MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI GEOLOGICAL SURVEY

REQUEST FOR PRELIMINARY INVESTIGATION OF PROPOSED SOLID-WASTE DISPOSAL SITE

FOR OFFICE USE ONLY
PROJECT NUMBER

FACILITY OR PROJECT LOCATION

FACILITY OR PROJECT NAME						
¼ ¼ ¼ SECTION	¼ ¼ SECTION	¼ SECTION	SECTION	TOWNSHIP NORTH	RANGE ☐ EAST ☐ WEST	QUADRANGLE NAME
WRITTEN LOCATION IF LEGAL DESCRIPTION IS UNAVAILABLE						COUNTY

OWNER INFORMATION

PROPERTY OWNER'S NAME			TELEPHONE	
ADDRESS	CITY		STATE	ZIP CODE
EMAIL ADDRESS (PLEASE PROVIDE AN EMAIL ADDRESS IF YOU WISH TO RECEIVE ELECTRONIC DELIVERY OF EVALUATION REPORT)				

EVALUATION REQUESTED BY

NAME AND COMPANY OF REQUESTOR			TELEPHONE	
ADDRESS	CITY		STATE	ZIP CODE
EMAIL ADDRESS (PLEASE PROVIDE AN EMAIL ADDRESS IF YOU WISH TO RECEIVE ELECTRONIC DELIVERY OF EVALUATION REPORT)				

FACILITY INFORMATION

TYPE OF DISOPSAL AREA PROPOSED

☐ SANITARY LANDFILL ☐ DEMOLITION LANDFILL

☐ UTILITY WASTE LANDFILL ☐ SPECIAL WASTE LANDFILL*

* A SPECIAL WASTE IS DEFINED IN 10 CSR 80-2.010 (108). PLEASE SPECIFY TYPE OF SPECIAL WASTE:

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SIZE OF PROPOSED DISPOSAL AREA IN ACRES

ELEVATION OF THE SUB-BASE GRADE IN FEET ABOVE MEAN SEA LEVEL
(IF SLOPING OR IRREGULAR, PLEASE EXPLAIN IN COMMENTS AREA BELOW)

SKETCH OR MAP MUST BE SUBMITTED WITH REQUEST!

A SKETCH OR TOPOGRAPHIC MAP MUST SHOW THE FOLLOWING: ALL KNOWN WELLS, SPRINGS, SINKHOLES, CAVES, MINES, ROADS AND DWELLINGS WITHIN ¼ MILE OF THE FACILITY. SHOW THE BOUNDARIES OF THE PROPOSED AND ANY EXISTING DISPOSAL AREAS AND ANY EXISTING BORINGS, TEST PITS OR EXCAVATIONS THAT EXPOSE SOIL OR BEDROCK. INCLUDE A SCALE AND NORTH ARROW ON THE MAP.

COMMENTS

REQUESTOR'S SIGNATURE	DATE
PROPERTY OWNER'S SIGNATURE (INDICATES PERMISSION TO ACCESS PROPERTY)	DATE

SEND COMPLETED COPY TO: DEPARTMENT OF NATURAL RESOURCES, MISSOURI GEOLOGICAL SURVEY, ENVIRONMENTAL GEOLOGY SECTION, PO BOX 250, ROLLA, MO 65402-0250 PHONE: 573-368-2161 FAX: 573-368-2111 EMAIL: gspeg@dnr.mo.gov