

UNIVERSITY of



DAYTON

ENVIRONMENTAL HEALTH & SAFETY

Phone (937) 229-4503

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HAZARDOUS WASTE MULTIPLE ITEMS LAB PACK REQUEST FORM

Date:	
Building/Room:	Department:
Contact Person:	Account Number (Auxiliary and UDRI Depts only):
Phone Number:	Authorized by:

Product/Chemical Name: (if mixed waste, list all constituents) _____		
Phase (S, L, G):		
Container Size:		
No. of Containers:		
Total Waste Volume:	Waste Classification	
Location of Waste:	O 1 Flammable Liquid	O 5 ORM
PH:	O 2 Flammable Solid	O 6 Poison
Flash Point:	O 3 Combustible Liquid	O 7 Oxidizer
CAS #:	O 4 Corrosive Material	O 8 Radioactive
Additional Information:		

Product/Chemical Name: (if mixed waste, list all constituents) _____		
Phase (S, L, G):		
Container Size:		
No. of Containers:		
Total Waste Volume:	Waste Classification	
Location of Waste:	O 1 Flammable Liquid	O 5 ORM-A
PH:	O 2 Flammable Solid	O 6 Poison-B
Flash Point:	O 3 Combustible Liquid	O 7 Oxidizer
CAS #:	O 4 Corrosive Material	O 8 Radioactive
Additional Information:		

Send completed form to: Fax (937) 229-4395 (Zip +2905) or <mailto:Katherine.Cleaver@notes.udayton.edu>