



**Radioactive Waste Pick Up Request  
Form  
Radiation Safety Program**

November 1, 2017

**PLEASE FAX THIS FORM TO EHS-RADIATION SAFETY 204-789 3906  
Or Scan and Email to [radsafety@umanitoba.ca](mailto:radsafety@umanitoba.ca)**

DATE: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

PERMIT HOLDER: \_\_\_\_\_

LOCATION OF THE WASTE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

Please label all containers with the Radioactive Waste Tag. Make sure that all the required information is included. Waste must be packaged in accordance with the requirements outlined in the Radiation Safety Manual.

Type of waste	Number of containers	Container size