



NJIT WASTE REMOVAL REQUEST FORM

Lab Contact Information Building: _____ Room: _____ Principal Investigator/Faculty: _____ Contact Information: _____	Submittal Date: _____ <i>This date reflects the date waste was submitted to EHS for hazardous waste determination. This date does not represent the end of waste accumulation.</i>
Special Instructions:	FOR EHS USE ONLY:

Waste will not be removed unless the following requirements are met:

- Every waste container should have a NJIT waste label with 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									
<input type="checkbox"/>	Chemical	<input type="checkbox"/>	Biological/Medical	<input type="checkbox"/>	Radiological	<input type="checkbox"/>	Acutely Hazardous ¹	<input type="checkbox"/>	Universal
#	Container Type:	Quantity/Size:	State of Contents:	Location of Waste:	Contents:	Hazard Type:			
EX.	<i>Plastic</i> <small>(See NJIT Container Request Form)</small>	<i>1/ 1 pint</i>	<i>Liquid</i> (Solid/ Liquid)	<i>Under Fume Hood</i> (Please be specific)	<i>Methanol, Water</i> (Please be specific)	<i>Flammable</i>			
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¹ <https://www5.njit.edu/environmentalsafety/sites/environmentalsafety/files/Acutely%20Hazardous%20Waste%20%28P-Codes%29.pdf>



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