University of Massachusetts Dartmouth

Start Date _______________ Date Full _______________

Hazardous Waste

Check all relevant hazards

_____ Flammable
_____ Toxic
_____ Corrosive
_____ Reactive
_____ Other ________________

Faculty Member _______________ Dept. _______________

Location _______________ Phone _______________

Date __________ Identity of Waste (full name only) __________ Quantity and Concentration

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Contact the Safety Officer 999-8242 for waste removal
Call x-9191 for emergencies