|  |  |
| --- | --- |
| B&W-Horizontal | **PCB DISPOSAL AUTHORIZATION** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SUPERVISOR’S NAME | APPLICANT NAME | WORK PHONE | DATE | | |
|  |  |  | YYYY | MM | DD |
|  |  |  |  |  |  |
| BUILDING | ROOM/LAB | DEPARTMENT | | | |
|  |  |  | | | |
|  |  |  |  | | |

**CHEMICAL INFORMATION**

**SECTION A**

|  |
| --- |
| This disposal authorization is for (check one only)  **Liquids** containing polychlorinated biphenyls (PCB’s). **Complete Section B.**  **Solids** containing polychlorinated biphenyls (PCB’s). **Complete Section C.** |

**SECTION B**

**PROVIDE VOLUME AND CONCENTRATION OF EACH CHEMICAL IN THE MIXTURE1**

|  |  |  |
| --- | --- | --- |
| CHEMICAL NAME | VOLUME | CONCENTRATION |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | **TOTAL** | **TOTAL** |

1 Enter the solvent and the PCB on separate lines.

**SECTION C**

**IDENTIFY THE CONTAINER TYPE AND CONTENTS FOR EACH CONTAINER. INCLUDE WEIGHT ESTIMATES FOR EACH CONTAINER.**

|  |  |  |
| --- | --- | --- |
| CONTAINER | CHEMICAL NAME | VOLUME/WEIGHT OF CHEMICAL CONTAINER |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**SECTION D**

**BILLING INFORMATION**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Budget Owner\*: | | | 2 | | | | | |
| GL Unit\* | Fund\* | Dept\* | Account\* | Program | PC Bus Unit | Project | Activity | Internal |
|  |  |  |  |  |  |  |  |  |

\* These fields are mandatory.

2 This must be the owner of the account code provided.

**ATTACH** 2 **COPIES TO WASTE CONTAINER. RETAIN 1 COPY FOR YOUR FILES.**

|  |  |  |  |
| --- | --- | --- | --- |
| SIGNATURE | DATE | | |
|  | YYYY | MM | DD |
|  |  |  |  |

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act (FOIP), Alberta Environmental Protection and Enhancement Act, Canadian Environmental Protection Act, Transportation of Dangerous Good Act and Regulations. If you have any questions about the collection or use of this information, please contact Hazardous Materials Services at [hazmat@ucalgary.ca](mailto:hazmat@ucalgary.ca).