

NOTICE OF REJECTION OF WASTE



The University of Mississippi

Health and Safety

Phone: (662) 915-5433 Fax: (662) 915-5480

TO : ___ Whom it may concern
 ___ Dr. _____

FROM : **Edward M. Movitz, Health and Safety Officer**
 movitz@olemiss.edu

DATE : _____

All or some of the waste chemicals that were requested to be removed from this area were rejected for the following reason(s) :

- ___ The form(s) were not signed ___ Signatures not original
 - ___ The signature on the form(s) did not match the supervisor's name
 - ___ Bottle(s) are overfilled, leave at least 1" for expansion of materials
 - ___ The materials description is illegible, unreadable, ambiguous, or unrecognized
 - ___ Trade name(s) not known
 - ___ Containers were not capped securely
 - ___ Hazardous materials on the outside of container
 - ___ Materials were not found
 - ___ Unknowns are not removed without account code for charges
 - ___ Labels on containers were
 - ___ Not on container, missing, or illegible
 - ___ Missing required information (Department, contents, Name of responsible person)
 - ___ Form(s) and container(s) label(s) did not match
 - ___ Material description in question because of :
 - ___ Incorrect coloration
 - ___ Fuming
 - ___ Layers of materials
 - ___ Weight is inconsistent with materials description or properties
 - ___ Not acceptable as packaged
 - ___ Percentages of individual components not indicated (example-> hexane 45%, acetone 55%)
 - ___ Material is not regulated as hazardous waste. Please discard as nonhazardous material.
 - ___ This material is not acceptable for disposal.
 - ___ OTHER _____
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