ENVIRONMENTAL HEALTH AND SAFETY | HAZARDOUS MATERIALS

DEA Initial/Biennial Inventory

Registrant Name (first and last name): _____ DEA Registration Number:_____

Inventory completed by:_____

☐**At the beginning of business on: _____** ☐ **At the close of business on**:_____

Material Name and Strength (do not abbreviate; only put multiple items on one line if they are identical)	Finished Form (tablet, conc)	Container Volume	Batch/Serial Number	No. of Containers

Material Name and Strength (do not abbreviate; only put multiple items on one line if they are full and identical)	Finished Form (tablet, conc)	Container Volume	Batch/Serial Number	No. of Containers