

**FORM OF NOTIFICATION FOR USE OF A GROUP 2, 3 OR 4 BIOLOGICAL AGENT\***

*As required under Regulation 14 (1) (e) of the Safety, Health and Welfare at Work (Biological Agents) Regulations, 2013 (S.I. No. 572 of 2013)*

*This form must be submitted to the Health and Safety Authority 30 days prior to the commencement of work involving the use for the first time of a group 2 or 3 or 4 biological agent or for the first time of each subsequent group 4 biological agent and any subsequent new group 3 biological agent, where the employer himself classifies that biological agent.*

***For Office Use Only***

|  |  |  |  |
| --- | --- | --- | --- |
| *Employer Place of Work No. (EPOW)* | *Employer No.* | *Correspondence No.* | *Date Received* |
|  |  |  |  |
| *Comments:* | | | |

**Section 1**

***For Notifier to complete ( in the case of UCC the notifier is PI Head of Department OR THEEIR DESIGNATED NOMINEEE***

|  |  |
| --- | --- |
| 1. *Name of Company/Establishment* |  |
| 1. *Company Registration Number (CRO No) (if applicable)* |  |
| 1. *Address & Telephone Number of*   *Company/Establishment* |  |
| 1. *Email address* |  |
| 1. *Address of premises where the*   *biological agent will be stored or used*  *(if different to 3 above)* |  |
| 1. *Date of Notification* | Click here to enter a date. |
| 1. *Type of Notification* | Choose an item. |
| (if ‘other’ chosen please state why or if re-notification state reasons why) |

**Section 2**

|  |  |  |
| --- | --- | --- |
| 1. *Type of Biological Agent being notified* | | Choose an item. |
| (If other please state) |
| 1. *Species of biological agent* | |  |
| 1. *Biological agent classification group* | | Choose an item. |
| 1. *Name(s), qualifications and relevant experience of people responsible for safety and health at work* | | |
| 1. *Results of risk assessment (as required under Regulation 7 of the above Regulations)* | | |
| 1. *Protective and preventative measures envisaged* | | |
| *Name of Notifier:* |  | |
| *Position in Company / Establishment:* |  | |
| *Contact Telephone Number:* |  | |
| *Contact Email Address:* |  | |

Forms should be sent to:

1. [**bioagents\_notif@hsa.ie**](mailto:bioagents_notif@hsa.ie) **or**
2. **Health & Safety Authority, Occupational Hygiene Unit, 3rd Floor, Hebron House, Hebron Rd, Kilkenny**

**\* Classification of Biological Agents – Groups 2, 3 & 4**

A "group 2 biological agent", means one that can cause human disease and might be a hazard to employees, although it is unlikely to spread to the community and in respect of which, there is usually effective prophylaxis or treatment available

A "group 3 biological agent" means one that can cause severe human disease and presents a serious hazard to employees and which may present a risk of spreading to the community, although there is usually effective prophylaxis or treatment available

A "group 4 biological agent" means one that causes severe human disease and is a serious hazard to employees and which may present a high risk of spreading to the community and in respect of which there is usually no effective prophylaxis or treatment available

**Refer to Schedule 1 of the Code of Practice for the Safety, Health and Welfare at Work (Biological Agents) Regulations, 2013** (**S.I. No .248/1998), for current classification of biological agents.**