

Hazardous Materials and Waste Inventory Questionnaire

Facility Name:

Facility Address:

Contact Person:

Phone Number:

Email:

Hazardous Materials Inventory

Material Name	CAS Number	Quantity Onsite	Unit	Physical State	Main Use	Storage Location

Hazardous Waste Inventory

Waste Description	Quantity Generated	Unit	Physical State	Container Type	Storage Location	Disposal Method

Additional Comments/Notes: