



WASTE FACILITY SUPPLEMENT APPLICATION

(TO BE ATTACHED TO THE SITE SPECIFIC POLLUTION LEGAL LIABILITY APPLICATION)

THIS SUPPLEMENT FORMS A PART OF THE APPLICATION TO WHICH IT IS ATTACHED.

Please complete a copy of this supplement for each applicable location for which you are seeking coverage.

Date: _____ Facility ID #: _____

Applicant: _____ Address: _____

Facility Name: _____

Does this site treat, process, separate or recycle any of the following?

If yes, please show percentage of each type of waste handled.

Glass _____	Household Garbage _____	Household Hazardous Waste _____
Plastic _____	Cardboard _____	Appliances _____
Aluminum _____	Oil/Oil Filters _____	Commercial Solid Waste _____
Paper _____	Fluorescent Lights _____	Other (list below) _____

Is your site fenced and locked to prevent trespassing while closed? Yes No

Is the entrance controlled while open for business? Yes No

Do you allow the general public direct access to your site? Yes No

Describe the Building(s) Fire Alarm & Suppression System:

Describe any on-site disposal methods used:

Describe any on-site containment system:

Do you have a landfill on site? Yes No

If yes, please complete the following: (use additional sheets if necessary.)

Please indicate the following acreage:

Total Acres:

Active Landfill:

Closed Landfill:

Vacant Land:

Does the facility have a valid permit to accept the type of waste being handled? Yes No

If yes, please attach a copy.

Describe the type of waste collected:

Is the landfill lined? Yes No

Type of Liner: _____

Material: _____

Thickness: _____

Do you have a leachate collection system in place? Yes No

Any hazardous or medical waste accepted? Yes No

Is there any burning of rubbish or other materials allowed at the site? Yes No

Is the landfill fenced and locked to prevent trespassing while closed? Yes No

Is the entrance controlled while open for business? Yes No

Are there any closed or abandoned waste disposal areas on the site? Yes No

If yes, please describe all such areas including size, materials accepted, age, and status of any cleanup or regulatory involvement with the closure.

Are there any sensitive environments within 1 mile of the site (i.e. schools, parks, etc.)? Yes No

If yes, please provide complete details.

Are there any groundwater monitoring wells located on or adjacent to the site? Yes No

If yes, please provide the most recent testing results.

Please identify all nearby drinking water wells and approximate distance: