

Submit this form and all other questions to:

healthandsafety@njit.edu

Phone: (973) 596-3059

NJIT WASTE REMOVAL REQUEST FORM

Lab Contact Information	Submittal Date:
Building:	This date reflects the date waste was submitted to EHS for hazardous waste determination. This date does not represent the end of waste accumulation.
Special Instructions:	FOR EHS USE ONLY:

Waste <u>will not</u> be removed unless the following requirements are met:

- Every waste container should have a NJIT waste label will all contents listed. Every item including water, solvents, and solid waste should be included on waste label.
- All waste container should be closed, sealed and in good condition.
- The waste labels are to be filled out completely including lab contact information, full name of all the chemical components and the approximate percentage of each substance if known
- If known, concentration percentages of each substance should equal 100%.
- Waste should be stored in designated waste storage area/s only.

Type of Waste													
	Chemica	al		Biolog	gical/Medical		Radiologi	cal		Acut Hazar			Universal
#	Container Type:	Qı	uantit	y/Size:	State of Contents:	Lo	ocation of Waste:		Conte	ents:	ŀ	lazard ⁻	Гуре:
EX.	Plastic (See NJIT Container Request Form)		1/1,	oint	Liquid (Solid/ Liquid)		er Fume Hood se be specific)			l, Water specific)		Flamme	able
1													
2													

 $^{{}^{1}\,\}underline{\text{https://www5.njit.edu/environmentalsafety/sites/environmentalsafety/files/Acutely\%20 Hazardous\%20 Waste\%20\%28 P-Codes\%29.pdf}$



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