



DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
 14949 62nd Street North, PO Box 6
 Stillwater, MN 55082-0006
 Phone: 651-430-6655 – Fax: 651-430-6730 – TTY: 651-430-6246

Hazardous Waste Management Plan

US EPA # ⇒	M	N										Or date applied for: ⇒	
Generator Name (Include Division name if applicable):										Corporate Authorization Submitted: ⇒	YES	N/A	NO
										Tax ID Form Submitted: ⇒	YES		NO

If there have been changes or if you have not already submitted this information to Washington County, please provide the following :

Inspection Contact	Inspection Title	Business Phone	Emergency Phone
Mailing Contact	Mailing Contact Title	Business Phone	

Optional Information for Inspection Contact

E-mail Address	Fax Machine Number	Pager Number	Cellular Phone
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CERTIFICATION:

- I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.
- I am aware that hazardous wastes generated by my Company must be removed by a licensed hazardous waste transporter and managed by a permitted treatment, storage and/or disposal facility prior to moving or going out of business, unless otherwise approved by the County.
- I hereby apply to amend my Washington County Hazardous Waste Generator License with the above additions or changes to my license subject to all conditions and provisions of Minn. Rules Chapter 7045 and the Washington County Hazardous Waste Management Ordinance.

Print Your Name: _____
 Print Your Title: _____
 Your Signature: _____
 Date: _____

Please See Other Side of Page

HAZARDOUS WASTES: Using one column per waste, fill in, on the chart below, the applicable information for each Hazardous Waste produced at this site. Include and attach Material Safety Data Sheets (MSDS), laboratory results or additional information as required. If you have questions, call Washington County at 651/430-6655.

Inventory Key:
 H = Hazardous L = Lamps
 N = Non-hazardous Ag = Silver
 O = Oil B = Batteries
 S = Sewer Sp = Special
 F = Feedstock E = Exempt

1.	Inventory Number <i>For County Use Only</i>				
2.	Hazardous Waste Name or Description				
3.	Hazardous Waste Process, Activity or Physical State				
4.	Hazardous Waste Code (4 digits)				
5.	Amount per Year (gallons or pounds, etc.)				
6.	Year waste was first generated				
7.	Is waste mixed? (if yes, give Inventory.#)				
8.	Management on/off site? If on-site skip to #17				
9.	Describe Storage Method				
10.	Number of Shipments per Year				
11.	Transporter Name				
12.	Transporter EPA #				
13.	Treatment, Storage, Disposal (TSD) Facility				
14.	TSD Facility Address				
15.	TSD Facility EPA #				
16.	TSD Facility Waste Management Method				
17.	On-site Treatment Method				
18.	Sewer Treatment Works				
19.	Discharge Permit #				

FOR COUNTY USE ONLY



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Continuation Sheet: Hazardous Waste Management Plan Instructions

General Information at Top of Form

- ▶ If you have already obtained an EPA ID# through another source, write it in here. If you have applied for an EPA ID#, but it has been not issued yet, enter date you applied. Otherwise, return the completed EPA ID# form 8700-12 to our office with the continuation sheet. If a previous hazardous waste generator has obtained an EPA ID# for this site, use that number to complete the continuation sheet and EPA ID# form.
- ▶ Write in the name of the company or person who generates hazardous waste.
- ▶ If there are changes to the primary contact, his/her title, phone number and emergency phone number, please give us the new/correct information. Also we are attempting to get more complete information as to your e-mail addresses and facsimile machine numbers, etc., so we would appreciate you filling in that information also.

Certification

- ▶ Read and sign the certification on the front page of the form.

Section D: Hazardous Wastes and Oil or Oil Contaminated Wastes

- ▶ List information for each waste in a column moving down the page. Also list used oil, used oil filters, used oil sorbents, used metalworking fluids, and other used oil materials here. Specify the waste management company for each waste oil category.
 1. **Inventory:** This row is for County use only. Inventory numbers are assigned by the Department for tracking purposes.
 2. **Hazardous Waste Name/Description:** List the name of the hazardous waste here. Examples are, parts washer solvent, paint sludge, mixed solvents, and acid waste.
 3. **Hazardous Waste Process/Activity:** Give a short description of the process or activity from which the hazardous waste is generated. Examples include, cleaning parts, painting cars or products, research and development, machining parts, and automotive repair.
 4. **4-Digit Hazardous Waste Code(s):** List the hazardous waste code for the waste here. This information is on line A of the shaded portion of the hazardous waste manifest. If the waste has several codes, list all of the codes. Examples are D001, D002, D008, D035, F001, F002. Call the County for assistance in determining waste codes.
 5. **Amount Per Year:** List the amount (in gallons or pounds) of each hazardous waste you expect to generate in one year. Enter your best estimate as it will be used to calculate your license fee.
 6. **Year Waste Was First Generated:** List the year in which the waste was first generated.
 7. **Is Waste Mixed:** List yes or no. If you mix this hazardous waste with another waste prior to disposal, contact the County for guidance on how to proceed.

8. **Management On/Off Site:** Declare here whether you manage the waste on-site or off-site. If you or a hazardous waste transporter ship your waste to another location for treatment or disposal, then you manage the waste off-site. If you manage hazardous waste on-site, then skip down to lines 17-19.
9. **Storage Described:** Describe the type of container that the hazardous waste is stored in. Examples are, 55 gallon steel barrel, 16 gallon steel barrel, 5 gallon plastic pail, or 30 gallon fiber barrel.
10. **Number of Shipments:** Estimate the number of shipments you expect to make in one year.
11. **Transporter Name:** List the name of the transporter you have chosen to ship each hazardous waste to a treatment, storage, or disposal facility. If you are shipping the waste yourself under the Very Small Quantity Generator Collection Program, write in "self".
12. **Transporter ID#:** List the EPA ID# number of the transporter listed in line 11. This number can be found on line 5 of a hazardous waste manifest, or by calling the transporter.
13. **TSD Facility Name:** List the name of the Treatment, Storage, or Disposal (TSD) facility that will receive each hazardous waste. This name can be found on line 9 of a hazardous waste manifest.
14. **TSD Facility Address:** List the address, including city/state/zip, of the TSD Facility that is listed on line 13 above. This address can be found on line 9 of a hazardous waste manifest.
15. **TSD Facility ID#:** List the EPA ID# number of the facility listed on line 13 above. This number can be found on line 10 of a hazardous waste manifest, or by calling the facility.
16. **TSD Facility Waste Management Method:** List the method by which the TSD Facility listed on Line 13 above will manage each hazardous waste. Examples include, fuel blend, incinerate, recycle, and landfill.
17. **On-site Treatment Method:** If you said "on-site" on line 8 above, list the method of on-site treatment here. Examples of on-site management are pretreatment of photo fixer for silver recovery or adjusting the pH of a solution before sewerage.
18. **Sewer Treatment Works:** If you sewer waste on-site, list the publicly or privately owned treatment works which receives your wastewater. Disposal of industrial wastewater to on-site sewage treatment systems is prohibited.
19. **Discharge Permit Number:** List the Metropolitan Discharge System or National Pollution Discharge Elimination System permit number here, if applicable.

After completion, mail the continuation sheet and EPA ID# form 8700-12 to the Department for processing. The Department will process the sheet and send you a fee statement, if applicable. If you need assistance in completing the form, contact the Department at 430-6655.