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| DTSD Region or Office       |
| WisDOT Project ID       | County      | Highway and Termini if applicable      |
| Site Name and address       | Phase of Investigation if applicable |
| Consultant Company, if applicable      |
| Consultant or Site Contact      |
| Contact (Area Code) Telephone Number      |
| Contact Email Address      |
| Consultant ID for this Site, if applicable      |
| Generation Date (m/d/yyyy)       |
| Comments, special instructions for pickup or site access      |

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| Waste Description – describe containers of similar size and contents in one row. Insert additional rows as needed.***Number and Label Each Container.***  |
| **Container ID Number** | **Container Size and Type** | **Estimated Volume of Waste** | **Source: Tank, Well, Boring** | **Contents: Soil, Water, Other (Describe)** |
| Example: 1, 4, 5, 6, 7, 18, 22, 23 | Example: 30 gallon metal drum | Example: 8 drums x 30 gal = 240 gallons | Example: monitoring wells # MW3, MW4, and MW7 | Example: wash water, alconox |
| Example: 2, 3 | Example: Five gallon pail  | Example: 2 pails x 5 gallons = 10 gallons  |  Example: machine oil spill | Example: Floor dry and machine oil  |

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| Total Number of Containers to be picked up:        |

Container Location: Attach map or site sketch to Email

Analytical Results: Attach analytical results to Email (if applicable)

Email one copy of this form to each of the following:

* DOT Hazardous Materials Unit
* [Regional Environmental or Hazardous Materials Coordinator](http://wisconsindot.gov/Documents/doing-bus/eng-consultants/cnslt-rsrces/environment/regenvhazardmatcoords.pdf)
* [Hazardous Waste Contractor](http://wisconsindot.gov/Documents/doing-bus/eng-consultants/cnslt-rsrces/environment/hazwaste-contacts.pdf)

Include a copy of this form as the final appendix in the report for this site (when applicable).