Chemical Inventory **Building _____ Room # _____**

COMMON NAME OF SUBSTANCE (Not Formula)	FORM OF MATERIAL	TYPE OF CONTAINER	SIZE OF CONTAINER	CONDITION OF CONTAINER	D.O.T. CLASS	SIGNATURE OF PERSON DROPPING OFF CONTAINER	*LEGEND*
							FORM OF MATERIAL
							P = Pure
							M = Mix
							S=Solid
							L = Liquid
							G = Gas
							TYPE OF CONTAINER
							Drum
							Can
							Glass
							Other
							D.O.T. CLASS
							1 = Explosive
							2 = Gaseous
							3 = Flammable/ Combustible Liquid
							4 = Flammable Solid/Spontaneous Combustion-Dangerous When Wet
							5 = Oxidizer/Organic Peroxides
							6 = Toxic/Infectious Substances
							7 = Radioactive
							8 = Corrosive
							9 = Misc. Dangerous Goods