

HAZARDOUS WASTE/MATERIAL WORKSHEET

NSN/Manufacture/MSDS Serial #

Profile Number: _____

EMD Doc. # _____

EMD INT/Date: _____

Bay # _____

EMD Class: _____

Unit of Issue: _____

Quantity: _____

Unit Doc # _____

Item Nomenclature: _____

Type: Hazardous Waste (HW)/Hazardous Material (HM)/Universal Waste (UW) _____

Type and Number of Containers Transported: _____

Estimated Weight: _____

ASD: _____

Original Cost of Material/Waste: \$ _____

Major Command: (Circle One) DIV MLG MEF MHG MCB MARSOC

Unit Name: _____

Bldg. (Waste Located) _____

Unit POC: _____

Phone Number: _____

ECO Certification: I certify that I have physically inspected the above-described material/waste on _____ day of _____ 20____ and that the material/waste is in compliance with disposal directives.

(Print Name/Rank)

(Signature)

(Date)

ECC Certification: I certify that this worksheet is filled out completely and is correct for submission to EMD Document Section.

(Print Name/Rank)

(Signature)

(Date)