

EYE WASH TESTING

DATE 10/3/19

UNIT #	✓	UNIT #	✓	UNIT #	✓
<b>BIOCHEM LABS</b>					
<b>SUB BASEMENT</b>					
B242 2	<input checked="" type="checkbox"/>				
<b>BASEMENT</b>					
B175 3	<input checked="" type="checkbox"/>				
<b>1ST FLOOR</b>					
161 4	<input checked="" type="checkbox"/>				
145 5	<input checked="" type="checkbox"/>				
145 6	<input checked="" type="checkbox"/>				
123 7	<input checked="" type="checkbox"/>				
123 8	<input checked="" type="checkbox"/>				
123 9	<input checked="" type="checkbox"/>				
<b>2ND FLOOR</b>					
265 10	<input checked="" type="checkbox"/>				
259 11	<input checked="" type="checkbox"/>				
255 12	<input checked="" type="checkbox"/>				
249 13	<input checked="" type="checkbox"/>				
245 14	<input checked="" type="checkbox"/>				
237 15	<input checked="" type="checkbox"/>				
233 16	<input checked="" type="checkbox"/>				
219 17	<input checked="" type="checkbox"/>				
207 18	<input checked="" type="checkbox"/>				
275 19	<input checked="" type="checkbox"/>				
<b>3RD FLOOR</b>					
363 20	<input checked="" type="checkbox"/>				
345 21	<input checked="" type="checkbox"/>				
337 22	<input checked="" type="checkbox"/>				
333 23	<input checked="" type="checkbox"/>				
319 24	<input checked="" type="checkbox"/>				
307 25	<input checked="" type="checkbox"/>				
379 26	<input checked="" type="checkbox"/>				
375 80	<input checked="" type="checkbox"/>				
373 27	<input checked="" type="checkbox"/>				
<b>4TH FLOOR</b>					
461 28	<input checked="" type="checkbox"/>				
457 29	<input checked="" type="checkbox"/>				
445 30	<input checked="" type="checkbox"/>				
435 31	<input checked="" type="checkbox"/>				
419 32	<input checked="" type="checkbox"/>				
407 33	<input checked="" type="checkbox"/>				
473 34	<input checked="" type="checkbox"/>				
<b>5TH FLOOR</b>					
563 35	<input checked="" type="checkbox"/>				
563 36	<input checked="" type="checkbox"/>				
557 37	<input checked="" type="checkbox"/>				
545 38	<input checked="" type="checkbox"/>				
545 39	<input checked="" type="checkbox"/>				
580 40	<input checked="" type="checkbox"/>				
<b>BSB 85 WING</b>					
<b>6TH FLOOR</b>					
6424A 41	<input checked="" type="checkbox"/>				
6420B 42	<input checked="" type="checkbox"/>				
6412A 43	<input checked="" type="checkbox"/>				
6406A 44	<input checked="" type="checkbox"/>				
<b>4TH FLOOR</b>					
4424 45	<input checked="" type="checkbox"/>				
4416B 46	<input checked="" type="checkbox"/>				
4416A 47	<input checked="" type="checkbox"/>				
4406A 48	<input checked="" type="checkbox"/>				
<b>3RD FLOOR</b>					
3416 49	<input checked="" type="checkbox"/>				
<b>2ND FLOOR</b>					
2424A 50	<input checked="" type="checkbox"/>				
2416A 51	<input checked="" type="checkbox"/>				
2410 52	<input checked="" type="checkbox"/>				
2406 53	<input checked="" type="checkbox"/>				
<b>1ST FLOOR</b>					
1404 54	<input checked="" type="checkbox"/>				
<b>BSB</b>					
<b>BASEMENT</b>					
B2422 55	<input checked="" type="checkbox"/>				
B2423 56	<input checked="" type="checkbox"/>				
B2409 57	<input checked="" type="checkbox"/>				
<b>3RD FLOOR</b>					
3228 58	<input checked="" type="checkbox"/>				
3222 59	<input checked="" type="checkbox"/>				
3212 60	<input checked="" type="checkbox"/>				
3210 61	<input checked="" type="checkbox"/>				
3211 62	<input checked="" type="checkbox"/>				
<b>3RD FLOOR</b>					
3206 63	<input checked="" type="checkbox"/>				
3270 64	<input checked="" type="checkbox"/>				
3268 65	<input checked="" type="checkbox"/>				
3265 66	<input checked="" type="checkbox"/>				
3266 67	<input checked="" type="checkbox"/>				
3241 68	<input checked="" type="checkbox"/>				
<b>2ND FLOOR</b>					
2228 69	<input checked="" type="checkbox"/>				
2222 70	<input checked="" type="checkbox"/>				
2212 71	<input checked="" type="checkbox"/>				
2210 72	<input checked="" type="checkbox"/>				
2206 73	<input checked="" type="checkbox"/>				
2267 74	<input checked="" type="checkbox"/>				
2265 75	<input checked="" type="checkbox"/>				
2268 76	<input checked="" type="checkbox"/>				
2264 77	<input checked="" type="checkbox"/>				
2241 78	<input checked="" type="checkbox"/>				
<b>SHIPPING</b>					
1257 79	<input checked="" type="checkbox"/>				