

# HAZARDOUS WASTE DISPOSAL FORM



## DO NOT WRITE IN THIS AREA

Generator Registration

Number – N.B. 005100

Inventory No.: \_\_\_\_\_

Date: \_\_\_\_\_

## COMPLETE THIS SECTION (SEE INSTRUCTIONS ON NEXT PAGE)

1. Name of shipper: \_\_\_\_\_
2. University Department: Telephone: \_\_\_\_\_
3. Name of Waste Generator (if different from above): \_\_\_\_\_
4. Location of Hazardous Waste Building: \_\_\_\_\_ Floor: \_\_\_\_\_ Room #: \_\_\_\_\_
5. Containers:           Number: \_\_\_\_\_ Type: \_\_\_\_\_  
                                  Size: \_\_\_\_\_ Volume/Weight of Waste: \_\_\_\_\_
6. Product Name: \_\_\_\_\_
7. Physical State (circle one):   Solid                   Liquid                   Gas
8. Product Identification No. (P.I.N.): \_\_\_\_\_
9. Dangerous Goods Class: Hazard Guide No.: \_\_\_\_\_
10. W.H.M.I.S Class: \_\_\_\_\_
11. Description of Hazard: \_\_\_\_\_
12. Authority of Department Head: \_\_\_\_\_

## DO NOT WRITE IN THIS AREA

Disposal Method \_\_\_\_\_

Container Handling \_\_\_\_\_

Comments \_\_\_\_\_

Authorization \_\_\_\_\_

## INSTRUCTIONS FOR COMPLETING THE HAZARDOUS WASTE DISPOSAL FORM

Complete 1 Form for each product waste generated.

1. **Identify the Shipper as the person making the request for chemical disposal.**
2. Self-explanatory.
3. The **waste generator** is the person who actually generated the waste (eg. faculty) and may be different than the person making the request for disposal (eg. technician).
4. Self-explanatory.
5. Identify the **number** of containers, the **volume** of waste in the **size** of container and the **container type** (eg. metal, plastic, glass and open-head or sealed). **Note: glass containers can not be transported as is.** They must be well-packed and sealed in a box or similar container.
6. Identify the waste by **product** or **chemical name** (and trade name, if applicable) estimating the **percentage** of each component.
7. Identify the **physical state** of the material.
8. Specify the **P.I.N.** available from the M.S.D.S., the 'Dangerous Good Guide' or the 'InitialEmergencyResponseGuide'.
9. Specify chemical waste **classification**. Information available from references in item No. 8 above or consult the Manager of Environmental Health, Security & Safety at 648-5505.
10. Specify toxicity and/or **Hazard Information** from the M.S.D.S. or T.D.G. Regulations. Specify 'Risk Group' for Biohazardous Waste.
11. A validating **signature** is required by law for disposal from the administrative head of the department or the staff certified under the Transportation of Dangerous Goods Regulations to handle chemicals.
12. Upon receipt of this form the Manager of Security & Safety supplies a **Hazardous Waste Label** to the shipper. This label must be applied to the appropriate containers as soon as it is received. The information on the label must not be altered in any way.

**No Hazardous Waste is to be placed in Room 47 Ganong Hall until proper documentation has been completed. Chemical disposal companies will not handle waste that is not properly identified.**