UCSB

HAZARDOUS MATERIALS/WASTE PICKUP REQUEST

For Waste Pickup: DO NOT CALL EH&S. PLEASE USE CAMPUS MAIL, ONLINE REQUEST OR FAX TO 893-8659.

Send To: Hazardous Waste Program Office of Environmental Health and Safety

Please provide all information requested in non-shaded areas. List no more than one type of container Instructions: per line. (Use additional lines to describe container contents, if needed.) Photocopy this form for future use.

Materials/waste must be segregated, labeled and packaged according to the Campus Hazardous Waste Disposal Procedures and must be itemized below or it will not be picked up. Date _____

_____ Dept_____ Bldg_____ Room _____ Phone_____

	Contact Name Dept			Bldg_		R	oom	Phone
不	PI Name Waste I	Locatio	n (if differe	nt from abo	ove)			
	*** Non-research areas (instruction, maintenance, etc	c.) mus	t provide re			r waste	e will not	be picked up.
	Recharge #:			Notes:			EH&	S Use Only
	Proper Chemical Name*	# Cont	Container Size		State (S,L,G)		EPA/ Other	Container Date (
	Example: Acetone, 90%; Methanol, 10%	2	4 L	3.6 L	L			
G								
N E R								
A T O								
R								

*** Non-research areas (instruction, maintenance, etc	:.) mus	t provide re	charge nui	mber or	waste	e will not	be picked up.	
Recharge #:		-	Notes:			FH&S	S Use Only	
	#	Container	Qty**	State	State		Container #	
Proper Chemical Name*	[#] Cont	Size		(S,L,G)		Other	Date ()	
Example: Acetone, 90%; Methanol, 10%	2	4 L	3.6 L	L				
								_
								_

*Please list materials by their chemical name, not chemical formula, and provide an MSDS for unusual product names. All constituents in mixtures, solid and liquid, must be identified and their concentrations stated. All unknowns must be analyzed by the generator or EH&S and their hazardous components identified at the generator's expense.

**Please indicate the quantity of material inside each container, not the total quantitiy of all containers.

THIS MATERIAL IS FULLY AND ACCURATELY DESCRIBED AND CONTAINED FOR SAFE HANDLING TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Ł	(Signature)		(Date)
R A	EH&S Use Only		
N S P O	University of California at Santa Barbara Office of Environmental Health and Safety Hazardous Waste Program	State Transporter ID: 420775 UCSB Transporter ID: 8593	
R	Santa Barbara, CA 93106-5132	Request Received	Form#
E R	(805) 893-3194	Date of Pickup	Name

UCSB HAZARDOUS MATERIALS/WASTE PICKUP REQUEST (Continuation Sheet) PLEASE PRINT

Contact Name	Date					
	 				EH&	S Use Only
1						

EH&S Use Only:	
Form #	
Pickup Date	