

# WASTE DISPOSAL FORM/MANIFEST



Originator (print name): \_\_\_\_\_ Dept: \_\_\_\_\_ Location: \_\_\_\_\_

Date: \_\_\_\_\_ Individual to Coordinate Pickup: \_\_\_\_\_ Phone # : \_\_\_\_\_ Fund # : \_\_\_\_\_

## MATERIAL IDENTIFICATION

Use Name - Do Not Abbreviate or Use the Chemical Formula

*ID #	*Liquid or Solid	LIST ALL COMPONENT(S) IN EACH CONTAINER (one component per line)	Estimated volume % or wt. of each component	*TOTAL NET Volume (L) or Wt. (KG) of Container	Container Size and TYPE	If radioactive, put total acty. In mCi (of each container)	*EPA Haz Number	*Haz Mat Class or Division	*Est. Cost of Disposal

\*Shaded Areas for Safety Office Only

This material is properly described, has descriptive labels, and is in a proper container for handling and transporting in accordance with the University's Chemical Waste Disposal Handbook.

\_\_\_\_\_  
Generator's Signature