

## Chemical Waste Log – Sector: \_\_\_\_\_

Name (Waste Generator)	Phone # (Waste Generator)	<b>Accumulation START Date</b>
E-mail (Waste Generator)	Principal Investigator	Experiment ID / GUP# (from ESAF)
<b>Process Knowledge: Description of how waste was generated: (Please check all that apply)</b>		
<input type="checkbox"/> Waste is discarded sample material. <input type="checkbox"/> Waste was used to prepare sample material or its holders.		
<input type="checkbox"/> Waste is a discarded PURE reagent grade chemical. <input type="checkbox"/> Contains potential peroxide formers. (attach WMDS-0333)		
<input type="checkbox"/> Other:		

<b>Container Description/location/ID:</b> <i>(size, glass, poly, etc. - ONE form per container)</i>	<b>Physical Form</b>	<b>For Liquids</b>		<b>Do contents include nanomaterials?</b>
		<i>pH=</i>		
	<input type="checkbox"/> Liquid	Flash Point <= 140° F		YES <input type="checkbox"/>
<input type="checkbox"/> Solid	Flash Point >= 140° F		NO <input type="checkbox"/>	

<b>Constituents: Provide Complete Chemical Name (Not just formulas) and SDS CAS No. for each chemical.</b>		% or % Range
MSDS CAS#:		
MSDS CAS#:		
MSDS CAS#:		
MSDS CAS#:		
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MSDS CAS#:		
MSDS CAS#:		
<b>Total material = (volume or weight)</b>	(Use a 2nd logsheet or double up on each line for more constituents... )	<b>Total ~ 100%</b>
<b>RCRA (F-K-P-U) Listed or Characteristic Hazardous Waste?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	Corrosive <input type="checkbox"/> Toxic <input type="checkbox"/>	Flammable <input type="checkbox"/> Oxidizer <input type="checkbox"/>
		Reactive <input type="checkbox"/> Other: _____

- **Waste container must be properly labeled with your name, date, contents, and hazards.**
- **Please send completed forms & SDS and direct any questions to your Beamline Safety Officer.**
- **The Beamline Safety Officer is:**