

# Hazardous Waste Identification

Start Date: \_\_\_\_\_ Room #: \_\_\_\_\_ PI(s)/Lab Manager: \_\_\_\_\_

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

- Corrosive       Halogenated       Non-Halogenated       Flammable  
 Oxidant       Toxic       Other \_\_\_\_\_

Contents (do not use formulas or abbreviations)      Amount Percentage/Volume/Concentration

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