To: Fax: Page From		Rachel Parlin, MPCA 651-296-8717 1 of 1 Michael Reed, EHS II, Ra	msey County Environmental Health	
Octo	ber 11,	2013		
Haza 520 L	rdous V afayett	rollution Control Agency Waste Notification Forms e Road North, 4 <sup>th</sup> Floor MN 55155-4194		
RE:	Comp	dentification Number: pany Name: pany Address:	MND 981 091 374 Community Dental Care Parking Lot 1236 Arcade St. Saint Paul, MN 55106	
Pleas	se note	the following changes re	elative to the above EPA ID Number:	
	Change business name to (see enclosed 8700-13A/B):			
	Change mailing address to:			
	_ Change contact name to:			
_	Change telephone number to:			
_	Change ownership & Business Name (see enclosed 8700-13A/B)			
_	Change generator size to:LQGSQGVSQG			
	Reactivate the ID Number:			
_	Inactivate the ID Number:			
<u>x</u>	Dead	ctivate the ID Number for the	nis location for the following reason:	
			n of former service garage. Disposal was unty VSQG Collection Site.	
	The second second second	Company Moved To Longer a Generator	Out of Business X One Time Disposal	

_ Company Moved	Out of Business
No Longer a Generator	X One Time Disposal
_ Other (please specify):	

Michael Reed, Environmental Health Specialist II

651/266-1181