FORM 4	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response ...

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print of Type Responses)								-		
1. Name and Address of Reporting Person Cochran Stanley Robert	2. Issuer Name and Ticker or Trading Symbol PERMA FIX ENVIRONMENTAL SERVICES INC [PESI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director10% Owner Officer (give title below)Other (specify below)			
(Last) (First) 8302 DUNWOODY PLACE, SUIT		3. Date of Earliest Transaction (Month/Day/Year) 10/02/2017								
(Street) ATLANTA,, GA 30350		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
(Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)		(A) or Disposed of (D)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Common Stock	10/02/2017		А		3,509	А	\$ 2.85	7,948	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Nu	mber	6. Date Exer	cisable and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	action of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		Deriv	vative	(Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securities					(Instr. 5)		Derivative	Ownership	
	Derivative					Acquired		(Instr. 3 and 4)				2	(Instr. 4)		
	Security					(A) o					0	Direct (D)			
						Dispo					1	or Indirect			
						of (D	*				Transaction(s)	· · /			
						·	Instr. 3, I, and 5)				(Instr. 4)	(Instr. 4)			
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable			Number				
				Code	v	(Λ)					of Shares				
				Code	v	(A)	(D)		-						
Stock	\$ 3.795							<u>(1)</u>	01/13/2027	Common	6,000		6,000	D	
Option	\$ 5.175								01/13/2027	Stock	0,000		0,000	D	
Stock										Common					
	\$ 3.55							<u>(2)</u>	07/27/2027	Stock	2,400		2,400	D	
Option										SIOCK					

Reporting Owners

Den aufin - Oran an Nama / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Cochran Stanley Robert 8302 DUNWOODY PLACE, SUITE 250 ATLANTA,, GA 30350	Х							

Signatures

/s/ Stanley R. Cochran	10/02/2017
**Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Stock Option granted 01/13/17 under the Company's 2003 Outside Directors Stock Plan. The Options vest fully six months from date of grant.

(2) Stock Option granted 07/27/17 under the Company's 2003 Outside Directors Stock Plan. The Options vest fully six months from date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.