



# Safety Platform Cargo Surveyors

## SAFETY CHECKLIST SAMPLING PHENOL

<b>Vessel:</b>	
<b>Date &amp; Time:</b>	
<b>Location:</b>	
<b>Inspectors reference:</b>	
<b>Tanks to be sampled:</b>	

<b><i>To be completed by ship's representative:</i></b>	<b>Yes</b>	<b>No</b>
Are above mentioned tank(s) to be sampled correct?		
Are ship's crew members available for assistance and emergencies (radio readily available)?		
Are ship's crew members aware of PPE requirements/procedures?		
Are PPE's checked and in good order?		
Are tanks to be sampled depressurized?		
Is a bucket of warm water available nearby sampling locations?		
Is the emergency procedure known and are the contact details of emergency team(s) readily available?		
Are only authorized persons on deck during sampling?		
In case of closed sampling via circulation lines: are sampling points flushed, clean and free of frozen product?		

<b><i>To be completed by Surveyor:</i></b>	<b>Yes</b>	<b>No</b>
Is surveyor aware of PPE requirements/procedures?		
Are PPE's checked and in good order?		
Is a new filter canister available designated to sample phenol (canister type A-P3)?		
Is the surveyor aware of the chemical waste disposal requirements for sampling materials?		
Is a neutralizing agent such as PEG readily available?		

All clear on deck?		
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**All questions have to be answered with yes! If not, no sampling can be performed. First rectify!**

For confirmation of the above:

**Vessel Representative**

*(signature + stamp)*

For confirmation of the above,

and on behalf of \_\_\_\_\_ (name company)

*(signature)*

Name: \_\_\_\_\_

Name: \_\_\_\_\_