Please complete and fax/email this form or equivalent information, preferably 2 weeks prior to your scheduled pick-up date to Meghan Turvey at ([mturvey@nacphilo.com](mailto:mturvey@nacphilo.com)) or fax to **865-220-0686** or Danielle Nagrone at ([dnagrone@nacphilo.com](mailto:dnagrone@nacphilo.com)) or fax to **858-586-2580** **.** Wipe Test Data should also be faxed when completed. Please contact us at **865-483-1551** with any questions!

|  |  |  |  |
| --- | --- | --- | --- |
| Generator Name: |  | Site Contact Name: |  |
| Billing / Mailing Address: |  | Office / Cell Number: |  |
|  | Fax Number: |  |
|  | Paperwork Contact Name ( If different from Site Contact): |  |
| Pick-Up Address:  (if different) |  | P.O. Number: |  |
|  | Export Permit: |  |
| On-Site Packaging Requested: |  | EPA ID Number: |  |
| Requested Supplies: |  | Transporter: |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Container ID # | Cont. and waste weight (lbs.) | Cont. type  (fiber, steel, etc.) | Cont. Vol. (ft3) | Waste Description | Surface Dose Rate (mR/hr) | Surface Contam. | Isotopes | Activity **(**mCi**)**  Per Isotope | EPA Codes\* (D001, F003, etc.) | Process Requested | Burial /  Processing Facility |
|  |  |  |  |  |  |  |  |  |  |  |  |
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**\*Please indicate specific hazardous constituents (Toluene, Xylene, etc.) or provide completed Mixed Waste Profile Form.** *Continue on additional pages if needed.*

**OFFICE USE ONLY:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Quote #: |  | Pick-Up Date: |  | Profile #: |  |
| Manifest #: |  | BOL #: |  | Notes: |  |