

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY INVENTORY IDENTIFICATION NUMBER APPLICATION

FOR AGENCY USE ONLY
INVENTORY # ISSUED:

Please read the instructions below before completing. Please exclude punctuations when completing. Limit information to the amount of blanks provided or we will have to abbreviate for you. The information given is exactly how it will appear in the Bureau of Land's computer inventory system.

IEMA INCIDENT # (if applicable) _____

LOCATION ADDRESS _____ (exact street location where waste is generated)

COMPANY NAME: _____

NAICS CODE(s): _____

LOCATION (Post Office Box numbers will not be accepted):

CITY: _____ STATE: _____

ZIP: _____ COUNTY: _____

TELEPHONE: _____

CONTACT: _____

MAILING ADDRESS _____ (if same as above, leave blank)

STREET: _____

PO BOX: _____

CITY: _____

STATE: _____ ZIP: _____

RETURN ADDRESS: INDICATE THE LOCATION TO WHICH THIS FORM SHOULD BE RETURNED.

Company Name: _____

Contact Person: _____

Street: _____

City: _____ State: _____ Zip: _____

AUTHORIZATION STATEMENT

I authorize this request for assignment of an Illinois inventory ID number. This company has not previously shipped waste from this location under this Illinois Manifest System. If my waste is a RCRA hazardous waste, I certify this company has or has applied for a USEPA generator ID number.

Signature of Authorized Representative: _____ Date: _____

INSTRUCTIONS

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY INVENTORY IDENTIFICATION NUMBER APPLICATION

An Illinois inventory ID number is required under 35 Ill. Adm., Section 855.104. Information provided on this application form will be entered into the Bureau of Land's inventory computer system. Illinois Inventory ID numbers are assigned to a specific location address and not to the facility. A separate application is required for each location. Once an inventory number is assigned to a location, it will remain in the inventory system indefinitely. Please notify the Bureau of Land's Waste Reduction and Compliance Section if there is a name change for the location address.

Applications which are incomplete or are completed inaccurately will be rejected. To avoid delays or a rejected application, please read the following instructions carefully.

The area at the top of the page is for Agency use. The number that is assigned to your location will appear in this space when your application is processed.

IEMA INCIDENT # (if applicable): Provide the Illinois Emergency Management Agency (IEMA) Incident number for this location.

COMPANY NAME: Provide the company's official name.

NAICS CODE(s): Provide the [North America Industrial Classification System \(NAICS\) Code](#) that best describes the principal product or services rendered at this location.

LOCATION ADDRESS: LOCATION: Provide the street address, a P.O. Box is not acceptable. **CITY:, STATE:, ZIP CODE:** Provide all information. **COUNTY:** Provide the county in which the company is located. **TELEPHONE:** Provide company telephone number including the area code. **CONTACT:** Provide a contact person for your company.

MAILING ADDRESS (if applicable): Provide this information only if it is different than the location address, if not, leave blank.

RETURN ADDRESS: Indicated the location to which this form should be returned.

AUTHORIZATION STATEMENT: After completion of form, read the certification statement, sign and date.

RETURN COMPLETED FORM BY FAX TO:

217/782-9290
Illinois Environmental Protection Agency
Bureau of Land (#24)
Waste Reduction and Compliance Section

Note: FAXes are preferred

OR MAIL COMPLETED FORM TO:

Illinois Environmental Protection Agency
Bureau of Land (#24)
Waste Reduction and Compliance Section
1021 North Grand Avenue East
P.O. Box 19276
Springfield, Illinois 62794-9276