EPA ID Number | M | N | D | 0 | 8 | 3 | 4 | 6 | 7 | 6 | 8 | 8 |

OMB#: 2050-0024; Expires 12/31/2014

United States Environmental Protection Agency

HARDOUS WASTE PERMIT INFORMATION FORM

1. Facility Permit Contact

First Name: Gregory | **MI:** D | **Last Name:** Smith

Contact Title: Hazardous and Radioactive Waste Manager

Phone: (507)284-6369 | **Ext.:** | **Email:** gdsmith@mayo.edu

2. Facility Permit Contact Mailing Address

Street or P.O. Box: 200 1st St SW

City, Town, or Village: Rochester

State: MN

Country: USA | **Zip Code:** 55905

3. Operator Mailing Address and Telephone Number

Street or P.O. Box: 200 1st St SW

City, Town, or Village: Rochester

State: MN | **Phone:** (507)284-2511

Country: USA | **Zip Code:** 55905

4. Facility Existence Date

Facility Existence Date (mm/dd/yyyy): 01/03/1986

5. Other Environmental Permits

A. Facility Type (Enter code)	B. Permit Number	C. Description
E	MNRNE33PK	ISW No Exposure Exclusion

6. Nature of Business: Health Care