

Request/Authorization

Hazardous Waste Storage/Accumulation Area

HW Satellite Accumulation Area

PART I

From:

Proposed Location (Building and Area):

Waste to be Stored:

Signature:

Telephone Number:

Date:

PART II

The above has been inspected and found to be in compliance with Hazardous Waste Management Plan.

Assigned Site Number is: _____

Signature, Environmental Inspector:

Date:

Signature, Fire Inspector:

Date:

Signature, Safety Inspector:

Date: