**Lab Environmental Management Plan**

**Lab Number**

**Lab green champion ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Personal Workstations/Offices**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of equipment** | **All staff responsible for own** (Tick if applicable) | **Or duty assigned to**(List Staff Name) | **Checked By** (Initials, check randomly) |
| **Personal Computers**  |  |  |  |
| **Personal Printers** |  |  |  |
| **Personal Heaters** |  |  |  |
| **Monitors** (If leaving desk for 10 minutes or more) |  |  |  |
| **Lamps** |  |  |  |

**Communal Areas**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of equipment** | **All staff responsible for own** (Tick if applicable) | **Or duty assigned to**(List Staff Name) | **Checked By** (Initials, check randomly) |
| **Printers** |  |  |  |
| **Scanners/photocopiers** |  |  |  |
| **Lights** |  |  |  |
| **Heating** |  |  |  |
| **Paper Shredders** |  |  |  |
| **Laminators** |  |  |  |

**Fume cupboards**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of equipment** | **All staff responsible for own** (Tick if applicable) | **Or duty assigned to**(List Staff Name) | **Checked By** (Initials, check randomly) |
| **Sash** |  |  |  |
| **Lights** |  |  |  |
| **Status** |  |  |  |
|  **Switch off** |  |  |  |

**Water**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of equipment** | **All staff responsible for own** (Tick if applicable) | **Or duty assigned to**(List Staff Name) | **Checked By** (Initials, check randomly) |
| **Condensors etc** |  |  |  |
| **Cooling** |  |  |  |
| **General taps** |  |  |  |
|  **Leak reporting** |  |  |  |
|  |  |  |  |

**Waste**

|  |  |  |  |
| --- | --- | --- | --- |
| **Check items** | **All staff responsible for own** (Tick if applicable) | **Or duty assigned to**(List Staff Name) | **Checked By** (Initials, check randomly) |
| **Quantity of bins** |  |  |  |
| **Status of bins** |  |  |  |
| **Contents of bins** |  |  |  |
|  |  |  |  |

**Fridges /freezers**

|  |  |  |  |
| --- | --- | --- | --- |
| **Check items** | **All staff responsible for own** (Tick if applicable) | **Or duty assigned to**(List Staff Name) | **Checked By** (Initials, check randomly) |
| **Appropriate temperature** |  |  |  |
| **Ice forming** |  |  |  |
| **Contents in date** |  |  |  |
| **Contents appropriate** |  |  |  |
| **Contents suitable amount / packing** |  |  |  |