Request for Disposal of Radioactive Waste

(send requests to Radiation Safety Office)

Originator (print name)	Dept.	Date
Building	Room #	Phone

Identification and Description of Waste

ID #	Radioisotopes and Specific Activity (ex. μCi/ml or μCi/gm)	Chemical Components (% of each) - use chemical or generic name - do not abbreviate or use chemical formula	Total Quantity in Container	Size & Type Container
	Total Activity for each Radioisotope			

Hazards

(check all hazards that apply)

Explosive……☐
Compressed Gas – Nonflammable……☐
Compressed Gas – Flammable……☐
Poisonous Gas or Liquid……☐
Ignitable Liquid – est. flash point _____°C……☐
Organic Peroxide……☐
Flammable Solid……☐
Corrosive – est.pH _____ ……☐
Oxidizer……☐
Reactive……☐
Irritant – Intense Lachrymator……☐
Irritant – Skin Irritant/Sensitizer……☐

Other Hazards (describe below)

This material is properly described, has description labels, and is a proper container for handling.

School of Marine Science
Virginia Institute of Marine Science

(Originator Signature)

(Date)

For Office Use Only: DOT Handling Class: EPA Waste Code:

Date Received:
Comments: