



Illinois Environmental Protection Agency

2520 West Iles Avenue • P.O. Box 19276 • Springfield • Illinois • 62794-9276 • (217) 782-3397

Additional Episodic Event Notification Addendum

----- PART A -----

USEPA ID Number _____ Illinois ID Number _____

Site Location Information

Generator Name _____

Street Address _____

City _____ State _____ Zip Code _____ County _____

----- PART B -----

Additional Episodic Event Information

Reason an additional episodic event is needed _____

Nature of the additional episodic event _____

Estimated volume of hazardous waste to be managed from the event _____

How the generator will manage the hazardous waste _____

Estimated length of time needed to complete management of the waste (not to exceed 60 days) _____

Previous Episodic Event Information

Date of the previous episodic event during this calendar year: _____

Nature of the previous episodic event: _____

Was it planned ___ or Unplanned ___

How did the generator comply with the accumulation, manifesting, removal, and recordkeeping provisions of 35 Ill. Adm. Code 722.332 _____

Date of each previous episodic events during the previous three calendar years: _____

Nature of each previous episodic event: _____

Was it planned ___ or Unplanned ___

How did the generator comply with the accumulation, manifesting, removal, and recordkeeping provisions of 35 Ill. Adm. Code 722.332 _____

(Include additional information below)

----- PART C -----

Certification

Any person who knowingly makes a false, fictitious or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

By signing this form, you are certifying the information on this form is accurate. Furthermore, you are certifying that:

- That the generator will comply with the requirements of 35 Ill. Adm. Code Section 722.332(a)(4) through (a)(7) or (b)(4) through (b)(6); and
- That the generator will manage the hazardous waste in a way that no violation of the Act or Board regulations will occur.

Name: _____

Title: _____

E-mail: _____

Phone: _____ Date: _____

PLEASE MAIL THE COMPLETED ADDENDUM TO:

Illinois Environmental Protection Agency
Materials Management and Compliance Section - Mail Code 24
2520 West Iles Avenue, PO Box 19276
Springfield, Illinois 62794-9276