

**Cleveland State University
Office of
Environmental Health and Safety**

Infectious Waste Inventory

Instructions: Please list the material to be removed on this form. Fill out **completely**, and then notify the Office of Environmental Health and Safety at extension 3715. **NO MATERIAL CAN BE ACCEPTED WITHOUT A COMPLETED INVENTORY FORM ATTACHED.**

Academic Waste _____ Research _____ Other: _____

Department _____ Building _____ Room _____

Container Type	Quantity	Size – S,M,L	Volume (EHS Only)	Weight (EHS Only)

Name of Responsible Person

Phone

Date