



**ENVIRONMENTAL HEALTH AND SAFETY
HAZARDOUS MATERIAL SERVICES**

**PICK UP REQUEST FORM (PAPER-BASED PURF)
INSTRUCTIONS FOR MAIL/EMAIL/FAX SUBMISSION
(USED AND UNKNOWN MATERIALS ONLY)**

This version of the Pick Up Request Form (PURF) is used to request the pick up of unwanted hazardous materials (used and/or unknowns) from MU locations. For these purposes, "used" also includes hazardous materials not in their original manufacturer's container.

Registered User Identification Section

① REGISTERED USER	The name of the MU Registered User (RU) who is assigned responsibility for the materials described on the PURF and the location where they are being used/stored.
② REGISTERED USER NUMBER	The four-digit ID number corresponding to the RU.
③ CONTACT PERSON	The name of the person who can provide additional information about this PURF (if needed).
④ TELEPHONE NUMBER	The telephone number where the Contact Person can be reached during normal business hours.
⑤ BUILDING	The proper name or commonly-used abbreviation for the MU building where the materials described on the PURF are located.
⑥ ROOM	The room number (when applicable) where the materials described on the PURF are located. All items on the PURF must be in the same room (submit additional PURFs for additional rooms).
⑦ OTHER	As appropriate, use this space to describe a more specific location within the designated room (e.g., cabinet, hood) or when "room" does not apply.
⑧ E-MAIL ADDRESS	The e-mail address where the Contact Person can be reached.

Material Description Section

Only one container may be listed on each line. Ditto marks are permitted for multiple containers of the exact same composition.

⑨ HML NUMBER	The unique 5-digit number on the Hazardous Materials Label (HML) affixed to the container to be picked up.
⑩ COMPONENTS	The chemical name of the material to be picked up (if there is only one component). If a mixture, list all components of the mixture (including water) instead, providing concentrations where possible. If additional space is needed, use the Additional Comments section, the back of the form, or an additional sheet of paper.
⑪ pH	The pH of the mixture if applicable.
⑫ CONTAINER CODE	Use one of the abbreviations provided on the PURF to describe the container holding the hazardous material(s).
⑬ WEIGHT, MASS, OR VOLUME	Provide the total weight, mass or volume of the material actually in the container including units.

Additional Comments

⑭ ADDITIONAL COMMENTS	Use this section to provide additional information useful to EHS staff. You may also use the back of the form and/or additional pages as necessary.
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Certification

⑮ SIGNATURE	The RU or Contact Person must sign the PURF except when it is submitted by e-mail.
⑯ DATE	Write the date that the PURF is completed and submitted to EHS.

Submit the PURF: By Campus Mail to: EHS RRC
 By FAX: 884-5270
 By e-mail: hazmat@missouri.edu

PURFs that are incomplete, illegible, or incorrectly completed may be returned to the RU for completion/correction. Improperly documented materials will be analyzed at the RU's expense.

A pick up will be scheduled within a two (2) week period after the PURF is approved by EHS. Alternative scheduling and handling procedures may be required for very large pick ups, special materials, and/or materials from off-campus locations.

For additional assistance, or if you have additional questions about hazardous materials procedures, please telephone EHS at 882-3736, or visit the web site at <http://ehs.missouri.edu>

Example:

ENVIRONMENTAL HEALTH AND SAFETY HAZARDOUS MATERIAL SERVICES		PICK UP REQUEST FORM (USED AND UNKNOWN MATERIALS ONLY)			
RESOURCE RECOVERY CENTER (RRC) 1710 E CAMPUS LOOP COLUMBIA, MO 65211-5080 882-3736 (OFFICE) 884-5270 (FAX) hazmat@missouri.edu http://ehs.missouri.edu SUBMIT PURF BY CAMPUS MAIL, FAX OR E-MAIL					FOR EHS USE ONLY PURFNO <input type="text"/>
REGISTERED USER	Roger J. Giles ①	REGISTERED USER NUMBER	1 0 3 2		
CONTACT PERSON	Roger J. Giles ③	TELEPHONE NUMBER	882-3736 ④		
PICK UP LOCATION: BUILDING	CRB ⑤	ROOM	101 ⑥	OTHER	In hood ⑦
			E-MAIL ADDRESS	gilesr@missouri.edu ⑧	
ITEM NO.	HML NUMBER*	COMPONENTS Provide a detailed composition. Use back of this form or separate sheet(s) of paper as needed. Ditto marks are permitted for multiple containers of the same composition.	pH	CONTAINER CODE*	WEIGHT, MASS OR VOLUME*
1	12346 ⑨	Phenol/ Chloroform/ Isoamyl Alcohol (50%/48%/2%) ⑩	7 ⑪	GB ⑫	1 GL ⑬
2	12347	Formalin (10% formaldehyde, water)	7	PB	2.5 GL
3	12348	Barium Nitrate, Calcium Nitrate, Hydrochloric Acid, Potassium Iodate, Starch	2	PB	1 GL
4	12567	"	2	PB	1.5 LT
*PLEASE USE ONLY ONE HML NUMBER PER LINE. *CONTAINER CODES: CBX-cardboard box, GB-glass bottle, MC-metal can, MD-metal drum, PB-plastic bottle, PBG-plastic bag, PD-plastic drum, SC-safety can, V-vial, OTH-other (please describe) *Please use only the following units: GL-gallon, LT-liter, ML-milliliter, LB-pound, KG-kilogram, GM-gram, MG-milligram. Estimate amount if container is not full.					
ADDITIONAL COMMENTS: CRB = Chemical Recycling Building ⑭					
IMPROPERLY DOCUMENTED ITEMS WILL BE ANALYZED AT THE EXPENSE OF THE REGISTERED USER. I hereby certify that the items listed above are properly documented and containerized for pick up by EHS.					
SIGNATURE			DATE		
<i>Roger Giles</i> ⑮			May 11, 2006 ⑯		