**NEW YORK CITY CLEAN SOIL BANK**

**Clean Soil Request Form**

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| **PRIMARY CONTACT 🞎** Contractor **🞎** Consultant **🞎** Developer | | | **Date:** |
| NAME | | | |
| ADDRESS | | | |
| CITY STATE ZIP CODE | | | |
| PHONE | FAX | E-MAIL | |
| Property Owner Information (entity name and contact information) | | | |

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| **PROPERTY/SITE INFORMATION** |
| NYC OER/NYSDEC PROJECT NUMBER (IF APPLICABLE) and Agency project manager |
| OTHER PROJECT (not in City/State Cleanup programs) |
| PROJECT NAME |
| ADDRESS BOROUGH ZIP CODE |
| LIST ALL TAX BLOCK AND LOT NUMBERS |

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| **TYPE OF SOIL REQUESTED** | | |
| Unrestricted Use Soil (meets Part 375) | **🞎**Yes | **🞎**No |
| Residential Soil (Part 375)/ General Fill (Part 360) | **🞎**Yes | **🞎**No |
| Restricted Residential Soil (Part 375) | **🞎**Yes | **🞎**No |
| Specific Geotechnical requirements | **🞎**Yes | **🞎**No |
| Specific Material Composition/Organic requirements | **🞎**Yes | **🞎**No |
| Provide Details | | |
| **TIME PERIOD AND QUANTITY OF SOIL NEED** | | |
| QUANTITY OF CLEAN SOIL NEEDED (CUBIC YARDS): (IF MORE THAN ONE TYPE OF MATERIAL IS DESIRED, LIST EACH TYPE AND VOLUME) | | |
| WHEN SOIL IS NEEDED AND HOW MANY LOADS PER DAY CAN BE PICKED UP:  ANTICIPATED START DATE FOR LOADING: / / \_ .ANTICIPATED LOADING END DATE: / / \_  LOADS PER DAY: \_. | | |

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| **PROPOSED SOIL USAGE (explain why soil requested is appropriate for the use).** |

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| **SOIL PHYSICAL CHARACTERISTICS REQUIRED FOR IMPORTED MATERIAL:** |

**Email this form to your Project Manager and** [**Stockpile@OER.NYC.GOV**](mailto:Stockpile@OER.NYC.GOV)