

Generator's Hazardous Material and Waste Turn-In Request

Directorate of Public Works – Environmental and Natural Resource Division

Bldg 1495, 6170 Sharon Lane Rd - Fort Belvoir, VA 22060

(SECTION 1)

Generator's/Organization's Name	Bldg. Number	Item storage location if not Bldg. Number
Organization's Funding Representative:	Phone Number:	Funding Representative's Email:
DoDAAC:Department of Defense Activity Address Code (Example:W99ABR)	Agency's Funding Code: General Fund Enterprise Business System (GFEBs) or Accounting Processing Code (APC)	

(SECTION 2)

Name of Waste / Material / Product:			Manufacturer (if applicable):	
Number of Containers:	Container Size:(1gal, 1oz, etc.)	Container Type:(drum,can,tube, jug, etc.)	Bin Tracking #	
Is the product one of the following? (If so, please provide an MSDS/SDS or lab analytical results/formulary and profile for contents)				
Check all that apply: <input type="checkbox"/> Used / Spent <input type="checkbox"/> Unused / Unspent <input type="checkbox"/> Lab Chem / Pharm. <input type="checkbox"/> Industrial Material				
Part # / NSN # / SDS #:		Intended Purpose of Waste / Chemical / Material		

(SECTION 3)

I certify that the above item is labeled, marked, packaged and in the proper condition for transportation to Building 1495, Fort Belvoir, Virginia, and that all persons involved with this turn-in have had the Fort Belvoir RCRA Hazardous Waste Permit training. A current Hazardous Waste Management License (renewed yearly) must be presented at the time of turn-in. *All reimbursable organizations authorize the Environmental and Natural Resource Division to request reimbursement for all costs associated with the proper disposal of this waste and do hereby agree to authorize payment of such costs when request for funds is submitted to my organization.*

CALL 703-806-4537 TO SCHEDULE YOUR TURN-IN

Name of Organization's Environmental Compliance Officer (PRINT)		Signature of Organization's Environmental Compliance Officer	
Daytime Phone	Email Address	Date	
Name of Organization's Waste Handler (PRINT)		Signature of Organization's Waste Handler	
Daytime Phone	Email Address	Date	

To be completed by DPW Hazardous Waste / Material Personnel Only

Date Received		Received By (print & sign)	
Turn-In ID # (TNY_0000)	Container ID # (CNY_0000)	Waste Profile ID #	
Weight (lbs)	DOT Hazard Class - Description	EPA Waste Code(s)	
Remarks (Additional information for contents of material and percents.)			