Serial Number
Wavelength(s):	Jµm □nm	Max. Beam Powe	r/Energy:	□mW □mJ
Wavelength(s):	Iµm □nm			□mW □mJ
Wavelength(s):				□mW □mJ
Wavelength(s):				□mW □mJ
Wavelength(s):	Iµm □nm	m □nm Max. Beam Power/Energy: □mW □mJ		
Wavelength(s):]µm □nm	Max. Beam Powe	r/Energy:	□mW □mJ
Wavelength(s):				
Hazard class of laser as indicated Has laser been modified and the hazard class changed?				
by manufacturer: □1 □2a □2 □3a □3b □Yes □N□ □D□n't Kn□w				
□4 □Unkn				
T T 1 D11		Room #:		Lab. Ph

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