

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION



Request to Import/Reuse Fill or Soil

This form is based on the information required by DER-10, Section 5.4(e) and 6NYCRR Part 360.13. Use of this form is not a substitute for reading the applicable regulations and Technical Guidance document.

SECTION 1 - SITE BACKGROUND

The allowable site use is:

Have Ecological Resources been identified?

Is this soil originating from the site?

How many cubic yards of soil will be imported/reused?

If greater than 1000 cubic yards will be imported, enter volume to be imported:

SECTION 2 – MATERIAL OTHER THAN SOIL

Is the material to be imported gravel, rock or stone?

Does it contain less than 10%, by weight, material that passes a size 100 sieve?

Is this virgin material from a permitted mine or quarry?

Is this material recycled concrete or brick from a DEC registered processing facility?

SECTION 3 - SAMPLING

Provide a brief description of the number and type of samples collected in the space below:

Example Text: 5 discrete samples were collected and analyzed for VOCs. 2 composite samples were collected and analyzed for SVOCs, Inorganics & PCBs/Pesticides.

If the material meets requirements of DER-10 section 5.4(e)5 (other material), no chemical testing needed.

SECTION 3 CONT'D - SAMPLING		
Provide a brief written summary of the sampling results or attach evaluation tables (compare to DER-10, Appendix 5):		
Example Text: Arsenic was detected up to 17 ppm in 1 (of 5) samples; the allowable level is 16 ppm.		
If Ecological Resources have been identified use the "If Ecological Resources are Present" column in Appendix 5.		
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SECTION 4 – SOURCE OF FILL		
Name of person providing fill and relationship to the source:		
Location where fill was obtained:		
Identification of any state or local approvals as a fill source:		
If no approvals are available, provide a brief history of the use of the property that is the fill source:		
Provide a list of supporting documentation included with this request:		

The information provided on this form is	s accurate and complete.	
Signature	Date	
Print Name	-	
Firm	-	