MISSOURI DEPARTMENT OF NATURAL RESOURCES
HAZARDOUS WASTE PROGRAM
P.O. BOX 176, JEFFERSON CITY, MO 65102
(573) 751-3176

TRANSPORTER'S USED OIL ANNUAL REPORT

ATTENTION: COMPLETE SEPARATE SUMMARY REPORTS FOR EACH FACILITY OR SECONDARY TRANSPORTER UTILIZED

SECTION A: REPORT IDENTIFICATION

For the 12 months ending 6/30/____

Page ____ of ____

SECTION B: TRANSPORTER INFORMATION

1. TRANSPORTER'S NAME		2. U.S. EPA IDENTIFICATION NUMBER - - - - - - - - - - -	
3. ADDRESS (PHYSICAL LOCATION)		4. MISSOURI TRANSPORTER ID NUMBER (LAST 4 DIGITS) H - - - - -	
5. CITY	6. STATE	7. ZIP	8. PHONE

NOTE: If this report summarizes used oil shipments made to a receiving facility, complete section C.
If this report summarizes used oil shipments delivered to another transporter, complete section D.

SECTION C: RECEIVING FACILITY INFORMATION

Complete only if waste summarized was delivered to a facility. Summarize shipments in section E.

9. FACILITY NAME (LOCATION WHERE USED OIL WAS DELIVERED)		10. FACILITY'S U.S. EPA IDENTIFICATION NUMBER - - - - - - - - - - -	
11. FACILITY SITE ADDRESS (PHYSICAL LOCATION)		12. FACILITY'S MISSOURI FACILITY ID NUMBER - - - - - -	
13. CITY	14. STATE	15. ZIP	16. PHONE

SECTION D: ACCEPTING TRANSPORTER INFORMATION

Complete only if waste summarized was transferred to another transporter. Summarize shipments in section E.

17. TRANSPORTER'S NAME		18. TRANSPORTER'S U.S. EPA IDENTIFICATION NUMBER - - - - - - - - - - -	
19. TRANSPORTER'S ADDRESS (PHYSICAL LOCATION)		20. TRANSPORTER'S MISSOURI TRANSPORTER ID NUMBER (LAST 4 DIGITS) H - - - - - -	
21. CITY	22. STATE	23. ZIP	24. PHONE

SECTION E: USED OIL IDENTIFICATION

LINE	25. DESCRIPTION OF USED OIL DELIVERED OR TRANSFERRED TO THE ABOVE-NAMED FACILITY OR TRANSPORTER.	26. FINAL HANDLING CODE	27. TOTAL AMOUNT OF USED OIL, IN GALLONS
A		T	
B		T	
C		T	
D		T	

SECTION F: CERTIFICATION STATEMENT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS AND ALL ATTACHED DOCUMENTS AND THAT BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THAT THE SUBMITTED 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.

PRINT NAME	SIGNATURE	DATE

RETURN FORM WITH ORIGINAL SIGNATURE TO THE ADDRESS AT THE TOP OF THIS FORM.

INSTRUCTIONS FOR THE TRANSPORTER'S USED OIL ANNUAL REPORT DNR–HWP-XX

All used oil transporters who have transported 1000 gallons or more of used oil during a given reporting year are required to complete this form and file it with the Department.

Section A REPORT IDENTIFICATION - Enter the correct year ending date and page number.

Section B TRANSPORTER INFORMATION - Enter your company's name, physical address, telephone number, U.S. EPA Identification Number and Missouri Transporter Identification Number.

Section C RECEIVING FACILITY INFORMATION - Complete this section for any used oil shipments your company delivered to a receiving facility. Enter the receiving facility's name, physical address, telephone number, U.S. EPA Identification Number and Missouri Facility Identification Number. This information is required even if the transporter and receiving facility are under common ownership or management.

Section D ACCEPTING TRANSPORTER INFORMATION - Complete this section for any used oil shipments your company transferred to another transporter. Enter the accepting transporter's name, physical address, telephone number, U.S. EPA Identification Number and Missouri Transporter Identification Number. This information is required even if the reporting transporter and the accepting transporter are under common ownership or management.

Section E USED OIL IDENTIFICATION - On lines A, B, C, and D make a separate entry for each used oil description and its corresponding handling code that was sent to the receiving facility or accepting transporter; use additional forms if necessary.

Item 25. Describe the used oil which is delivered or transferred to the receiving facility or accepting transporter using the following descriptions:

On-specification
Off-specification
Low concentration PCB used oil
Other (describe any used oil which does not fit any of the above three categories)

Item 26. Enter the final handling code for final disposition of the used oil which is delivered or transferred to the receiving facility or accepting transporter, using the following codes:

T40 - filtration (for reuse)
T50 - blending (for fuel)
T54 - distillation

If other codes apply, enter the appropriate code from Appendix 1, table 2 of 40 CFR part 265.

Item 27. Enter the amount, in gallons, of used oil delivered or transferred to the receiving facility or accepting transporter.

Section F CERTIFICATION STATEMENT - Read the statement, print or type name, sign and date.