

SEFA-9-A Application Questionnaire

Chemical Compatibility Questionnaire

Model and serial number

of fume hood

Filter part number being used

SEFA-9-A

RALAB requires that you complete the following questionnaire when buying a ductless fume hood. If you have questions or need assistance please contact your laboratory safety officer or contact RALAB customer service Toll-Free 1-844-446-7450.

Complete and return to RALAB via Toll-Free 1-844-446-7450, Email lab@ralab.ca.

*Required Field

About You (Person Submitting Quotation Request)

First Name*

Last Name*

Title*

Facility/Institution*

Building/Room Number

Street Address*

Street Address 2

City*

State*

Zip*

If an Existing Application

Contact information and Conta	act Preference	
Phone Number*		
Fax Number		
Email Address*		
Your Web Site		
How Would You Like To Be Contacted?* If by phone, when is the best time to call?	Phone	Email

Intended Chemical Applications (Per SEFA-9-A Format)

	Material ID Number Amount Concentration Temperature			Container	Frequency	Comment	
Example:	lsopropyl alcohol, CAS 67 63 0	100ml	98%	Room Temperature	250 ml beaker	2 hours daily	
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Certification by Person Submitting Form

I certify that in my capacity as (your position in the company/facility/institution) in (company/facility/institution) I believe to the best of my knowledge that all data and information submitted in this Chemical Applications Questionnaire, form RALAB Ductless is truthful and accurate and that no material fact has been omitted.

Name

Email

Address Date

