

**State of New Jersey**  
**Department of Environmental Protection**  
**Solid & Hazardous Waste Regulation Element**  
**Manifest Section**  
**P.O. Box 422**  
**401 East State Street**  
**Trenton, New Jersey 08625-0422**

## "Request to Deactivate EPA ID Number"

EPA ID No. \_\_\_\_\_

Company Name: \_\_\_\_\_

Site Address: \_\_\_\_\_ (street) \_\_\_\_\_ (city / town)

\_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (lot) \_\_\_\_\_ (block)

Mailing Address: \_\_\_\_\_ (street / P.O. box) \_\_\_\_\_ (city / town)

\_\_\_\_\_ (state) \_\_\_\_\_ (zip code)

Company Contact: \_\_\_\_\_ (name) \_\_\_\_\_ (area code and phone number)

Reasons for deactivating EPA ID No. (Check all appropriate boxes.)

- The EPA ID number was obtained for a one time cleanup which is completed.
- The site has completed an ECRA cleanup (indicate ECRA Case # \_\_\_\_\_)
- Other

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the site presently occupied? (circle **yes** or **no** )

Sign and date the application below, and retain the last page (pink copy) for your records.

\_\_\_\_\_ (printed name)

\_\_\_\_\_ (signature)

\_\_\_\_\_ (title)

\_\_\_\_\_ (date)

Submission of false information is a violation of N.J.A.C. 7:26-5.6 and N.J.A.C. 7:26-7.3.

**copies:** NJDEP/DSHW Manifest section (address above)  
**Applicant** is to keep a copy