City of Albany Solid Waste Management Facility 525 Rapp Road Albany, NY 12205

SPECIAL MATERIALS DATA SHEET

Name of Generator:	
Address:	
Name of Transporter*:	
Address:	
Name of Broker* (Entity Paying & Scheduling):	
Contact Person:	
Telephone Number:	
Address:	
Soil Location:	
Site Address:	
Spill Identification No.:	
Contaminant Type:	
Approximate Volume:	
Shipping Dates:	
Lot # (Assigned by City):	

OFFICE USE ONLY		
Data Sheet:	Generator Letter:	
Disposal Terms:	Profile Sheet:	
Laboratory Data:	Date Lot No. Assigned:	
Analytical Summary Sheet:	Permit No.:	

*Must have current City of Albany Landfill Permit