

Lid-Lifting Observation Form

Date *

12/15/2015



Investigators Last Name, and First Initial (Example:
Nelson, W.) *

Address (Street Number, Name, and Suite) *

Zip Code

GPS Coordinates 1

Photo 1 - Front of container *

No file chosen

Photo 2 - Inside of container *

No file chosen

Is the container shared
tenants?

- Select -

Container Observation Description Table

Size *

Units *

- Select -

Type of Container *

- Select -

URO compliant decals on the
container? *

- Select -

Predominant Materials 1 *

- Select -

Predominant Materials 2 *

- Select -

Predominant Materials

- Select -

Contamination Present? *

- Select -

Notes