Laser Modification/Fabrication Form

Section 1: Owner Information

Principal Investigator:  
Department:  
Office Phone Number:  
Date of Submission:  

Section 2: Original Laser Device Information (if modifying)

Manufacturer:  
Model:  
Serial Number:  
Laser Type (e.g. HeNe):  
Laser Class (3b or 4):  
Pulsed or Continuous Wave  
Max Power/Energy (mW/mJ)  
Wavelength(s) (nm)  

Section 3: Proposed Modifications/Fabrication

Be sure to include anticipated changes to Laser Class, Wavelength, or Inherent Hazards

Section 4: Justification for Modification/Fabrication


For EHS Use Only:

Date Reviewed:  
Reviewed By:  
New Dartmouth Laser ID Number:  
Laser Inspection Schedule: