

**Chemical Waste**

REFER TO MSDS

Full Chemical Names and Concentration of all Constituents

Does the waste contain any (tick if yes):

 Hazardous Substances  Dangerous Goods

School/Section : \_\_\_\_\_ Building : \_\_\_\_\_

Lab No.: \_\_\_\_\_ User : \_\_\_\_\_

Waste collected : \_\_\_\_\_ till \_\_\_\_\_ Ph : \_\_\_\_\_

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