OFFICE OF CONSERVATION
ENVIRONMENTAL DIVISION

MAIL TO: DNR, Office of Conservation, Environmental Division, P.O. Box 94275, Baton Rouge, LA 70804-9275

OVERNIGHT TO: DNR, Office of Conservation-9th Floor, Environmental Division, 617 North 3rd Street, Baton Rouge, LA 70802

WASTE RECEIVED FOR THE MONTH OF _____ , 20 _____

UIC- 19

COMMERCIAL FACILITY MONTHLY REPORT OF WASTE RECEIPTS

This form is to be completed and returned to ENV no later than the 15th day of the following month at the address listed above.

Facility Name:		**Site Code:**	
Facility Address:		**Phone Number:**	
Operator Code	**Operator Name**	**Waste Type**	**Amount (bbls)**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this report and all attachments and that, based on my personal knowledge or inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Disposer Authorized Representative: _____ Title: _____
(Please Print Name)

Signature: _____ Date: _____