



UNIVERSITY OF WASHINGTON
NEW ROUTINE COLLECTION REQUEST
 ENVIRONMENTAL HEALTH AND SAFETY

Fill in on-line, then print, sign and
 FAX to: 206-685-2915
 or mail to: Box 354110

UoW 1471 (Rev.3/06)

| | | | |
|--------------|---------------|---------------|--------------------|
| Department | Building | Room | Supervisor or PI |
| Contact Name | Contact Phone | Contact Email | Contact Box Number |

WASTE COMPOSITION

List all components of waste. Please list full chemical names. For solutions and mixtures, include solvent(s) and percentage of all components.
Percents must total 100%.

| CHEMICAL | PERCENTAGE |
|--------------|------------|
| 1. | % |
| 2. | % |
| 3. | % |
| 4. | % |
| 5. | % |
| 6. | % |
| 7. | % |
| 8. | % |
| 9. | % |
| 10. | % |
| 11. | % |
| 12. | % |
| TOTAL | |

PACKAGING INFORMATION

Container Type:

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Safety Can Size: _____ | <input type="checkbox"/> Other Reusable Size: _____ | <input type="checkbox"/> Glass Bottle Size: _____ | <input type="checkbox"/> Plastic Bottle Size: _____ | <input type="checkbox"/> Other (specify) _____ Size: _____ |
|--|--|--|--|---|

CERTIFICATION

I certify that the information provided is accurate and complete and that the materials referenced will be correctly packaged and labeled according to the University of Washington Laboratory Safety Manual. I will inform Environmental Health and Safety of any change in the above information.

Signature _____ Date _____

Once you have a Waste Routine Number, you can fill out the online form to request collection of your waste. The form is located on our website at:

<http://www.ehs.washington.edu/forms/epo/routinepickup.php>

ENVIRONMENTAL HEALTH AND SAFETY USE ONLY

| | | |
|--|------------------|----------------------------|
| Proper Shipping Name | | Oxidizer |
| Disposal Option | | <input type="checkbox"/> + |
| RQ: | DOT Hazard Class | <input type="checkbox"/> - |
| Packing Group | | pH: _____ |
| UN Number | | Other: _____ |
| Waste Codes: | | |
| Schedule | | Technologist Initials |
| <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> On-Call | | Zone |