CHEMICAL CLEAN OUT REQUEST FORM

University of Rhode Island Environmental Health & Safety | Phone: 874-7993 | email: srm@etal.uri.edu

From:	PI or supervisor:
Date:	Campus Address: .
Phone:	Pickup Location:

1. This is for any expired or unwanted virgin chemicals (not routine lab generated waste)
2. All containers must be labeled with the chemical name (no abbreviations, formulas, or acronyms)
3. EH&S will need a minimum of 2 weeks advanced notice.
4. This is a fillable form. It can be printed out and filled out or emailed to EH&S directly.
5. Form must be emailed to SRM@etal.uri.edu **Do Not Fax**

Note that some labor and disposal charges may be billed to the lab's department per URI's Laboratory Move-Ins and Cleanouts Policy

Chemical Name	Quantity	Bottle Size	Barcode number