

HAZARDOUS WASTE PHARMACEUTICALS

Building: **Room:**
Contact Name:
Phone: **Email:**
Chemical Composition: %

PRIMARY HAZARD:

Request collection from ehs.washington.edu
Questions: call 616-5835

HAZARDOUS WASTE PHARMACEUTICALS

Building: **Room:**
Contact Name:
Phone: **Email:**
Chemical Composition: %

PRIMARY HAZARD:

Request collection from ehs.washington.edu
Questions: call 616-5835

HAZARDOUS WASTE PHARMACEUTICALS

Building: **Room:**
Contact Name:
Phone: **Email:**
Chemical Composition: %

PRIMARY HAZARD:

Request collection from ehs.washington.edu
Questions: call 616-5835

HAZARDOUS WASTE PHARMACEUTICALS

Building: **Room:**
Contact Name:
Phone: **Email:**
Chemical Composition: %

PRIMARY HAZARD:

Request collection from ehs.washington.edu
Questions: call 616-5835