Radioactive Waste Packaging List for **Liquid Waste**

Authorized User’s Name: ________________________  Department: ______________
Building and Room Number: ____________________________________________

Submit one form per container of waste.

<table>
<thead>
<tr>
<th>DATE</th>
<th>Initials Of user</th>
<th>Isotope ID Found on Daily Use Log</th>
<th>Isotope</th>
<th>Activity in mCi</th>
<th>% of H₂O</th>
<th>% of Other Constituents</th>
<th>Volume in mls or liters</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Total Activity, mCi</th>
<th>Total volume</th>
</tr>
</thead>
</table>

**Container Survey**

<table>
<thead>
<tr>
<th>Method Used</th>
<th>Background</th>
<th>Lid</th>
<th>Handle</th>
<th>Sides</th>
<th>Bottom</th>
</tr>
</thead>
</table>

For EH&S Use

Date Collected: __________  Received by: __________  UNR ID __________  Final ID __________
Waste ID __________  Manifest ID __________  Shipment Date __________  pH __________
Activity at disposal __________ mCi

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