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TCEQ Permit No. HW-50267 EPA ID No. TXD055135388

EPA	ID NO.	1 X D U 5 5 1 3 5 3 8 8
Approval No.:		
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LAB PACK SUMMARY						
I. GENERATOR INFO	RMATION					
Generator Name Contact Telephone Fax			Mailing Address City, State Zip Site Address City, State Zip			
U.S. EPA ID No:	Texas Generator ID No.					
II. CUSTOMER INFO	RMATION 🗵	same as above				
Customer Name Contact Telephone Fax			Mailing Address City, State Zip  Purchase Order No.			
	D OLIANITITY					
III. DESCRIPTION AN	D QUANTITY					
FACILITY USE ONLY CONTAI TREATMENT CODE SIZE		TEXAS WASTE CODE**	FACILITY U	SE ONLY	TOTAL # OF CONTAINERS	
*If you are an out of state generator, you may ass the <b>form code</b> and end with the <b>classification</b> container in the same manner as described above ime lab packs will be shipped from this facility, the FORM CODES 001 - Lab Packs of old Chemicals	code (both described below). If except you should assign an art in form TWC0757 must be comp	the generating facility is loc bitrary 4 digit sequence number	ated in Texas, assign the per that will be used each time	Texas Waste Code when the you ship a particular TNRCC will assign the Total CLA	nich best describes the contents of the r form of lab pack. If this will be the only	
004 - Lab packs containing acute hazar	dous waste 009 - Othe	r lab packs (Specify in Co	mments)		1 - Class 1 (nonhazardous)	
PACKING MEDIUM  Vermiculite Clay Base  Comments:	sed Sawdust	Corn Cob (Slikv	vik) Other (Ple	ase specify)		
IV. CERTIFICATIONS						
GENERATOR: I hereby certify that the -dibenzodioxon (dioxon) or bidenzofurar hazards have been disclosed. I understa or unapproved containers may result	is. I further certify that all informand that I am responsible for the i	ition submitted in this and all representation of every conta	attached documents is com iner of waste material and the	plete and accurate, and hat any misrepresented	that all known or suspected	
GENERATOR SIGNATURE			TITLE			
NAME (Printed)			DATE			
PACKAGING AGENT: I certify that all ma and by DOT packaging exemption listed a	bove. I certify that any and all in	nformation necessary for spec	cific representation of the wa	aste has been disclosed	on the attached inventories.	
SIGNATURENAME (Printed)			_ TITLE _ DATE			