



**3. Notice to Municipality and Solid Waste District**

I  submitted a copy of this registration form to the  
Applicant Print Name

following municipality and solid waste management district on:

Municipality:   
Print Name of Municipality

Solid Waste District:   
Print Name of Solid Waste Management District

**4. Siting and Prohibited Areas**

<b>Is the compost management area or leachate and run-off treatment area located:</b>		
	<b>Yes</b>	<b>No</b>
A. In the 100 year flood plain as shown on National Flood Insurance Maps?		
B. In a Class I or II wetlands or associated buffers?	<i>If yes, attach conditional use determination</i>	
C. In a Class III wetlands?	<i>If yes, attach water quality certification</i>	
D. In a location where the municipality has prohibited composting as part of its zoning bylaws?		
E. In a designated downtown or village center?	<i>If yes, attach consent letter from Town</i>	
F. Within 300 feet of a private water supply not owned by the applicant?*		
G. Within 3 feet of seasonal high water table and bedrock?*		
H. Within 100 feet of waters of the state?*		
I. Within 100 feet of a property line or edge of a public road?*		
J. Within 300 feet of a residence not owned by the applicant or a public building?*		

*\*If the facility does not meet the minimum setbacks outlined in the SWMR §6-1104(c)(1), (Items F-J above) then it does not qualify for a small facility registration, and a medium categorical certification must be obtained.*

**5. Facility Operator Training**

Has the facility operator completed an approved operator training course as of the filing of this registration? (check one)

<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
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If Yes:

Course:

Date of Completion:

**6. Compost Distribution**

Will the compost be marketed or distributed for sale? (check one)

<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
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**7. Certification that Facility Complies with the Rules**

I, \_\_\_\_\_, have read the Solid Waste Management Rules

§6-1104 – Accepted Composting Practices and certify that this facility complies

with all criteria established in this section of the rule.

**ATTACHMENTS**

Please attach the following information to the application form. All of the items below must be attached for the registration to be valid.

- a. A Site location map. Please use a USGS topographical map or a copy thereof with the location of the facility clearly marked on the map.
- b. Letter from the local solid waste planning entity stating that the facility is acceptable under its plan.
- c. Copy of the facility management plan.
- d. Other attachments (if applicable) from Item 4 above.

**SIGNATURES**

LANDOWNER \_\_\_\_\_ Date: \_\_\_\_\_

Note: Landowner, your signature constitutes approval to use this site for the composting facility

APPLICANT: \_\_\_\_\_ Date: \_\_\_\_\_