



TRI-EQUITY INTERNATIONAL

Tel. 415.673.9045
Fax. 413.826.2092
2533 North Carson Street, Box T-309
Carson City, Nevada 8970

DISPOSAL PLAN APPLICATION FOR: **CONTINUOUS PLAN** **ONE-TIME PLAN**

See instructions on reverse side before completing this form

GENERATOR'S EPA ID NO:

--	--	--	--	--	--	--	--	--	--	--	--

New Plan Amendment to Active Plan, # _____ Amendment to existing waste stream, SN _____

Business/Plant Name _____

Mailing Address _____ City _____ State _____ Zip _____

Plant Address/Location _____ City _____ State _____ Zip _____

Plant Contact _____ Title _____ Telephone _____

DETAILED WASTE DESCRIPTION

DOT Shipping name, Hazard Class, UN/NA Number _____

Waste Name _____

EPA Waste Code(s) _____

Amount of Waste Produced

No. of Lbs. _____

Frequency

Day

Month

Week

Year

Physical:

Liquid

Sludge

Solid

Layered

Chemical:

Ignitable (Flashpoint ___°F)

Corrosive (pH___)

Reactive

Laboratory analysis attached. NOT INCLUDING ANALYSIS MAY DELAY DISPOSAL PLAN APPROVAL.

Material Safety Data Sheet(s) are acceptable for off-specification products only.

PROCESS GENERATING WASTE (SEE INSTRUCTIONS, USE ADDITIONAL SHEETS IF NECESSARY)

TSD INFORMATION (SEE INSTRUCTIONS, USE ADDITIONAL SHEETS IF NECESSARY)

Site receiving waste _____

Mailing Address _____ City _____ State _____ Zip _____

Site Location _____ EPA ID _____

CERTIFICATION

The above information is accurate to the best of my knowledge.

Signature _____

Person in charge of plant or plant contact

Date _____

Typed or printed name _____

Instructions for Disposal Plan Application

The disposal plan is designed for RCRA hazardous waste generators and RCRA regulated materials. Small Quantity Generators and Conditionally Exempt Small Quantity Generators are exempt from the disposal plan requirements (see OAC 252:100-5-3). One disposal plan application should be completed for each waste generated at each plant which is the origination point of hazardous waste.

IDENTIFICATION OF WASTE GENERATOR

Generator's EPA ID number for the plant location is required. The disposal plan application will not be processed without this numbers. Please indicate if the application is for a new plan or an amendment.

Enter business/plant name, address telephone number, etc., as indicated. If the plant address is identical to the business mailing address, enter "same". Enter the name and title of the person in charge of the plant or plant contact. The person in charge or plant contact should verify all information submitted and sign and date the disposal plan. A consultant's or preparer's signature will not be accepted in lieu of generator's signature.

DETAILED WASTE DESCRIPTION

Enter proper DOT shipping name, hazard class, UN/NA number (this number will be used to identify each waste stream) as it will appear on the Uniform Hazardous Waste Manifest. Enter waste name. This name will be used on the generator's listing to identify the waste stream. Enter all EPA waste codes applicable to this particular waste stream. Indicate physical and chemical characteristics of this waste. Attach signed original laboratory analysis for this waste stream. Not including analysis may delay disposal plan approval. For necessary tests see 40 CFR 261, Appendices I through X. Material Safety Data Sheets (MSDS) may be used for off-specification products only.

PROCESS GENERATING WASTE

Provide detailed description of process generating waste. Description must be sufficient to properly characterize the waste's composition and must account for each EPA waste code claimed.

TREATMENT, STORAGE, AND/OR DISPOSAL (TSD) FACILITY INFORMATION

Enter name and telephone number of site receiving waste. Give complete mailing address of TSD facility. Enter site location. Enter facility's EPA ID number. These will be checked against a computer printout to determine the Oklahoma facility's ability to accept this waste. If more than one TSD facility needs to be listed, use additional sheets.

AMENDMENTS TO PREVIOUSLY APPROVED WASTE STREAMS

Reference EPA identification and waste stream numbers in the top portions of the form. Indicate required amendments in the appropriate section(s).