

<p align="center"><b>MAIL THE COMPLETED FORM TO:</b> The Appropriate State or EPA Regional Office</p>	<p align="center">United States Environmental Protection Agency <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b></p>						
<p><b>1. Reason for Submittal</b> (see instructions on page 9)</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p><b>A. Reason for Submittal:</b></p> <p><input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).</p> <p><input type="checkbox"/> To provide subsequent notification (to update site identification information).</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application.</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment# _____).</p> <p><input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.</p>						
<p><b>2. Site EPA ID Number</b> (page 10)</p>	<p><b>EPA ID Number:</b> MSD981865470</p>						
<p><b>3. Site Name</b> (page 10)</p>	<p><b>Name:</b> The University of Mississippi</p>						
<p><b>4. Site Location Information</b> (page 10)</p>	<p><b>Street Address:</b> 100 Health &amp; Safety Building</p> <table border="1" data-bbox="370 806 1544 926"> <tr> <td><b>City, Town, or Village:</b> University</td> <td><b>State:</b> MS</td> </tr> <tr> <td><b>County Name:</b> Lafayette</td> <td><b>Zip Code:</b> 38677</td> </tr> </table>			<b>City, Town, or Village:</b> University	<b>State:</b> MS	<b>County Name:</b> Lafayette	<b>Zip Code:</b> 38677
<b>City, Town, or Village:</b> University	<b>State:</b> MS						
<b>County Name:</b> Lafayette	<b>Zip Code:</b> 38677						
<p><b>5. Site Land Type</b> (Page 10)</p>	<p><b>Site Land Type:</b> <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> State <input type="checkbox"/> Other</p>						
<p><b>6. North American Industry Classification System (NAICS) Code(s) for the Site</b> (page 10)</p>	<p><b>A.</b> 6113</p>	<p><b>B.</b></p>					
	<p><b>C.</b></p>	<p><b>D.</b></p>					
<p><b>7. Site Mailing Address</b> (page 11)</p>	<p><b>Street or P.O.:</b> 100 Health &amp; Safety Building</p> <p><b>City, Town, or Village:</b> University</p> <p><b>State:</b> MS</p> <p><b>Country:</b> UNITED STATES <b>Zip Code:</b> 38677</p>						
<p><b>8. Site Contact Person</b> (page 11)</p>	<p><b>First Name:</b> Edward</p>	<p><b>MI:</b> M</p>	<p><b>Last Name:</b> Movitz</p>				
	<p><b>Phone Number:</b> 6629155433 <b>Extension:</b></p>		<p><b>Email Address:</b> movitz@olemiss.edu</p>				
<p><b>9. Operator Legal Owner of the Site</b> (pages 11 and 12)</p>	<p><b>B. Name of Site's Operator:</b> The University of Mississippi</p>		<p><b>Date Became Operator (mm/dd/yyyy):</b> 11/06/1848</p>				
	<p><b>Operator Type:</b> <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> State <input type="checkbox"/> Other</p>						
	<p><b>A. Name of Site's Legal Owner:</b> State of Mississippi Bureau of Buildings</p>		<p><b>Date Became Owner (mm/dd/yyyy):</b> 02/24/1844</p>				
	<p><b>Owner Type:</b> <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> State <input type="checkbox"/> Other</p>						

<b>9. Legal Owner</b> (Continued) Address	<b>Street or P. O. Box:</b> 501 North West St Suite 1401B		
	<b>City, Town, or Village:</b> Jackson		
	<b>State</b> MS		
	<b>Country:</b> USA	<b>Zip:</b> 39201	

**10. Type of Regulated Waste Activity**

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 12 to 16.)

**A. Hazardous Waste Activities**

Complete all parts for 1 through 6.

Y  N  **1. Generator of Hazardous Waste**  
 If "Yes", choose only one of the following -a, b, or c.

- a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- b. SQG: 100 to 1,000 kg/mo (200 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- c. CESQG: Less than 100 kg/mo (220lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities

- Y  N  d. United States Importer of Hazardous Waste
- Y  N  e. Mixed Waste (hazardous and radioactive) Generator

Y  N  2. Transporter of Hazardous Waste

Y  N  **Treater, Storer, or Disposer of Hazardous Waste (at your site) Note:**  
 A hazardous waste permit is required for this activity

Y  N  **Recycler of Hazardous Waste (at your site)**

Y  N  **5. Exempt Boiler and/or Industrial Furnace**

If "Yes" mark each that applies.

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, Refining Furnace Exemption

Y  N  6. Underground Injection Control

**B. Universal Waste Activities**

Y  N  **1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. If "Yes", mark all boxes that apply:**

	Generated	Accumulated
a. Batteries	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Y  N  **2. Destination Facility for Universal Waste**  
 Note: A hazardous waste permit may be required for this activity.

**C. Used Oil Activities**

Mark all boxes that apply.

Y  N  **1. Used Oil Transporter**  
 If "Yes", mark each that applies.

- a. Transporter
- b. Transfer Facility

Y  N  **2. Used Oil Processor and/or Re-refiner**  
 If "Yes", mark each that applies.

- a. Processor
- b. Re-refiner

Y  N  **3. Off-Specification Used Oil Burner**

Y  N  **4. Used Oil Fuel Marketer**  
 If "Yes", mark each that applies.

- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

<b>11. Description of Hazardous Wastes( see instructions on page 16)</b>						
<p><b>A. Waste Codes for Federally Regulated Hazardous Wastes.</b> Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.</p>						
D001	D002	D003	D004	D005	D007	D009
D011	D018	D022	F002	F003	F005	P003
P005	P018	P028	P036	P105	P106	P108
<p><b>B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.</b> Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.</p>						
<b>12. Comments (see instructions on page 17)</b>						
<p>Extra EPA Codes: U038 U057 U103 U169 U188</p>						
<p><b>13. Certification</b> I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information,including the the possibility of fine and imprisonment for knowing violations.  <b>(see instructions on page 17)</b></p>						
<b>Signature of owner, operator, or an authorized representative</b>	<b>Name and Official Title (type or print)</b>				<b>Date Signed (mm-dd-yyyy)</b>	
	Edward M Movitz, H & S Officer					

U.S. ENVIRONMENTAL  
PROTECTION AGENCY

2006 Hazardous Waste Report

WASTE GENERATION  
AND MANAGEMENT

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

FORM  
GM

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Bulked, Drummed, mixtures of solvents and reagents, from research and classrooms, Flammable Liquids, Hexane, Ethyl Acetate		
B. EPA hazardous waste code (page 22) D001 D018 D022 F002 F003 F005		C. State hazardous waste code	
D. Source code (page23) Management Method code for Source code G25 G25	E. Form code (page23) W204	F. Quantity generated in 2006 29875	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 29875
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

U.S. ENVIRONMENTAL PROTECTION AGENCY

2006 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Bulked, Drummed, Mixtures of used and out of spec materials, from organizational services, Flammable Liquids, paint and mineral spirits		
B. EPA hazardous waste code (page 22) D001		C. State hazardous waste code	
D. Source code (page23) G06 Management Method code for Source code G25	E. Form code (page23) W211	F. Quantity generated in 2006 846	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 846
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

U.S. ENVIRONMENTAL PROTECTION AGENCY

2006 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Waste Aerosols, from organizational services, paints and primers		
B. EPA hazardous waste code (page 22) D001		C. State hazardous waste code	
D. Source code (page23) Management Method code for Source code G25 G11	E. Form code (page23) W209	F. Quantity generated in 2006 45	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 45
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

U.S. ENVIRONMENTAL  
PROTECTION AGENCY

2006 Hazardous Waste Report

FORM  
GM

WASTE GENERATION  
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Bulked, Drummed, lamps, bulbs, glass and mercury from organizational services.		
B. EPA hazardous waste code (page 22) D009		C. State hazardous waste code	
D. Source code (page23) Management Method code for Source code G25 G11	E. Form code (page23) W320	F. Quantity generated in 2006 4926	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 4926
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

U.S. ENVIRONMENTAL  
PROTECTION AGENCY

2006 Hazardous Waste Report

FORM  
GM

WASTE GENERATION  
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Bulkled mixture of cleaning solutions containing Ammonium Hydroxide.		
B. EPA hazardous waste code (page 22) D002		C. State hazardous waste code	
D. Source code (page23) Management Method code for Source code G25 G11	E. Form code (page23) W110	F. Quantity generated in 2006 284	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 284
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:



SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

U.S. ENVIRONMENTAL  
PROTECTION AGENCY

2006 Hazardous Waste Report

FORM  
GM

WASTE GENERATION  
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) LAB packs of out of date and out of spec Non-Acute reagents and materials, from research, including Flammable Liquids, Oxidizers and Corrosive materials.		
B. EPA hazardous waste code (page 22) LABP		C. State hazardous waste code	
D. Source code (page23) G11 Management Method code for Source code G25	E. Form code (page23) W001	F. Quantity generated in 2006 2765	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 2765
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:

U.S. ENVIRONMENTAL  
PROTECTION AGENCY

2006 Hazardous Waste Report

WASTE GENERATION  
AND MANAGEMENT

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

FORM  
GM

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Lab packs of out of date and out of spec. toxic materials from research, containing "P" and "U" codes, Sodium Azide, Sodium Cyanide, Brucine.		
B. EPA hazardous waste code (page 22) LABP		C. State hazardous waste code	
D. Source code (page23) G11 Management Method code for Source code G25	E. Form code (page23) W004	F. Quantity generated in 2006 287	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND000772186	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 287
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments:

SITE NAME: The University of Mississippi

EPA ID NO: MSD981865470

U.S. ENVIRONMENTAL  
PROTECTION AGENCY

2006 Hazardous Waste Report

FORM  
GM

WASTE GENERATION  
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec.1	A. Waste description (page 22) Flammable liquids, from research, containing Low Level radioactive Waste, Toluene/xylene/ethyl acetate mixtures		
B. EPA hazardous waste code (page 22) F003 F005 D001		C. State hazardous waste code	
D. Source code (page23) Management Method code for Source code G25 G11	E. Form code (page23) W203	F. Quantity generated in 2006 92	G. UOM (page 23) 1 Density <input type="checkbox"/> lbs/ga <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on site ? (page22) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC.3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code	Quantity treated, disposed, or recycled onsite in 2006	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2006

Sec. 3	A. Was any of this waste shipped off site in 2006 for treatment, disposal, or recycling? (pages25 and 26) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped TND982109142	C. Off-site Management Method code Shipped to H141	D. Total quantity shipped in 2006 92
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2006

Comments: