

## RECYCLED HAZARDOUS WASTE MANAGEMENT PLAN

Form for Washington County Hazardous Waste Generators

### INSTRUCTIONS:

Complete one copy of this form for each hazardous waste generated at your site that is:

- A. Eligible for use as a feedstock on or off your site.
- B. Eligible for reclamation as a by-product on or off your site.

Return the completed form before you begin recycling the waste.

### REFERENCES:

Feedstock waste evaluations, identification number requirements, and waste volume documentation must be reported annually and all records kept on site and available for inspection for three years. Additional information can be found at:

- [Management of Waste by Use, Reuse, Recycling, and Reclamation](#); Part 0125 of the MN Administrative Rules Chapter 7045, Hazardous Waste.
- See Minnesota Pollution Control Agency (MPCA) factsheet on [Recycling Hazardous Waste](#).

### A. RECYCLED WASTE GENERATOR INFORMATION:

1. Generator Name:

2. HWID:

3. Generating Site Address:  
(Include, street, city & zip)

4. Mailing Address: (If different)  
(Include, street, city, state & zip)

5. Contact:

Name:

Title:

Phone:

Email:

6. If the waste will be used or reclaimed by the generator, check this box and go to section C.

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**B. RECYCLED WASTE USER INFORMATION:**

1. Business Name:

2. HWID:

3. Site Address:  
*(Include, street, city & zip)*

4. Mailing Address: *(If different)*  
*(Include, street, city, state & zip)*

5. Contact:

Name: <input type="text"/>	Title: <input type="text"/>
Phone: <input type="text"/>	Email: <input type="text"/>

**C. RECYCLED WASTE INFORMATION:**

1. Name or Description of waste:

2. Hazardous waste code(s):

**D. WASTE GENERATION PROCESS:**

Describe how the waste is generated below. Attach additional sheets as necessary.

**F. WASTE COMPOSITION:**

List all constituents of the waste by concentration or describe the waste composition and all potential contaminants.

Check here if the waste contains any contaminants above the Toxicity Characteristic thresholds.  ABOVE  
If ABOVE, list all applicable Toxicity Characteristic waste codes:

**G. WASTE STORAGE:**

Describe how the waste is stored at the generator site. Attach additional sheets as necessary.

**H. WASTE TRANSPORT:**

Describe how the waste is transported to the site where it will be recycled. If you recycle the waste at the site of generation, leave this section blank and go to the next section. Attach additional sheets as necessary.

**I. RECYCLING PROCESS:**

**SELECT:**     Feedstock     By-product     Other

Describe in detail the complete recycling process for the waste. If you checked above that the waste contains Toxicity Characteristic contaminants above the regulatory thresholds, ensure you describe how the recycling process will properly use, treat, or remove the contaminants. Attach additional sheets as necessary.

**J. 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.

Both parties must sign.

**1. GENERATOR:**

Name:	<input type="text"/>	Title:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>

**2. USER:**

Name:	<input type="text"/>	Title:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>

**K.SUBMIT:**

Return the completed form with your Hazardous Waste License Application or before you begin recycling the waste. To submit electronically: print, sign, scan, and email to: [PHE-HazWaste@co.washington.mn.us](mailto:PHE-HazWaste@co.washington.mn.us)

Questions? Call the Washington County Outreach Team at (651) 430-6655 for Technical Assistance questions.