Chemical waste

Date: _____

Contact person: _____ Phone/Mobile: _____

Department: _____ Subdepartment: _____

Contents

State the substances/mixtures as detailed as possible in vol-%. Heavy metals listed in mass%.

Water: _____% pH (±1 unit): _____

CMR – substances

Carcinogenic (H350, H351), Mutagenic (H340, H341), toxic to Reproduction (H360, H361, H362)
(state the chemical name and hazard statements according to CLP directives.)

If substance occurs in two first tables ('Group A' and 'Group B') of Appendix 2 of Provisions of the Swedish Work Environment Authority on "Chemical Hazards in the Working Environment" write name and group, A or B, it belongs to.

Name of substances (vol%) _____

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Always transport the waste in a secure manner by corridor C0 to D1:116b at the date of chemical waste reception.
More information please see http://www.bmc.uu.se or contact Mikael Olsson, environmental chemist of BMC campus management (mikael.olsson@bmc.uu.se or ext. 4392).