



REQUEST FOR CLEARANCE NUMBER FORM

Hawaii Materials Recycling, LLC
2662 Wai Wai Pl #201, Kihei, HI 96753
Telephone (808) 856-6231 / Facsimile (808) 874-5690

Site Address:
Site Description:
Generator:
Property Owner: Phone: Fax:
Demolition Contractor: Phone: Fax:
Transporter: Phone: Fax:

Check All That Apply

Waste Material: Concrete Asphalt Painted Unpainted
Site Use: Residential Commercial Industrial Vacant Land
Municipal State Federal Soil or Rock
Project: Demolition Renovation Construction Other

Job #: P.O. #:
Date Ready for Inspection: Demolition Date:

The undersigned hereby certify that the above information and attached 3.0 Material Profile Form is true and correct.

Bill Charges To: Date:
Authorized Signature: Title:
Property Owner: Date:
Authorized Signature: Title:
Demolition Contractor: Date:
Authorized Signature: Title:
Transporter: Date:
Authorized Signature: Title:
Qualified Env. Scientist: Date:
Authorized Signature: Title:

FOR HAWAII MATERIALS RECYCLING, LLC. USE ONLY

Clearance # Entered by: Date:
Inspection Date: Approved Declined Initials: Date:
Scale: Entered by: Date:
Comments:

**Attach Associated 3.0 Material Profile Form