

HAZARDOUS WASTE DISPOSAL FORM

Name:	
Lab/Room Number:	
Which campus are you on?	
Which department are you in?	
Chemical 1	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 2	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 3	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	

Chemical 4	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 5	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 6	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 7	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	

Chemical 8	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 9	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	
Chemical 10	
Chemical Name:	
Quantity of Waste:	
Size and Type of Container:	
Location of Waste:	