The City College of New York | Office of Environmental Health and Occupational Safety

Chemical Waste Disposal Manifest

Department:	PI:	Phone #:
Building:	Floor:	Room #:
Name of person completing this form:		Date:

Instructions: Fill in all information and affix a completed Hazardous Waste label to each container.

If waste is still in its original container, we offer alternative waste disposal labels.

We recommend to keep a copy of all manifest forms for your own records.

For waste-related questions, or requests for pickup / supplies - please contact:

ehos@ccny.cuny.edu

Chemical Name	# of containers	Container size

Please follow instructions on proper hazardous waste management on the back of hazardous waste labels.