

<b>SEND COMPLETED</b> <b>FORM TO: PO Box 1677</b> Okla. Dept of Env. Quality Oklahoma City, OK 73101	United States Environmental Protection Agency <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b>
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<b>1. Reason for Submittal</b>	<b>Reason for Submittal:</b> <input type="checkbox"/> To provide DEQ notice that the facility was closed or went out of business on:  <input type="checkbox"/> To provide DEQ notice that the facility was sold on: <input type="checkbox"/> To provide DEQ notice that the facility no longer generates hazardous waste. <input type="checkbox"/> To provide DEQ notice that the facility was a one time generator. <input type="checkbox"/> To comply with Biennial Report Requirement for a facility that did not handle Hazardous Waste in year.
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<b>2. Site EPA ID Number ( page 24)</b>	<b>EPA ID Number</b> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-top: 5px;"></div>
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<b>3. Site Name (page 24)</b>	<b>Name:</b>
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<b>4. Site Location Information (page 24)</b>	<b>Street Address:</b>	
	<b>City, Town, or Village:</b>	<b>State:</b>
	<b>County Name:</b>	<b>Zip Code:</b>

**13. Certification.** 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 possibility of fine and imprisonment for knowing violations.

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)