

HAZARDOUS WASTE

NEW YORK UNIVERSITY

Environmental Services (212) 998-1450

Check the Primary Hazard

<input type="checkbox"/> Flammable	<input type="checkbox"/> Toxic	<input type="checkbox"/> Explosive
<input type="checkbox"/> Reactive	<input type="checkbox"/> Corrosive	<input type="checkbox"/> Oxidizer

DATE FULL: _____
(Remove to Waste Room within 3 days of Date Full)

COMPOSITION (IF MIXTURE, LIST ALL CONSTITUENTS AND %)
NO FORMULAE or ABBREVIATIONS

Labeled by: _____
Department: _____
Building: _____ Room: _____

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