



## APS-Risk Management Chemical Pick up Request Form

		Date	# of pages	Time
<b>To:</b>	Risk Management	<b>From:</b>		
<b>Fax #:</b>	(505) 884-4502	<b>Position:</b>		
		<b>School/Dept:</b>		
		<b>Phone #:</b>		
		<b>Fax #:</b>		

**Use this form to request disposal of hazardous materials and chemical waste.**

Chemical/Material to be disposed	Quantity	Location – Building, Room #, etc.	Contact Person-Name, phone #

**Complete and fax to Risk Management at (505) 884-4502.**