

Special Wastes Request for Disposal

GENERATOR INFORMATION

The following information must be completed to obtain approval for disposal of special wastes at the landfill.

Owner Information (location of where material is removed, owner's name & address – if different than work site)

Owner's Name/Address	Work Site Name/Address	Phone:
		Fax:
email:		

Transporter's (if other than owner brings material, complete the following):

Name and address	Phone
	Fax
email:	

Material Information

Description	Estimated Quantity

Additional information.

_____ Printed/typed name _____ Signature _____ Date (Month-Day-Year)

Attachments (mark all that apply)

For chemical or related wastes, a copy of the current Material Safety Data Sheet should also be provided.

- ___ For Petroleum Contaminated Soils (representative sample per 500 cubic yards)
 - Lab Reports for BTEX, TPH (unless source of material is known with a current MSDS), TCLP (lead and heavy metals) for UST sites older than 1982
- ___ For denatured, dewatered lagoon sludge
 - Lab Reports for TCLP, paint filter
- ___ For non friable asbestos or deconstruction materials including mobile homes
 - Certification statement or documentation on the friability of asbestos material
 - Completed manifest (copy to be processed for all loads)
- ___ For all other materials as required by the landfill
 - Specify _____
 - Specify _____