

HAZARDOUS WASTE DISPOSAL IDENTIFICATION LABEL



Item No: _____ (from Waste Tracking Log)

Waste Generator Information:

Name: _____ Phone: _____

School/Unit: _____ Date: _____

Waste Information:

Type: Solid Liquid Sharps Other: _____

GROSS Package Size: _____ NET Weight/Volume (approx): _____

RADIATION

This item contains:

	Chemical Name	UN No.	DG Class	Pkg Grp
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

Radionuclide: _____ Estimated Current Activity (Bq): _____

Other Precautions: _____

ALWAYS SEGREGATE YOUR WASTE RESIDUE INTO COMPATIBLE CLASSES

To be Completed When Approved for Removal by Waste Contractor

Date Cleared: _____ Specific Activity: _____

University RSA Signature: _____ Date: _____

HRD-WHS-FRM-370.6

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