

EH&S WASTE PICK-UP REQUEST

Date:



CONTACT INFORMATION:

PI Name:

Requestor
Name:

Department:

e-mail:

Phone
Number:

Building and
Room #:



SERVICE REQUIREMENT:

Replace Containers?

Service Type: Hazardous Waste
 Biological Waste
 Radioactive Waste
 e-Waste
 Universal Waste (Fluorescent
 Bulbs, Batteries)
 Used Oil

Other
(describe):

Amounts:

Description of
Wastes:



URGENCY:

Today

Tomorrow

Other

THANK YOU: Your request will be processed as soon as possible.