## Request for Hazardous Waste Disposal Department of Public Safety Station 55 | 1500 S Ave K | Portales, NM 88130 Phone: 575.562.2392 | Fax: 575.562.2081 | enmupd@enmu.edu

Incomplete, inaccurate or falsified forms will be returned.							
epartment/Unit: Person preparing request:					Date:		
Phone:	Location of waste: Building:				Room number:		
List of Hazardous Waste							
Identification/Descrip Do Not Use Che	tion of Waste Chemicals emical Structures	Please Indicate if Solid, Liquid or Gas	Proper Handling	Number, Size, and Type of Container (i.e., 3 x 4L bottles)	Volume or Weight in Container (i.e., 1000 mL, 850 g, etc.)	Total Weight of Each Waste Type In Pounds	
Special notes or handling inst	ructions:						
Acknowledgement and Sign	nature						
I hereby declare that the identi- effort to minimize our waste st	fication/description of waste chreams.	nemicals is accurate and cor	mplete to the be	est of my knowledo	ge and that I hav	e made every	
Employee printed name	Employee signature	Date				PN5985 • 9	