

SOIL WASTE APPROVAL APPLICATION

Section I	Section I GENERATOR INFORMATION							
a. Generator:					b. Generatir	ng Location:		
c. Address:					d. Site Addr	ress:		
e. Contact Nam	ne :				f. Site Conta	act Name:		
g. Contact Title	e:				h. Site Cont	act Title:		
i. Phone No:					j. Site Phon	e No:		
k. Email Addre	ess:							
m. Billing Addre	ess:							
Section II CONSULTANT INFORMATION								
a. Consultant:					b. Phone No	o:		
c. Address:					d. Email Add	dress:		
e. Contact Nam					f. Contact	Title:		
Section III WASTE CHARACTERIZATION								
Prior Uses of S	ite:							
Current Use of	Site:							
Source of Cont	amination:							
Reason for Soil Removal:								
Two of Controllection (an existed annulus discolus action).								
Type of Contamination (eg. metal, gasoline, diesel, waste oil):								
Type of Soils (eg. grain size):								
Debris in Waste: Maichura Contant (og safe for transport)								
Moisture Content (eg. safe for transport): Estimated Quantity (m³, tonnes, drums):								
Date and Title of applicable Environmental Consultant's Reports:								
Attach laboratory analytical report which accurately portrays the nature and quantity of the contaminants.								
Section IV CERTIFICATION (completed by Generator or Consultant)								
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I hereby certify that the above and attached description is complete and accurate to the best of my knowledge. No deliberate or willful omissions of composition or properties exist, and all known or suspected hazards have								
been disclosed. The waste has been characterized as per Nova Scotia Environment Guidelines or equivalent								
Date		Name	•	Signatu	re		Title	
Section V APPROVAL (completed					Ground Fix Remedi			
CS	RF	Colchester	Other	Specify-			•	
						GFR Project #		
						Waste Classification		
						Waste Classification		
						PCOC:		
			_				Ground Fix Remediation Ltd.	
Date		Name		Signatur	e		Annuary Coarre Arthur	
							Approval Group Authorized	