Hazardous Waste Disposal Permit Format No.: Date: _____/20____. HAZARDOUS WASTE GENERATE DETAILS Department / Location: Section / Area: Product from hazardous waste Generated Process from Hazardous waste Generated Unit (Solid / Liquid / Gas) Quantity **DESCRIPTION OF HAZARDOUS WASTE** Material Handling: People aware of hazardous Waste:: YES / NO Material Receiver : People aware of hazardous Waste :: YES / NO **DISPOSAL OF HAZARDOUS WASTE** Detailed information about selected option: ___ Reduce □ Reuse Recycle Send to Authorized Person □ Discard

Remarks / Comments / Suggestions	
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Clearing officer Signature	EHS – Manager Signature