



भारतीय प्रौद्योगिकी संस्थान इंदौर
Indian Institute of Technology Indore

खतरनाक अपशिष्ट आवक-जावक पत्र
HAZARDOUS WASTE MOVEMENT-FORM
(For any Item/Material/Chemical/Metal/Waste etc. stored in Balda-Farm Hazardous Waste room)

FORM NO.: SS13

STORE/IN/IV/GEN/No. _____

Financial Year: _____

Date: _____

(To be filled by Store Assistant)

(To be prepared in duplicate. One copy will be returned to the custodian after the material stored)

Name of Custodian: _____ Designation: _____

Department: _____ Project No. (If any): _____

Contact No.: _____ E-mail id: _____

Submitting following items from my department/project/lab/Office to the bearer Mr./Ms. _____ whom I authorize to submit the stores on my behalf to Hazmat/Chem store for further storage & disposal.

Sl. No.	Item/Chemical/ Metal/ Waste/ Material Name	Item Description	Hazardous Category (#)	Quantity	Unit (Nos./ Ltr./ Kg./ Pack)	Remarks
1	2	3	4	5	6	7

(#)- Hazardous Category - Nature of the hazard and risk, appropriate storage and handling shall be mentioned for safe disposal of the items.

This is certified that the hazardous waste sent to hazardous waste store are properly packed and sealed with proper hazardous category, the bearer is authorized to taking care of our hazardous waste to avoid any incidence.

Signature of the Custodian
Name: _____

Signature of PI/HOD
Name: _____

Item Returned by	Receiver	Checked by	Approved by
Signature Name: Date:	Signature Store Assistant Name: Date:	Signature In-Charge (CSS) Name Date:	Signature AR (MMS) Name: Date:

Enclosures checklist: (Duly filled form, certified by indenter/custodian and HOD)

1. Any other document/Form/Information which is relevant to.