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EMERGENCY CONTACT INFORMATION

Principal Investigator:		Work Phone	Home Phone:	Cell Phone:
Laboratory Manager:				
Location of Chemical Inventory:				
Location of Designated Areas:	[entire lab or spe	[entire lab or specific location(s) - required for CSL-2 and -3 labs]		
Location of Extremely Hazardous Activities	[entire lab or	specific location(s) - re	quired for CSL-3 labs]	

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