HAZARDOUS WASTE INVENTORY

FOR CONDITIONALY EXEMPT SMALL QUANTITY GENERATORS
COUNTY OF SANTA CLARA HAZARDOUS WASTE RECYCLING AND DISPOSAL PROGRAM

TODAY'S DATE:_____ **TYPE OF BUSINESS:**_____

BUSINESS NAME:_____ **EPA ID NUMBER:**_____

BUSINESS ADDRESS:_____

MAILING ADDRESS:_____

CONTACT PERSON:_____**EMAIL:**_____

FAX NUMBER:_____**TELEPHONE:**_____

WASTE INVENTORY

WASTE DESCRIPTION	HAZARDOUS CLASSIFICATION	TOTAL LIQUID AMOUNT	QUANTITY OF CONTAINERS	SIZE OF CONTAINERS
Latex Paint, Oil Paint, Paint Thinner, Motor Oil, Pesticide, Acids, Bases, Chemical Name, Fluorescent Tubes, Etc.	Flammable, Corrosive, Oxidizer, Reactive, Toxic, Etc.	of each line item	of each line item	Oz, Qts, Gal, Lbs, Lt, Ft, Etc.

Authorized Representative: _____
(Please Print Name)

_____ _____
(Signature) (Date)

ONCE COMPLETED, PLEASE EMAIL TO HHWSTAFF@DEH.SCCGOV.ORG, OR FAX TO (408) 280-6479. FOR MORE INFORMATION PLEASE CALL (408) 299-7300

Department of Environmental Heath, Hazardous Materials Compliance Division-HHW/CESQG Program - 1555 Berger Dr, Suite 300, San Jose, CA 95112, (408) 299-7300