Mined Lands and Industrial Facilities Preliminary Assessment Program Application

A. SITE NAME AND LOCATION

Site Name (Legal, Common, aka, or Descripive Name of Site)

Street, Route No., or Specific Location Identifier

City | State | Zip Code | County

Lat/Long

Township, Range, and Section | Tax Parcel ID

B. OWNER(S)/CONTACT INFORMATION

Name | Email

Address

City | State | Zip Code | Phone

C. SITE DESCRIPTION AND HISTORY

Provide attachments of past reports as applicable.

Thank you for your interest in the DEQ Preliminary Assessment Program. Your signature on this application form documents permission for DEQ to enter and access your property, perform a site reconnaissance, photograph aspects of the site, and sample various media as needed (such as soil, surface water and sediment). By providing written permission, this serves as DEQ's documentation in the event that we encounter someone at the site that questions our work and your permission for us to conduct the work.

Owner Signature

Printed/Typed Name | Date

Questions can be directed to Michael Hahn at (208) 373-0248 or Michael.Hahn@deq.idaho.gov.
The completed application should be emailed or sent to:

Preliminary Assessment Program, Attention: Michael Hahn
Idaho Department of Environmental Quality | 1410 N. Hilton | Boise, ID | 83706-1255