

SATELLITE ACCUMULATION POINT (SAP) REQUEST
Establish/Re-Certification/Closure

PERSON SUBMITTING REQUEST: _____

DATE: _____ UNIT: _____

1. Request the following action for a SAP:

- Establish Re-Certification Closure

2. The waste stream of the SAP is/was _____

3. Estimated date of action _____

4. This SAP site is located at: Building # _____ Room # _____

5. The Environmental Compliance Officer (ECO) is _____ and can be contacted at _____ (phone number).

6. The point of contact for this memorandum is _____ and can be contacted at _____ (phone number).

7. The SAP at this location will be maintained and managed IAW applicable Federal, State and Local regulations. When waste containers are filled, the SAP operator will fax either the Regulated Waste or Battery Information worksheets to the Environmental Management Division at 502-624-3000. Any deployment over 30 days will require closure of the above site.

8. Questions should be directed to the hazardous waste points of contact at EMD, 502-624-8379/3692/3598.

Commander/Supervisor

Environmental Compliance Officer