O -10	Nova Southeastern University Request for Radioactive Waste Pick-Up REQUEST INFORMATION:										
I.											
	Pickup Requester:			Date:	Ex	t:					
				Waste Location:							
II.	INSTRUCTIONS:										
	 Ensure each container has been properly labeled Enter the following information for each container of waste: Container #: Reference number that corresponds to the number used o radioactive waste label. 										
	Radionuclide: Isotope present in waste. Note: For multiple isotopes/container, use separate entry for each isotope.										
	Activity: Activity for the isotope.										
					Reference Date: Activity reference date						
	Reference Da	ate: Activity reference	date								
		ate: Activity reference cal form of the waste. F		ving:							
		-	Enter one of the follow	ving: vanic liquid	- Scintillation	vials - Othe	r (describe)				
	Form: Physic - Dry	cal form of the waste. H	Enter one of the follow $d - Org$	•	- Scintillation	vials - Othe	er (describe)				
	Form: Physic - Dry Quantity: Qu	cal form of the waste. E - Aqueous liqui	Enter one of the follow <i>d</i> - Org n container.	anic liquid	- Scintillation		r (describe)				
	Form: Physic - Dry Quantity: Qu	cal form of the waste. E - Aqueous liquiduantity of waste in each	Enter one of the follow <i>d</i> - Org n container.	anic liquid							
	Form: Physic - <i>Dry</i> Quantity: Qu 3. Mail or fax a c	cal form of the waste. E - Aqueous liquid antity of waste in each copy for the form to EF	Enter one of the follow d - Org n container. HS Office.	EHS Office wil	l call to schedule a v	vaste pick-up.	r (describe)				
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Luthori	Form: Physic - Dry Quantity: Qu 3. Mail or fax a c Container #	cal form of the waste. E - Aqueous liquid antity of waste in each copy for the form to EH Isotope	Enter one of the follow d - Org n container. HS Office. Activity	EHS Office wil	l call to schedule a v	vaste pick-up. Quantity	Notes				
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