TAMIU WASTE DISPOSAL TAG Tag ID#: _____ Requestor: Dept/Lab:____ Bldg. & Room Number: Phone: ______ Date: _____ Chemical(s): ☐ Liquid \square Solid Amount:_____ **CONTAINER TYPE:** \square Metal \square Glass ☐ Other: _____ **REACTS WITH:** □ None \square Air \square Water \square Other: ______ **HAZARDS:** \Box Flammable \Box Explosive \Box Toxic □ Carcinogen □ Corrosive □ Other:_____ REMARKS: ******Mail to Safety/Risk Management****** **TAMIU** WASTE DISPOSAL TAG Tag ID#: _____ Requestor: _____ Dept/Lab: Bldg. & Room Number: Phone: ______ Date: _____ Chemical(s): **** Attach this portion of tag to container ****

TAMIU WASTE DISPOSAL TAG

| WASTE DISPOSAL TAG |
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| Requestor: |
| Dept/Lab: |
| Bldg. & Room Number: |
| Phone: Date: |
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| |
| □ Liquid □ Solid Amount: |
| CONTAINER TYPE: |
| ☐ Metal ☐ Glass ☐ Other: |
| REACTS WITH: □ None □ Air □ Water □ Other: |
| HAZARDS: □ Flammable □ Explosive □ Toxic □ Carcinogen □ Corrosive □ Other: |
| REMARKS: |
| *******Mail to Safety/Risk Management******* |
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