Alabama Department of Environmental Management 1400 Coliseum Blvd (36110-2059) P.O. Box 301463 (36130-1463)

Montgomery, AL

Alabama Hazardous Wastes Management and Minimization Act RECEIPT FOR SAMPLES AND DOCUMENTS

| 1. Investigation Identification | | 2. Firm Name | | | |
|---|---|--------------------|---------------------|--------------|--|
| Dete | | | 2. FIIII Name | | |
| Date | Employee Last 4 SSAN | Daily Sequence No. | | | |
| | SSAIN | | | | |
| | | | | | |
| 3. Inspector Address | | | 4. Firm Address | | |
| | | | | | |
| 1400 Coliseum Blvd | | | | | |
| P.O. Box 301463 | | | | | |
| Montgomery, AL 36130-1463 | | | | | |
| The documents and samples of chemical substance and/or mixtures described below were collected in connection with the administration and | | | | | |
| enforcement of the Alabama Hazardous Wastes Management and Minimization Act (and the Resource Conservation and Recovery Act). | | | | | |
| Receipt of the document(s) and/or samples described is hereby acknowledged | | | | | |
| No. | | | Description | | |
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| Optional: | | | | | |
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| Duplicate or split samples: Requested and Provided Not Requested | | | | | |
| Certification | | | | | |
| | | | | | |
| I certify that the state | I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any | | | | |
| knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law. | | | | | |
| Inspector Signature | | | Recipient Signature | | |
| | | | | | |
| Name | | | Name | | |
| T WILL | | | | | |
| TOTAL | | Data Ciana I | TM | Data Ciana d | |
| Title | | Date Signed | Title | Date Signed | |