MERCURY THERMOMETER EXCHANGE PROGRAM EXCHANGE REQUEST

Name:			Date:	
Telephone:			Email:	
Room/Lab Numb	oer Where We Car	n Find You:		
Principal Investig	gator:			
Department/Grou	ıp:			
Number of mercu	ary thermometers	to be disposed of	:	
replacements. Be mercury thermome exchange request.	sure to check the eters. We will inform	basement and storn you of the proper	n if you do not need the stage area of your lab to or disposal methods after v	dispose all your
No. Thermometers Needed	Temperature Range	Total / Partial Immersion	Application	Item Number
Example: 2 We thank you for yo	-20 to 150°C	partial	specific application	item number

** Please Pass Along to Appropriate Laboratory Personnel **

Send the completed form via campus or postal mail, fax, or email to:

Dennis Daye, Department of Environmental Health and Safety

Marquette University Zilber Hall, Suite 212

Phone: 414-228-8411 Fax: 414-288-0600 dennis.daye@marquette.edu