



Unwanted Materials

Contact Name: _____

Phone #: _____ Container ID #: _____

Hazard(s):	IGNITABLE
TOXIC	CORROSIVE
OXIDIZER	Non Hazardous
REACTIVE	Other: _____

Waste Description:

Contents:	Concentration
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Accumulation Start Date: _____

Dispose By Date: _____

Waste must be disposed within one year of accumulation date.



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