



Adobe Acrobat

You can fill out this form in Acrobat Reader and then print the form with the data from the Reader.

Note that you can NOT use the **Save** or **Save As** function with **Acrobat Reader**. If you want a copy for your records, please print an extra copy of the form.

To fill out a form:

- (1) Select the hand tool . 
- (2) Position the pointer inside a form field, and click. The I-beam pointer allows you to type text. The arrow pointer allows you to select a button, a check box, a radio button, or an item from a list.
- (3) After entering text or selecting an item, check box, or radio button, do one of the following:
 - Press **Tab** to go to the next form field.
 - Press **Shift+Tab** to go to the previous form field.
 - In a multi-line text form field, **Enter** or **Return** goes to the next line in the same form field. You can use **Enter** on the keypad to accept a change and deselect the current form field.
 - Press **Escape** to reject the form field change and deselect the current form field.
 - If you are in Full Screen mode, pressing **Escape** a second time causes you to exit Full Screen mode.
- (4) Once you have filled in the appropriate form fields, do the following:
 - Select the print tool  for a copy of the form for mailing or to keep for your records.

To clear a form in a browser window:

Exit the Acrobat viewer and start again.

Important: There is no undo for this action.

APPLICATION FOR EMERGENCY EPA/DEP IDENTIFICATION NUMBER

FACILITY NAME _____ FL _____ ISSUE DATE _____
ISSUED BY _____

Complete the following information, make sure the form is signed by the generator, and send the original form to the Hazardous Waste Compliance/Enforcement Section at the appropriate Florida Department of Environmental Protection (FDEP) district office. Type or legibly write the information in ink.

Emergency I.D. numbers are generally issued only in the following circumstances, pursuant to Rule 62-730.161, Florida Administrative Code (F.A.C.):

1. Emergency situations (e.g. spills);
2. Cleanup of an abandoned site;
3. One-time cleanup of a site that does not normally generate hazardous waste and will not foreseeably generate hazardous waste in the future.

If the Department issues an emergency EPA/DEP I.D. number, you must submit legible copies of all signed and returned manifests to the Hazardous Waste Compliance Section of the FDEP District office that issued the number within 45 days of the last shipment of hazardous waste. If you generate more than 1000 kilograms of hazardous waste in a calendar month, you must submit a biennial report as described in Rule 62-730.160(5), F.A.C.

If you need an emergency EPA/DEP I.D. number for an emergency response situation, call the FDEP district office with the information requested on this form and a number will be issued as quickly as possible.

IMPORTANT: THE EMERGENCY EPA/DEP I.D. NUMBER IS NOT VALID BEYOND 60 DAYS OF THE ISSUE DATE.

A. Situation

Person Requesting I.D. Number: _____

Briefly describe the situation and state why you need an emergency EPA/DEP I.D. number:

B. Hazardous Waste Information

(1) Waste Description: _____

(2) Fill in the table with the waste code(s) and amount(s), including the unit of measurement.

EPA Waste Codes	Manifested Amount	UOM

FDEP USE ONLY
FL
ISSUE DATE
NOT VALID AFTER
DATE RECEIVED
DATE PROCESSED
PROCESSED BY
COUNTY

C. Generator Information:

(1) Facility for which I.D. number is requested (must be generation point):

(a) Facility Name: _____

(b) Physical Address: _____

City: _____ State: _____ Zip: _____

(c) Phone Number: _____

(d) Contact Person: _____

(2) Mailing Address (if different from above):

(a) Name: _____

(b) Address: _____

City: _____ State: _____ Zip: _____

D. Shipment Information

(1) Transporter Name: _____

Transporter EPA I.D. _____

(2) Designated TSD Facility: _____

TSD EPA I.D.: _____

CERTIFICATION

I hereby certify that I am an authorized employee of the generator, and I believe that the information in this application is correct and complete to the best of my knowledge. I further certify that the emergency EPA/DEP I.D. number shall be used only for the above hazardous wastes and their shipment unless I obtain prior FDEP approval to do otherwise. I shall send a copy of the manifest to FDEP within 45 days of the last shipment of hazardous wastes. I certify that the situation described in Section A is true. I understand that submission of false or incorrect information or use of the emergency EPA/DEP I.D. number beyond 60 days from the date of issuance may result in enforcement action.

Signature

Date

Name (please print or type)

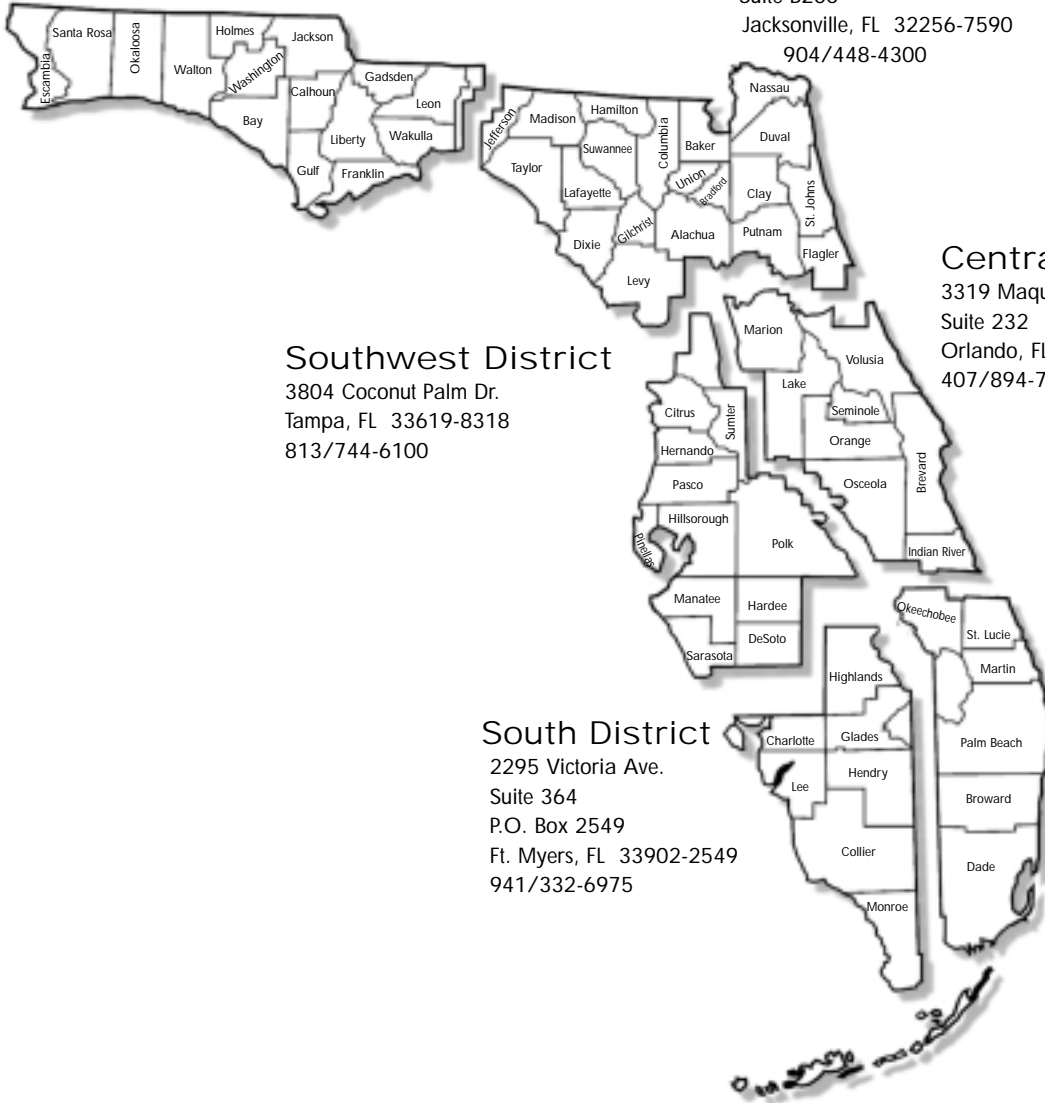
(_____)_____
Telephone

Northwest District

160 Government Center
Pensacola, FL 32501-5794
850/595-8300

Northeast District

7825 Baymeadows Way
Suite B200
Jacksonville, FL 32256-7590
904/448-4300



Southwest District

3804 Coconut Palm Dr.
Tampa, FL 33619-8318
813/744-6100

Central District

3319 Maquire Blvd.
Suite 232
Orlando, FL 32803-3767
407/894-7555

South District

2295 Victoria Ave.
Suite 364
P.O. Box 2549
Ft. Myers, FL 33902-2549
941/332-6975

Southeast District

400 N. Congress Ave.
West Palm Beach, FL 33401
561/681-6600

South Dist. Branch Office

2796 Overseas Highway
Suite 221
Marathon, FL 33050
305/289-2310