

Bulk Chemical Waste Pickup Form

Fill out this form, save it to your hard drive, then email it as an attachment to safety@vims.edu

Originator _____	Department _____	Date _____
Building _____	Room # _____	Phone # _____
Waste (list number of each type of waste container) Chlorinated _____ Non-Chlorinated _____ Formaldehyde / Formalin _____ Formic Acid _____ Bouins _____ Tissue Dry _____ Cytochalasin B _____ Ethanol / Isopropyl _____ Other – bulk waste must have name and amount or % of individual constituents listed: 		
Container Size of Container _____ Amount in Container _____ Total Number of Containers _____ Type of Container: _____ Returnable _____ Non-Returnable _____ Glass _____ Metal _____ Plastic _____ Other:		
For Safety Office Use: Weight: _____ Remarks: _____		