FORM SI-1 ACCEPTABLE SOIL/FILL MATERIAL CERTIFICATION FORM

Instructions: The supplier shall make the acceptability determination at the site of soil/fill origin and will complete Parts 1 and 2 of this form. Part 3 will be completed by the person receiving the material to be used as acceptable soil/fill material.

Part 1: Supplier of soil/fill material information		
Date:		
Name (print):	Title: _	
Company Name:		
Street Address:		
City:	State: Zip):
Phone #: Email Addres	s:	
Part 2: Source of acceptable soil/fill material site i	nformation	
Source Site Name:		
Past Site Name(s) if known:		
Street Address:		
Block Lot(s)		
City:	State:	Zip: _
Attach a proof the soil material/fill is considered a	cceptable fill which r	neets the
requirements of Chapter 210, Section 6.C.(16).		
Brief history of the source property, including all I	property uses:	

1.	Has the source property ever been known or suspected to be contaminated?
	Do historical operations at the property reflect or suggest the potential for radiological
	contaminants?
3.	Are there naturally occurring radiological materials known or suspected at the source
	property?
If a _l	oplicable, the date soil/fill material was subject to analytical testing (provide copies):
If a	nalytical results are not provided, justification for determining the soil/fill is acceptable
with	nout the need for analytical results:
	Certification
of the visu water	the undersigned, certify under penalty of law, that the information provided in Parts 1 and 2 mis form is true and correct to the best of my knowledge and that the soil/fill material meets definition of acceptable soil/fill as identified in Chapter 210. I also certify, based upon that it is soil material does not contain solid waste, any free liquid other than ter, obvious signs of staining or discoloration, and that it will not create a public nuisance in as, but not limited to, odors.
Sig	nature:
<u>Part</u>	3: Person receiving or placing acceptable soil/fill material
Dat	e:
Nar	ne (print): Title:
Cor	npany Name:
Stre	eet Address:

City:		State:	Zip:
Phone #:	_ Email Addres	s:	
Physical address of soil/fill placeme	ent:		
Block	Lot(s)		_
City:	State:	Zip:	_
1. Purpose for importing soil/fill:			
2. Quantity, in cubic yards, of acc	eptable soil/fill	material to be impor	rted or placed:
3. Anticipated date of placement:			
4. Anticipated date of final gradin	ıg:		
5. Anticipated date of securing the	e deposited fill	(seeding, macadam,	etc.):
	Certificat	ion_	
I, the undersigned, certify under per	nalty of law that	the information prov	vided is true and correct
to the best of my knowledge, inform	mation, and bel	ief.	
Signature:			