## ADCO ENVIRONMENTAL SERVICES, LLC. SOURCE DISPOSAL INFORMATION FORM

HTTPS://SPECIALWASTEDISPOSAL.COM

Generator Name (I	Facility)								
Radioactive Materials					ssued By?				
License Number									
Address (Line 1)									
Address (Line 2)									
City				State		Zip Cod	е		
Contact				Email	<u>'</u>		I		
Name									
Telephone				Fax					
Source Manufactu	rer								
Source Dimension	16				Approxim	ato			
(Attach drawing or picture					Weight (if				
if possible)					known)				
Model					1				
Serial Number									
Is Source Mounted In or On Equipment?									
Is Removal Required?									
Is Source Damaged?									
Isotope									
Activity (Original)									
Original Assay Date									
Date of Last Leak	Test								
(Copy <u>MUST</u> acco									
this form)									
Is Source "Special	l Form"?				Certificati				
					Number (i	<sup>IT</sup>			
					, , , , , , ,				
Please use one form for each source for which you are sending information. This form can be emailed to: ( <a href="mailto:limp@adcoservices.com">limp@adcoservices.com</a> ). If you need assistance, please call: (708) 429-1660.									
Please fill in all areas of this form, without this information we may not be able to issue a quote for disposal.									
ADCO Environi	ADCO Environmental Services, LLC. cannot guarantee the acceptance of the described source for disposal.  FOR ADCO USE ONLY								
		<u>!</u>	OK ADCO USE ON	<u>L Y</u>					
Approval #		Ву			Date				

