





REQUEST TO:

EMAIL: hhw@millerenvironmental.mb.ca

PHONE: 204-925-9600 FAX: 204-925-9601

1. Collection Site Details									
Depot Location:									
Depot Name:							Employee Name:		
Telephone Number:							<u> </u>		
·							Date:		
Depot Operation Hours:									
Loading Equip Available:									
2. Requesting Supplies: Indicate the number of the following you require Note: (TDG labels are per roll of 100)									
#		Tubskids			#		Vermiculite (per bag)		
#		Poly Open Top Drums			#		Metal Open Top Drums		
#		20 L Pails	L Pails				TDG Labels:2.1 2.2 3 4 5.1 5.2 6 8 9		
3. Requesting Waste Pickup: Indicate the number of the following you require. (TS = Tubskid, DM = Drum, GL = Gaylord)									
Qty	Description			TS/DM		Qty	Description	TS/DM	
	Paint			TS/GL			Acid Labpack (PCA)	DM	
	Aerosols – Paint (PCA)			DM			Acid Labpack (Non Program)	DM	
	Aerosols – Non Paint (PCA)			DM			Caustic Labpack (PCA)	DM	
	Aerosols – (Non Program)			DM			Caustic Labpack (Non Program)	DM	
	Propane Single use Fuel Cylinder (PCA)			DM			Flammable Liquid Labpack (PCA)	TS/DM	
	Fire Extinguishers - (Non-Progra			DM			Flammable Liquid Labpack (Non Program)	DM	
	Gasoline Jerry Cans			TS/DM			Flammable Liquid Labpack: (Non Program)	TS	
	Mercury / Debris- (Non-Program)			Pail/DM			Flammable Solids Labpack (Non Program)	Pail/DM	
	*PCB Ballasts - (needs prior approval)			DM			Toxic Labpack (PCA)	DM	
	PCB Ballasts (less then 40) no approval			Pail	_		Toxic Labpack (Non Program)	DM	
	Non-PCB Ballasts - (Non-Program)			Pail/DM			Oxidizing Labpack (PCA)	DM	
	Non Hazardous Labpack (Non Program)			TS/DM			Oxidizing Labpack (Non Program)	DM	
							Organic Peroxides Labpack (Non Program)	Pail/DM	
4. Other:									
Eye W	ottles required?								
		nt Needed? (If yes, rred contact type)							
		or requirements ke address?							

Note: Supplies replaced as one full for one empty basis unless approved by the Manitoba Program Coordinator.