

DANGEROUS WASTE

Unique combination of letters and numbers

Person or lab that generated the waste

Department

Date container was filled

INVOICE #: _____ GENERATOR: _____ DEPT. _____ DATE FILLED: _____

Circle Hazard(s): Flammable-Toxic-Corrosive-Other	%	Circle Hazard(s): Flammable-Toxic-Corrosive-Other	%
Constituents:		Constituents:	
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Contents and percentage. Do not use abbreviations. Total must add up to 100% </div>		<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Circle relevant hazards </div>	
Place This Sticker Directly On Waste Container			

Example:

DANGEROUS WASTE

INVOICE #: 2113 GENERATOR: Dawn Freeman DEPT. Science DATE FILLED: 4/10/18

Circle Hazard(s): Flammable-Toxic-Corrosive-Other	%	Circle Hazard(s): Flammable-Toxic-Corrosive-Other	%
Constituents:		Constituents:	
Water	70	pH 6 Buffer	1
Ethanol	10	Basic Fushsin	1
Iodine	3.5	Ferric Chloride	1
Potassium Iodide	3.5	Methanol	1
Nigrosin	1	Phenol	1
Crystal Violet	1	Glacial Acetic Acid	1
Safronin O	1		
Methylene Blue	1	Total=	100
Congo Red	1		
Brilliant Green	1	pH documented here if known	
Malachite Green	1		

Amount in container, in L or Kg

Glass, Metal, Plastic, or Fiberglass

EH&S will fill this column out

Be sure the invoice matches the sticker

STATEWIDE CHEMICAL SUBSTANCE REPORT

WSU Location VSCI 110 Department Science

Responsible for Waste Dawn Freeman / Teaching Lab

Phone 546-9628

email: dffreeman@wsu

Inv #	Date Container Started	Date Container filled	Constituents (no formulas) and Percent (% must = 100% - include water)	Total Amount (solid=Kg) (liquid=liters)	Physical State (S;L;G;SL)	Container Size (liters)	Container Type (G;M;P;F)	# of Cont	pH	Date to Central Accumulation Area & Received by:
2112	3/26/18	3/28/18	Plastic 90% Ethidium Bromide-like Stain < 1% Agarose 5% Tris Buffer 5% Total: 100% Hazards: Toxic	5 kg	S	20L	P	1	NA	Joc Price
2113	3/6/18	4/10/18	Water 70% Potassium Iodide 3.5% Congo Red 1% Ethanol 10% Crystal Violet 1% Brilliant Green 1% Iodine 3.5% Safranin O 1% Malachite Green 1% Nigrosin 1% Methylene Blue 1% pH6 Buffer 1% Hazards: Toxic	21L	L	21L	P	1	6	
			Basic Fuchsin 1% Glacial Acetic Acid 1% Ferric Chloride 1% Methanol 1% Phenol 1% Total: 100% Hazards: Toxic							
2114	10/3/17	4/15/18	Water 51.7855% Potassium Iodide 3% Nigrosin 0.9% Carosafe 10% Running buffer 2.4% Crystal Violet 0.9% Ethanol 3.5% Nutrient Agar 1% Safranin O 0.9% Iodine 3% Phosphate Buffered Saline 0.5% Methylene Blue 0.9% Hazards: Toxic	21L	L	21L	P	1	5	
			Fuchsin 0.9% Amylose 0.02% Chloride 0.9% starch 0.05% nariol 0.9% sodium hydroxide 0.0005% ol 0.9%							
			API Nitrite Test Solution 0.005% API Nitrate Test Solution 1 0.01% API Ammonium Test Solution 1 0.005% API Nitrate Test Solution 2 0.01% API Ammonium Test Solution 2 0.007% Total: 100 Hazards: Toxic							4/18/18

Document pH if known

List all constituents, if they don't all fit in one row, use additional rows and indicate with arrows. Be sure they match constituents on sticker. No abbreviations

COMMENTS:

Distribution of copies:

- 1) Location Hazardous Waste Coordinator or EH&S representative (if they are the same person)
- 2) With the container
- 3) Generator File
- 4) Your EH&S Statewide representative (if their office is not at your location):

HOW TO FILL OUT A WSU STATEWIDE CHEMICAL SUBSTANCE REPORT (THE MANIFEST):

Column #1: Invoice #

Select an individual invoice number for each container provided to EH&S.

Column #2: Date Container Started:

Provide the initial date when waste was collected in the container

Column #3: Date Container Filled:

Identify the date at which the container was filled or given to EH&S

Column #4: Constituents

Identify all constituents contained within the container or containers (if more than one container is included on the invoice #). For mixtures, indicate the percent (%) for each material contained within the mixture totaling up to 100%.

Note: Please do not utilize abbreviations (ex. PFR for paraformaldehyde).

Column #5: Total Amount (solid = kg) (liquid – liters):

Provide the known weight of constituents. If unknown provide a good estimation of the weight.

Column #6: Physical State (S, L, G(as), SL (for solid liquid mixes):

Provide the physical state of the constituents as indicated above.

Column #7: Container size

Indicate the size of the container

Column #8: Container Type (G;M;P;F)

G-Glass; M-Metal; P-Plastic; F-Fiberglass

Column #9: # of Containers

Indicate the number of containers associated with the invoice number identified.

Column #10: pH:

If known, identify the pH. If the pH is unknown, leave blank

Column #11: Date to Central Accumulation Area & Received by:

Leave this column blank. It will be filled in by personnel within EH&S. They will sign and date the manifest with the date it was received by EH&S. The completed copy will be scanned and email to the lab of generation.