



**HAZARDOUS WASTE TURN-IN FORM**

This form is to be used for the turn-in of hazardous waste to the NSA Monterey Environmental Division. Please refer to the attached Standard Operating Procedure for additional guidance when filling out this form. The form must be filled out electronically and e-mailed along with appropriate MSDS as an attachment to [william.e.bluhm.civ@us.navy.mil](mailto:william.e.bluhm.civ@us.navy.mil).

Name:  Phone Number

Organization  Department

Waste Location Bldg. #  Room #  E-Mail

List of Wastes

| Item # | *Chemical/Product Name | Estimated Weight in lbs | **Actual Weight | Container Size | Qty | MSDS Provided            |
|--------|------------------------|-------------------------|-----------------|----------------|-----|--------------------------|
| 1      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 2      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 3      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 4      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 5      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 6      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 7      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 8      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 9      |                        |                         |                 |                |     | <input type="checkbox"/> |
| 10     |                        |                         |                 |                |     | <input type="checkbox"/> |
| 11     |                        |                         |                 |                |     | <input type="checkbox"/> |
| 12     |                        |                         |                 |                |     | <input type="checkbox"/> |

\*If waste is generated from a process include chemical components and percentages of the components in the waste.

\*\* This form will be returned to the Hazardous Waste Generator with actual weights within 15 days.

| Item # | *Chemical/Product Name | Estimated Weight (lbs) | **Actual Weight (lbs) | Container Size | Qty | MSDS Provi               |
|--------|------------------------|------------------------|-----------------------|----------------|-----|--------------------------|
| 13     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 14     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 15     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 16     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 17     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 18     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 19     |                        |                        |                       |                |     | <input type="checkbox"/> |
| 20     |                        |                        |                       |                |     | <input type="checkbox"/> |

Comments

**1. Generator Certification:** I certify that the information provided and the attached MSDSs accurately describe the waste being turned in to the best of my knowledge.

Signature:

Date:

**2. HWPM verification of pickup/waste acceptance:** The waste submitted for turn-in has been inspected and determined to match the list above and is properly labeled.

Signature:

Date:

**3. HWPM verification of weights:** All waste has been weighed and actual weights are provided above.

HWPM

Date: