CONTAINERIZED WASTE TURN-IN FORM

For use of this form, see the Hazardous Waste Management Plan; the proponent is DPW-ENRD.

EPA ID	WASTE GENERATOR	MARK FOR

DISPOSAL TURN-IN DOCUMENT	DOCUMENT DATE
NATIONAL/LOCAL STOCK NUMBER	**WASTE ITEM**
DOT PROPER SHIPPING NAME	

TYPE OF CONTAINER	VOLUME OF CONTAINER	NUMBER OF CONTAINERS	TOTAL WEIGHT

POC		**BILL TO**	
WASTE CODE(S)		**PICK UP**	
CLIN		**PROFILE NUMBER**	
DISPOSAL COST PER CONTAINER		**ASD**	
TOTAL COST		**FUND CODE**	

INSPECTED BY:		CERTIFIED BY:	
(SIGN)	(PRINT)	(SIGN)	(PRINT)
DATE INSPECTED		**DATE CERTIFIED**	
CONTAINER NUMBER AND CONTAINER WEIGHT		**DELIVERY ORDER NUMBER**	

Turn in completed forms to Travis Farmer in Bldg 1121 or email to travis.a.farmer5.civ@army.mil.

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