Stericycle Hazardous Materials Shipping Manifest Instructions

A pre-signed manifest is now available. If filled out, this replaces the need for your signature at the time of your scheduled medical waste pickup by Stericycle.

Fill out pre-signed manifest.

- The Date is the date of the scheduled pickup.
- The Customer Location is the building and room number of the pickup.
- Account numbers start with 8194138, followed by a dash, then your 3 digit site number. This can be found on your Stericycle barcode.
- The type of container is either a TB01 (gray bin) or US43 (fiberboard box).
- Please fill in the total number of each type of container that you have ready (completely closed container, with dated barcode attached) for pickup.
- A trained (BIO301L) person should print their name and Blazer ID, along with their signature, at the bottom.

Email a copy to EHS at medwaste@uab.edu.
Print a copy to put with your medical waste containers.
Save a copy for your own documentation.

If you have questions, please contact EHS at (205) 934-2487.
Hazardous Material Shipping Document # ____________________________

Date* __________________________

Customer Location ____________________________

Account # 8194138-__

Customer Regulatory # ____________________________

Regulated Medical Waste
6.2, UN3291, PGII

Stericycle Customer Service Records

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<thead>
<tr>
<th>Container Type</th>
<th>Quantity</th>
<th>Vol./Wt</th>
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Product Delivery Record

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<th>Prod. Type</th>
<th>Quantity</th>
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This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the department of transportation.

Print/Type Name & Blazer ID* __________________________________________

Authorized Signature* __________________________________________

* Required field

For Stericycle use only

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