UNIVERSITY OF ALABAMA AT BIRMINGHAM HAZARDOUS MATERIALS MANAGEMENT

HAZARDOUS WASTE MANIFEST

1) Generator Name _____
2) Blazer ID _____
3) Building _____ 3) Room _____
4) Telephone _____ 5) Date _____
6) Department _____
7) Person Completing Manifest _____

OHS SUPPORT FACILITY USE ONLY
EPA Generator # ALD06-369-0705

Technician(s) _____
Date Transported _____

(8) Chemical Packing Code	(9) Chemical Compound (One constituent per line)	(10) %	(11) Physical Form	(12) Amt in ml or g	(13) # of Containers	(14) Type	(15) Control #

If there are any new or partially used chemicals that can be reused, please identify them at the time of pick up.

By entering my Blazer ID, I am certifying that I have successfully completed annual Hazardous Waste Handling and Packing Training (CS055) and that the above named articles are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to applicable requirements of the UAB Chemical Safety and Waste Management Program and the Department of Transportation.

(16) Blazer ID _____
Date

(Send a completed copy to chemwasteman@uab.edu - Attach a completed copy to the box - Retain a completed copy for your records)

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