# Agency of Natural Resources Department of Environmental Conservation Solid Waste Management Program 1 National Life Drive – Davis 1 Montpelier, VT 05620-3704

Telephone: (802) 828-1138 FAX: (802) 828-1011

## STORAGE, TRANSFER and RECYCLING FACILITY RECERTIFICATION APPLICATION FORM

October 29, 2013

#### 1. Facility, Facility Owner, Operator, and Contact Person Information

A.	Facility Name:	
	Facility 911	
	Address:	
	Telephone:	
B.	Facility Owner:	
	Signature:	
	Mailing Address:	
	Email:	
	Telephone:	
C.	Facility Operator:	
	Signature:	
	Mailing Address:	
	Email:	
	Telephone:	
D.	Primary Contact	
	Person:	
	Mailing Address:	
	Email:	
	Telephone:	
E.	Secondary Contact	
	Person (optional):	
	Mailing Address:	
	Email:	
	Telephone:	

2. Person who prepared the application

Name:	
Signature:	
Mailing Address:	
Email:	
Telephone:	

### 3. Landownership If you own the property on which the facility is located, indicate the Book and Page where the deed is recorded: Book: Page: Attach a copy of the deed to the application. If the landowner has granted to you an unencumbered right to possession of the property to be used for the facility, attach a statement from the landowner. If you lease the property to be used for the facility, the landowner must sign below. Landowner: Signature Mailing Address: Telephone: Term of Lease: **Facility Location** 4. Please specify the latitude and longitude for the facility using a Global Position System (GPS) receiver. Alternatively, you may attach a copy of the appropriate Vermont orthophoto tax map with the location of the facility clearly and accurately marked. **GPS** Latitude: Longitude: 5. List the Operational Units at this facility. Include all solid waste activities that are anticipated at this facility over the term of certification. Please note that in accordance with Act 148 (effective July 1, 2012) all solid waste management facilities that collect municipal solid waste are required to offer parallel collection of: • mandated recyclables by July 1, 2014 • leaf and vard wastes by July 1, 2015 • food residuals by July 1, 2017 All facilities shall include these mandated operational units in this application, and include the management of these materials in the facility management plan, closure costs and plan, and contingency plan.

		_
Days and Hours of Fac	cility Operation	
D	11	

#### 6.

Days:	Hours:
Days:	Hours:

#### 7. Types and Amounts of Materials Handled at the Facility

#### Materials to be Transferred for Disposal or Incineration A.

1. Growth Capacity. This is the maximum amount of solid waste which you are applying to manage at the facility, on an annual basis, over the term of certification. Permits are issued for the operating capacity (see below). Once permitted, increasing the tonnage from the operating to the growth capacity will only require the applicant request an administrative amendment from the Solid Waste Management Program and include a check for the difference in the application fees.

Material Type	Annual Amount	Max. Amount	Max. Amount
	Accepted	Accepted per Day	Stored on Site
Household/Commercial			
Garbage			
Construction &			
Demolition Wastes			
Bulky Waste, (e.g.			
Furniture)			
Tires (units)			

Asbestos (cubic yards)		
Untreated Wood		
Bricks/Mortar/Concrete		
HHW/CEG*		
Other (list below)		

<sup>\*</sup>HHW/CEG in this section only applies to facilities that collect, store and transfer HHW/CEG (see Section 8 below). For HHW mobile collection events where the waste is transferred offsite immediately after the event please complete an Insignificant Waste Management Event Approval Form.

2. Operating Capacity. List the maximum amounts in tons that you are applying to accept in the first permit year.

Material Type	Annual Amount Accepted	Max. Amount Accepted per Day	Max. Amount Stored on Site
Household/Commercial	_		
Garbage			
Construction &			
Demolition Wastes			
Bulky Waste, (e.g.			
Furniture)			
Tires (units)			
Asbestos (cubic yards)			
Untreated Wood			
Bricks/Mortar/Concrete			
HHW/CEG*			
Other (list below)			

\*HHW/CEG in this section only applies to facilities that collect, store and transfer HHW/CEG (see Section 8 below). For HHW mobile collection events where the waste is transferred offsite immediately after the event please complete an Insignificant Waste Management Event Approval Form.

#### B. <u>Materials to be Accepted for Recycling</u>

Please note that in accordance with Act 148 (effective July 1, 2012) all solid waste management facilities that collect municipal solid waste are required to offer parallel collection of mandated recyclables by July 1, 2014. All facilities shall include these materials in this application, and include the management of these materials in the facility management plan, closure costs and plan, and contingency plan.

Type of Recyclable Material	Annual Amount Accepted	Max. Amount Stored on Site
Paper Products	•	
Newspaper		
Cardboard		
Mixed Paper		
Other (list):		
(-550)		
Glass		
Glass		
Metals		
Appliances		
Aluminum and Steel Cans		
Other Metals (list):		
Plastics		
HDPE, #2 – clear (milk jugs)		
PET #1 – colored (soap jugs)		
Other Plastics (list):		
Lead Acid Batteries		
Lead Acid Batteries		
Tires		
Tires		

Other Recyclable Materials (list)				
	ch as food residuals) will be agement facility for treatm	e transferred off-site to a		
a. I believe the have attached a d b. I believe the Categorical Certicompleted regi	<ul> <li>2. Composting will occur at this facility (and check a. or b. below).</li> <li>a. I believe the composting activity is exempt from the Rules and have attached a description of the activity or,</li> <li>b. I believe the composting activity qualifies for a Registration, a Categorical Certification, or a Full Certification. I have attached a</li> </ul>			
Please note that in accordance with Act 148 (effective July 1, 2012) all solid waste management facilities that collect municipal solid waste are required to offer parallel collection of leaf and yard wastes by July 1, 2015 and food residuals by July 1, 2017. All facilities shall include these operational units in this application, and include the management of these materials in the facility management plan, closure costs and plan, and contingency plan.				
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parallel collection of leaf and yard v 1, 2017. All facilities shall include include the management of these m	wastes by July 1, 2015 and these operational units in the facility man.  Annual Amount	I food residuals by July n this application, and nagement plan, closure  Max. Amount Stored		
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#### 8. **Notifications**

- A. Conditionally Exempt Generator (CEG) Regulated Waste Notification
  - 1. CEG Regulated Waste will be accepted at this facility. I have filed a Vermont Hazardous Waste Handler Site ID Form on (Indicate the date filed)
  - 2. I have filed an up-dated Vermont Hazardous Waste Handler Site ID Form due to changes in waste type, waste amount, or owner or facility contact information on . (Indicate the date filed)
- B. Used Oil Collection Facility Notification

Used Oil will be accepted at this facility. I have filed a Vermont Hazardous Waste Handler Site ID Form on (Indicate the date filed)

#### 9. **Liquid Collection and Treatment**

Is there a tipping floor?	Yes:	No:
If yes:		
A. Leachate will be dispo	osed in the	Wastewater Treatment
Facility located in	(City/7	Γown), in
·	(State). For facilities locations	ated in Vermont, I have
contacted the Wastew	ater Management Division co	oncerning the need for a permit
or other authorization		(Indicate date)

B. Attach engineer's certification of tipping floor, leachate collection, and tank integrity.

#### 10. **Siting**

Is the waste management boundary of the facility located:			
	Yes	No	
In a Class I or II groundwater area			
In a Class I or II wetlands or associated buffers			
	If yes, attach conditional use determination		
In a Class III wetlands			
	If yes, attach water quality certification		
In a designated habitat area for threatened or endangered			
species			
In a watershed for Class A waters			
Within 500' of designated outstanding resource waters			
Less than 100' to waters of the state			
	If yes, was the facility constructed before 7/1/98?		

Less than 100' to a drinking water source not owned by		
the applicant	If yes, was the facility constructed before 7/1/98?	
Less than 50' to the property line		
	If yes, was the facility constructed before 7/1/98?	
Less than 100' to residences, schools, daycares,		
hospitals, or nursing homes not owned by the applicant	If yes, was the facility certified by 10/1/04?	

#### 11. Application Fee Submitted with the Application

A check for the application fee of \$ (fee amount) is enclosed. Show your calculations for the fee amount. Make the check payable to: Treasurer, State of Vermont.

#### 12. Certification of Compliance with the Rules

All applications must be prepared under the direction of a professional engineer licensed in the State of Vermont. The engineer must certify that the application is in compliance with all applicable standards contained or referenced in the Rules. The Secretary may waive this requirement upon request by the applicant. The waiver request must be included as an attachment with this application. If a P.E. waiver is requested, the applicant must certify that the application is in compliance with all applicable standards contained or referenced in the Rules.

#### A. Professional Engineer Certification

To the best of my information, knowledge, and belief, this application is in compliance with all applicable standards contained or referenced in the Vermont Solid Waste Management Rules (eff. 3/15/12).

Engineer Name:	
Engineer Signature:	
License #:	
Date:	

#### B. Applicant Certification

To the best of my information, knowledge, and belief this application is in compliance with all applicable standards contained or referenced in the Vermont Solid Waste Management Rules (eff. 3/15/12).

Applicant Signature:	
Date:	

#### 13. **Application Documents**

The following documents and information must be submitted with this form as part of the application:

- Property deed: Copy attached or if submitted with a previous application so indicated on this form.
- Unencumbered Right to Possession of Property: A statement from the landowner conveying to you an unencumbered right to possession of the property to be used for the facility or if submitted with a previous application so indicated on this form.
- Completed Categorical Certification Application Forms for Composting or Disposal Operational Units as appropriate
- Description of Exempt Composting Activity, if appropriate
- Orthophoto Tax Map: If appropriate, a copy which clearly shows the property to be used for the facility
- Application Fee: Check attached
- P.E. Waiver: If appropriate, a request for a waiver from the requirement for a P.E. to prepare the application
- Plan for Public Notice of the Application: Attached
- Notice to Municipality: Information which demonstrates compliance with the requirements of 10 V.S.A. §6605(f)
- Planning Requirements: Information which demonstrates compliance with the planning requirements of 10 V.S.A. §6605(c)
- Siting Requirements: Information which demonstrates compliance with the siting requirements of Subchapter 5 of the Rules
- Facility Management Plan which complies with the requirements of §6-1202 of the Rules
- P.E. Waiver: If appropriate, a request for a waiver from the requirement for a P.E. to prepare the facility management plan
- Facility site and engineering plans with the waste management boundary indicated.
- Facility closure plan and closure cost estimates
- Plan for financial responsibility or financial capability
- Background Disclosure Statements: Completed forms attached