



Industrial Solid Waste Generator Closure Notification

Louisiana Department of Environmental Quality (LDEQ)
Office of Environmental Services (OES)
Public Participation and Permit Support Division (PPPSD)
Notifications and Accreditations Section (NAS)

For Office Use Only	
Site ID #	
AI #	
Date Rec'd	
Rev'd by	

Phone (225) 219-3244 or (225) 219-3300

Submit this form to one of the following:

U.S. Mail Address

NAS-PPPSD-OES

LDEQ

Post Office Box 4313

Baton Rouge, LA 70821-4313

Service Carrier or Hand-Delivery Address

NAS-PPPSD-OES

LDEQ

602 N. 5th St.

Baton Rouge, LA 70802

This form is used to notify the LDEQ that a facility is no longer a generator of industrial solid waste as defined in LAC 33:VII.115.A. Following submittal of this form to the LDEQ, the Solid Waste Generator ID # will be closed.

COMPANY/FACILITY REQUESTING INDUSTRIAL SOLID WASTE (SW) GENERATOR CLOSURE

Company Name _____ Facility Name _____
Physical Address _____ Agency Interest (AI) No. _____
City _____ State _____ Zip _____ Parish _____ SW Generator ID No. _____

REASON(S) FOR INDUSTRIAL SOLID WASTE (SW) GENERATOR CLOSURE *Check all that apply*

- | | |
|--|--|
| ☐ Company/Facility is Out of Business
Provide Closure Date _____ | ☐ Company/Facility No Longer Generates Industrial Solid Waste
Provide Date Industrial SW Generator Discontinued _____ |
| ☐ Other Type of Change
Provide Date of Change _____
Description of Change _____ | ☐ Company/Facility has Moved to a New Location
Provide Date of Move _____
New Physical Address _____
City _____ State _____ Zip _____ Parish _____ |

NOTE: Per LAC 33:VII.401.B, Solid Waste Generators are required to notify the Office of Environmental Services if changes are warranted.

Certification: I have personally examined and am familiar with the information submitted in this form, including any attached documents, and I hereby certify, under penalty of law, that the submitted information is true, accurate and complete to the best of my knowledge. I am aware that there are significant penalties for knowingly submitting false information, including the possibility of fine and imprisonment.

Signature _____	Date _____
Printed Name _____	Email Address _____
Printed Title _____	Phone No. (____) _____

Please contact Missy Day at (225) 219-3244 or Melissa.day2@la.gov if you have any questions or need additional information.