THE UNIVERSITY OF MISSISSIPPI DEPARTMENT OF HEALTH & SAFETY

Phone (662) 915-5433 FAX (662) 915-5480

NOTICE OF REJECTION OF WASTE

TO:	DATE:
DEPARTMENT:	ROOM:
All or some of the waste chemicals to rejected for the following reason(s):	hat were requested to be removed from this area were
The form(s) were not signed	
Signatures not original	and models the communication and
The signature on the form(s) did r	
Bottle(s) are overfilled, leave at le	ble, unreadable, ambiguous, or unrecognized
Trade name(s) not known	one, unreadable, ambiguous, or unrecognized
Containers were not capped secur	elv
Hazardous materials on the outsid	
Materials were not found	o or container
Unknowns are not removed witho	out account code for charges
Labels on containers were	Ç
Not on container, missing,	or illegible
 Missing required informat Form(s) and container(s) 1	ion (Department, contents, Name of responsible person) abel(s) did not match
Material description in question b	ecause of :
Incorrect coloration	
Fuming	
Layers of materials	
	h materials description or properties
Not acceptable as packaged	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	tents not indicated (example-> hexane 45%, acetone 55%)
This material is not acceptable for	dous waste. Please discard as nonhazardous material.
OTHER	uisposai.
OTTLK	

FORM: DHS-128