| CW | | | |
|-----|--|--|--|
| CVV | | | |

Date

Phone #

Name

| Principal Investigator | | E-mail | E-mail | | | Experiment ID / GUP# (from ESAF) | | | | |
|---|-----------------------------|---------------------|--|--------------------|---------|----------------------------------|---|--|--|--|
| | | | | | | | | | | |
| Description of how waste was generated: (Please check all that apply) | | | | | | | | | | |
| ☐ Waste is discarded sample material. ☐ Waste was used to clean/prepare sample holder | | | | | | | | | | |
| ☐ Waste was used to prepare sample material. | | | ☐ Waste was used as an etching solution. | | | | | | | |
| ☐ Waste is a discarded PURE reagent grade chemical. | | | | ☐ Other | | | | | | |
| | | | | | | | | | | |
| Container Description/location: (size, glass, poly, etc ONE form per container) | | Physical Form | I | For Liquids | | | Do contents include nanomaterials? YES NO NO | | | |
| | | | | pH= | | ll l | | | | |
| | | ☐ Liquid ☐ Solid | 1 F | lash Point <= 140° | F | | | | | |
| | | | | | | | | | | |
| | | | | lash Point >= 140° | F | | | | | |
| | | | | | | | | | | |
| Constituei | <u>nts:</u> Provide Complet | | | | st form | nulas). | % or | | | |
| and SDS CAS No. for each chemical. | | | | | | | % Range | | | |
| MSDS CAS#: | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| IVISUS CAS#. | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| MCDC CACH. | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| MCDC CAC#. | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| MSDS CAS#: | | | | | | | | | | |
| | • | | | | | | | | | |
| (Use a 2nd logsheet for more constituents) | | | | | | | | | | |
| Total material = (volume or weight | Unit | of Measur | e = | | | Total | 100% | | | |
| (Volume of Weighty) | | | | | | | | | | |

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