



**ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF SPILL PREVENTION AND RESPONSE  
Prevention and Emergency Response Program**

**Contaminated Soil Transport and Treatment Approval Form**

<b>ADEC SPILL #</b>		<b>SPILL NAME</b>	
<b>SPILL LOCATION</b>			
<b>CONTAMINATED SOIL'S CURRENT LOCATION</b>		<b>SOURCE OF THE CONTAMINATION</b>	
<b>TYPE OF CONTAMINATION</b>	<b>ESTIMATED VOLUME</b>	<b>DATE(S) STOCKPILE GENERATED</b>	
<b>POST TREATMENT ANALYSIS REQUIRED</b> <i>(such as GRO, DRO, RRO, BTEX, and/or Chlorinated Solvents)</i>			
<b>COMMENTS</b>			

**Facility Accepting the Contaminated Soil**

<b>NAME OF THE FACILITY</b>	<b>ADDRESS/PHONE NUMBER</b>

**Responsible Party and Contractor Information**

<b>BUSINESS/NAME</b>	<b>ADDRESS/PHONE NUMBER</b>

\_\_\_\_\_  
Name of the Person Requesting Approval (printed)

\_\_\_\_\_  
Title/Association

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

-----**ADEC USE ONLY**-----

Based on the information provided, ADEC approves transport of the above mentioned material for treatment in accordance with the approved facility operations plan. The RP or their consultant must submit to the ADEC Project Manager a copy of weight receipts of the loads transported to the facility and a post treatment analytical report or other approved ADEC treatment/disposal notification. The contaminated soil shall be transported as a covered load in compliance with 18 AAC 60.015.

\_\_\_\_\_  
ADEC Project Manager Name (printed)

\_\_\_\_\_  
Project Manager Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number