

New Jersey Department of Health
PEOSH Unit

SAMPLE LETTER REQUESTING MSDS'S

(Date)

(Name)
(Address)

Dear _____:

Please send me an up-to-date copy of your Material Safety Data Sheet (MSDS) for the product(s) listed below. The MSDS is needed for compliance with the New Jersey Public Employees Occupational Safety and Health Act Hazard Communication Standard, N.J.A.C. 12:100-7, which requires employers to obtain and maintain MSDS's for each hazardous product and chemical they use.

Product or Chemical Name and Identifying Information

(1) _____ (3) _____
(2) _____ (4) _____

If this product does not require an MSDS, please notify us in writing to that effect.

Please send the MSDS to:

(Name)
(Title)
(Company)
(Address)

If you have any questions regarding this request, please contact (name and telephone number).

Sincerely,

(Name of Public Employer)