

Hazardous Waste

WasteTrack ID





Wastetrack category (please select only one category)

- | | | |
|---|---|--|
| <input type="checkbox"/> I: Special waste | <input type="checkbox"/> VI: Heavy metal waste | <input type="checkbox"/> XI: NPS containing |
| <input type="checkbox"/> II: Cyanide waste | <input type="checkbox"/> VII: Acid waste | <input type="checkbox"/> XII: Halogenated waste |
| <input type="checkbox"/> III: Oxidizing waste | <input type="checkbox"/> VIII: Alkaline waste | <input type="checkbox"/> XIIIa: Combustible solid |
| <input type="checkbox"/> IV: Mercury waste | <input type="checkbox"/> IX: Petroleum products | <input type="checkbox"/> XIIIb: Incombustible solid |
| <input type="checkbox"/> V: Chromate waste | <input type="checkbox"/> X: Oxygenated waste | <input type="checkbox"/> XIV: Miscellaneous aqueous waste |
| | | <input type="checkbox"/> XV: Expired or deteriorated chemicals |

Qty:..... L/ kg

Chemical composition	% of total or actual volume
(List all chemicals, including water)	

For hazard communication, check all that apply:

			
Flammable	Corrosive	Toxic	Oxidizing
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Others
(please specify)

Lab Department:.....

Lab Name:.....

Contact Person:.....

Telephone #:.....

Start Date for Waste Collection:.....

Finish Date for Waste Collection:.....