

RADIOACTIVE WASTE DISPOSAL SHEET

Container: Check only one box. Use 1 disposal sheet for each container.

- SOLID CONTAINER (24 gal. fiber drum) LIQUID CONTAINER
 OTHER

Description: Check only 1 box.

Do not mix LIQUID SCINTILLATION FLUID AND AQUEOUS WASTE.

- DRY SOLID -- BURNABLE DRY SOLID -- NONBURNABLE
 LIQUID AQUEOUS
 LIQUID SCINTILLATION FLUID
 BIODEGRADABLE NONBIODEGRADABLE
 LIQUID SCINTILLATION FLUID -- MIXED
 ORGANIC SOLVENTS OTHER

ISOTOPE(S)	ACTIVITY (uCi, mCi)	DATE	PHYSICAL FORM (solid, liquid)	APPROXIMATE AMOUNT (ml, gal)
TOTAL				

AUTHORIZED USER _____ LAB ROOM NO. _____

DEPARTMENT _____ PHONE: _____

Call the Radiological Safety Office at **4-4870/6238** and place your name on the pickup list. Radiological Safety personnel will pickup the waste as soon as possible.

Certification: (to be completed by each person submitting the information requested on this form) By signing this form, I certify that all information on this form and additional supporting information submitted with this form are true and complete to the best of my knowledge.

Signature: _____ Date: _____

FOR RADIOLOGICAL SAFETY OFFICE USE ONLY

Pickup Date _____ Container Number _____

Destination _____ Sewer (Date _____) _____ Burn No. (Date _____)
 _____ Storage (Date _____) (Location _____)

WT _____

SEE ATTACHED SHEET(S) FOR ASSAY RESULTS