

HAZARDOUS WASTE DISPOSAL TAG

Accumulation Start Date _____
Accumulation End Date _____
Contact Name/Phone No. _____
Department _____
Building/Room No. _____
Chemicals _____ %

- Physical Property: Liquid Solid Gas
 Other _____
- Quantity: ___ Liter(s) ___ Gallon(s)
 Other _____
- Reacts With: None Air Water
 Other _____
- Hazards: Ignitable (D001) Explosive
 Corrosive(D002) Oxidizer
 Reactive (D003)
 Toxic - Specify _____
 Other _____

Please email safety@shsu.edu to request a waste pickup when container is full.

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