

**San Diego State University
Environmental Health and Safety**

Chlorination Notification

I. Project Manager: Notify EHS 5 working days prior to proposed chlorination date by completing and submitting this form to EHS.

Disinfectant Company: _____

Proposed Date of Chlorination: _____

Water System(s) to be Chlorinated: _____

Was the System Initially Flushed?: _____

Proposed Chlorination Method: _____

Chlorine Agent to be Used: _____

II. Project Manager: Signature and Date: _____

Company Name: _____

Phone Number: _____

Email Address: _____

III. EHS: Date Notification Form Received: _____

Date Program Manager Notified to Proceed w/ Chlorination: _____