HAZARDOUS WASTE BIENNIAL REPORT

State Form 52388 (R/8-09)
Indiana Department of Environmental Management

FORM GM

RCRA ID |___|___|___|___|___|___|___|___|___|___|___|___| **REPORT YEAR** _____

NAME _____

A. Waste description	

B. Waste codes	|___|___|___|___| |___|___|___|___| |___|___|___|___| |___|___|___|___| |___|___|___|___|

C. Quantity generated	|____|____|____|____|____|____|____|____|____| . |____| ___ pounds ___ tons ___ kilograms ___ metric tons

D. Form code	W |____|____|____|	**E. Source code**	G|____|____| (If G25 enter a management code) H |____|____|____|	**F. Waste minimization code**	|___|

		G. RCRA ID of facility shipped to	**H. Quantity shipped off-site**	**I. Management code**
OFF SITE SHIPMENT	**Site #1**	|___|___|___|___|___|___|___|___|___|___|___|___|	|___|___|___|___|___|___|___|___|___| . |___|	H |___|___|___|
	Site #2	|___|___|___|___|___|___|___|___|___|___|___|___|	|___|___|___|___|___|___|___|___|___| . |___|	H |___|___|___|
	Site #3	|___|___|___|___|___|___|___|___|___|___|___|___|	|___|___|___|___|___|___|___|___|___| . |___|	H |___|___|___|
	Site #4	|___|___|___|___|___|___|___|___|___|___|___|___|	|___|___|___|___|___|___|___|___|___| . |___|	H |___|___|___|

		J. Management Code	**K. Quantity Managed On-site**
ON SITE MANAGEMENT	**System #1**	H |___|___|___|	|___|___|___|___|___|___|___|___|___| . |___|
	System #2	H |___|___|___|	|___|___|___|___|___|___|___|___|___| . |___|

COMMENTS: _____