

Nº 58759

CAUTION - RADIOACTIVE WASTE

ONLY ONE MATERIAL CATEGORY ALLOWED PER PACKAGE!
KEEP LEAD CONTAINERS SEPARATE FROM WASTES!

- DRY, COMPACTIBLE, SOLID WASTE
- SHARPS (NEEDLES, PIPETS, ETC.)
- ANIMAL OR OTHER BIOLOGICAL WASTE
- NON-HAZARDOUS, NON-TOXIC AQUEOUS LIQUID
- FLAMMABLE, HAZARDOUS OR TOXIC LIQUID
- TOXIC OR HAZARDOUS, NON-FLAMMABLE LIQUID
- OTHER MATERIALS (DESCRIBE BELOW)

FOR LIQUIDS:

Mini Standard

Bulk container _____ Gallons

Volume of contents _____ Gallons

If LSC vials, circle either "Mini" or "Standard" size

For bulk liquids, indicate the volume of the container and waste amount (gallons)

Check the correct box for the type of waste

DESCRIBE MATERIAL - give names of ALL chemicals and fluors.

If any constituent is a "HAZARDOUS MATERIAL" as defined by the EPA, complete and ATTACH a HAZARDOUS WASTE DESCRIPTION

Describe the material, including all known chemicals and fluors

- List:
- (A) Each radionuclide (H-3, P-32, S-35, etc.)
 - (B) the total activity of each
 - (C) the correct activity units (uCi or mCi)

NUCLIDES	ACTIVITY	Circle Units	CHECK ALL APPLICABLE CATEGORIES:
A	B	C	<input type="checkbox"/> Long-lived, half-life > 120 days
			<input type="checkbox"/> Short-lived, half-life < 120 days
			<input type="checkbox"/> BETA-GAMMA Emitters
			<input type="checkbox"/> ALPHA Emitters or Mass > 204

Check all applicable decay characteristics

DOES THIS PACKAGE CONTAIN ANY "RADIOACTIVE MATERIAL" LABELS? Circle one: Yes No

Indicate if the package contains any Radioactive Material Labels

Sign and date the completed waste tag.

I certify under penalty of law that to the best of my knowledge this information is accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility for fine and imprisonment.

Name of Responsible User (print): _____

Prepared by: _____ Ready/Call-in Date: _____

Print the name of the Responsible User

RADIOLOGICAL HEALTH USE ONLY:

Acceptance Date: _____ By: _____

Compacted Stored in bin Emptied into bulk jug

Cremated Absorbed or Solidified Biostabilized

Crushed vials Container #: _____

Process Date: _____ By: _____

Shipped drum Released liquid Released solid short-lived

Released to EH&S Released to ARC

Maximum Exposure Rate at Contact: _____ mR/hr

Survey Instrument ID: _____ Calib. Date: _____

Disposal Date: _____ By: _____