



**FY19 SOLID WASTE MANAGEMENT FACILITY LICENSE RENEWAL APPLICATION**  
**(July 1, 2018 through June 30, 2019)**

**SECTION I – GENERAL FACILITY INFORMATION**

License No.: \_\_\_\_\_ Facility Name: \_\_\_\_\_

Category/Class/Type:

Service Area:

Facility Address:

Facility Owner/Licensee:

Facility Contact:

Facility Contact Title:

Facility Contact Address:

Facility Contact Email:

Facility Contact Phone:

Facility Contact Fax:

**SECTION II – ANNUAL TONNAGE and WASTE MANAGEMENT INFORMATION**  
*(Please complete each applicable item for your facility)*

**\*** *(Remember to attach copies of the 2017 tonnage records - monthly summaries are acceptable)*

**II.1: LANDFILLS**

**II.1.a.** For landfills that **OPERATE SCALES**, provide your **annual tonnage received during calendar year 2017** based on scale records \_\_\_\_\_Tons

**II.1.a.i.** How many tons received were landfilled: \_\_\_\_\_ Tons

**II.1.a.ii.** How many tons received were diverted: \_\_\_\_\_ Tons  
*(Complete Section V – Waste Diversion)*

**II.1.a.ii.1.** How were wastes from section II.1.a.ii. (above) diverted?

Composted? \_\_\_\_\_ Tons

Disposal by Open Burning? \_\_\_\_\_  
*(specify tons or cubic yards)*

Off-site recycling \_\_\_\_\_ Tons

Other (please specify) \_\_\_\_\_ Tons

II.1.b. For landfills that **DO NOT OPERATE SCALES**, provide your **annual volume received during calendar year 2017** based on waste records

**Conversion from Cubic Yards to Tons of MUNICIPAL SOLID WASTES (MSW):**

\_\_\_\_\_ #**Compacted** Cubic Yards of MSW      #Cubic Yards x 700 ÷ 2000 = \_\_\_\_\_ Tons  
(e.g. packer truck)

\_\_\_\_\_ #**Uncompacted** Cubic Yards of MSW      #Cubic Yards x 300 ÷ 2000 = \_\_\_\_\_ Tons

**Conversion from Cubic Yards to Tons of LOOSE WOOD WASTES:**

\_\_\_\_\_ #Cubic Yards of Loose Wood Wastes      # Cubic Yards x 300 ÷ 2000 = \_\_\_\_\_ Tons

**Conversion from Cubic Yards to Tons of CONCRETE WASTES:**

\_\_\_\_\_ #Cubic Yards of Concrete Wastes      # Cubic Yards x 860 ÷ 2000 = \_\_\_\_\_ Tons

**Conversion from Cubic Yards to Tons of CONTAMINATED SOIL:**

\_\_\_\_\_ #Cubic Yards of Contaminated Soil      # Cubic Yards x 920 ÷ 2000 = \_\_\_\_\_ Tons

II.1.b.i.      How many tons received were landfilled: \_\_\_\_\_ Tons

II.1.b.ii.      How many tons received were diverted: \_\_\_\_\_ Tons  
***(Complete Section V – Waste Diversion)***

II.1.b.ii.1.      How were wastes from Section II.1.b.ii. (above) diverted?

Composted? \_\_\_\_\_ Tons      Disposal by Open Burning? \_\_\_\_\_  
(specify tons or cubic yards)

Off-site recycling \_\_\_\_\_ Tons      Other (please specify) \_\_\_\_\_ Tons

II.1.c. Do you accept **out-of-state** waste for disposal? Yes  No  *(If yes, complete section II.8.)*

**II.2. TIRE-ONLY FACILITIES:**

II.2.a. Do you accept out-of-state waste tires for disposal? Yes  No

II.2.b. Were quarterly imported waste fees submitted to the Department? Yes  No

II.2.c. Total number of waste tires accepted during 2017: \_\_\_\_\_

Number of waste tires accepted during 2017, including imported, for **disposal**..... \_\_\_\_\_

Number of waste tires accepted during 2017, including imported, for **storage**..... \_\_\_\_\_

Reason for Storage: \_\_\_\_\_

Number of waste tires accepted during 2017, including imported, for **recycling**..... \_\_\_\_\_

Disposal fee per waste tire \$ \_\_\_\_\_

**II.3. COMPOSTING OPERATIONS**

II.3.a. What is the composting method used? \_\_\_\_\_

II.3.b. Has the design capacity of your facility changed in the last year? Yes  No

II.3.c. Complete the table below.

FEEDSTOCK	VOLUME OR TONNAGE ACCEPTED FOR COMPOSTING	VOLUME OR TONNAGE OF COMPOST PRODUCED

**II.4. TRANSFER STATION**

II.4.a. Do you landfill wastes on-site? Yes  No

*(If yes, please complete Section II.1.a. or II.1.b. as applicable)*

II.4.b. Where are the wastes from the Transfer Station sent to for disposal?

\_\_\_\_\_  
*(facility name and address)*

II.4.c. Complete Section V for wastes received but diverted.

**II.5. SOIL TREATMENT FACILITY – LANDFARMS**

**II.5.a.** Provide the total amount of contaminated soil **accepted** at the facility for treatment during calendar year 2017.

\_\_\_\_\_ Tons or Cubic Yards (*please specify*)

**II.5.b.** Provide the total amount of contaminated soil **under treatment** as of December 31, 2017.

\_\_\_\_\_ Tons or Cubic Yards (*please specify*)

**II.5.c.** Have you submitted your annual report to DEQ? Yes  No   
(*If not, please attach it to this form*)

**II.5.d. Do you accept contaminated soils for treatment that were generated out of state?**

If yes, complete Section II. 8 "Imported Wastes" Yes  No

**II.6. RESOURCE RECOVERY FACILITY**

**II.6.a.** Provide the total amount of wastes accepted for resource recovery at the facility during calendar year 2017. (*for facilities that recover material from more than one type of waste, provide the tonnage or volume for each specific waste stream*)

\_\_\_\_\_ Tons or Cubic Yards (*please specify*)

**II.6.b.** Do you landfill wastes on-site? Yes  No   
(*If yes, please complete Section II.1.a. or II.1.b. as applicable*)

**II.6.c.** Where are the wastes generated at the resource recovery facility sent for off-site disposal?

\_\_\_\_\_  
(*facility name and address – attach additional sheets if multiple disposal facilities are used*)

**II.7. RECYCLING FACILITY**

**II.7.a.** Provide the annual volume/tonnage of recyclables received based on records for calendar year 2017:

\_\_\_\_\_ Tons OR \_\_\_\_\_ Cubic Yards

**II.7.b. Complete Section V – Waste Diversion**

**II.8. IMPORTED WASTES**

(*complete this section if you accept wastes generated outside Montana*)

**II.6.a.** If you accepted out-of-state wastes during **calendar year 2017**, what was the total tonnage accepted?

\_\_\_\_\_ Tons

**II.6.b.** Were quarterly imported waste fees submitted to DEQ? Yes  No

**II.6.c.** Where was the out-of-state waste generated?  
(Use additional sheets if necessary)

City	State	County
City	State	County
City	State	County

---

### SECTION III – FINANCIAL ASSURANCE REQUIREMENTS

**III.1.** Are you required to maintain FA? Yes  No  (If not, skip to the Section IV)

**III.2.** If you are required to maintain Financial Assurance (FA) for closure, post-closure care, and/or corrective action activities, the required annual updates to the FA cost estimates (per ARM 17.540) are due by **April 1, 2018**.  
*The inflation multiplier for the current year update is 1.01276.*

**III.2.a.** Have the annual cost estimates update been completed? Yes  No

**III.2.b.** Have the updated cost estimates been submitted to DEQ? Yes  No

**III.2.b.i.** If not, by what date will you submit the updated cost estimates? \_\_\_\_\_  
**(Required)**

---

### SECTION IV – MISCELLANEOUS INFORMATION

DEQ is periodically contacted by research organizations, sales personnel, and members of the public requesting a mailing list of licensed Montana Solid Waste Facilities. However, State law prohibits the DEQ from providing a mailing list to non-governmental individuals without the operator's permission.

**Do you want your facility and contact information included in the publication of a mailing list?**  
Yes  No

DEQ provides training to facility managers and operators four times per year. In order to provide meaningful training, please check your top three training priorities for the next two years.

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Site Health and Safety | <input type="checkbox"/> Material Recycling Facilities | <input type="checkbox"/> Compliance Inspections   | <input type="checkbox"/> Transfer Stations |
| <input type="checkbox"/> Debris Management      | <input type="checkbox"/> Equipment Maintenance         | <input type="checkbox"/> Household Hazardous Waste and Electronic Waste Collection Events |  |
| <input type="checkbox"/> Site O&M               |  |   |  |
| <input type="checkbox"/> Asbestos               | <input type="checkbox"/> Landfarming                   | <input type="checkbox"/> Resource Recovery  |  |
| <input type="checkbox"/> Burn Piles             | <input type="checkbox"/> Landfill Fires                | <input type="checkbox"/> Waste Screening  |  |
| <input type="checkbox"/> Composting             | <input type="checkbox"/> Landfill Gas                  | <input type="checkbox"/> Groundwater Monitoring and Corrective Action                     |  |
| <input type="checkbox"/> Contaminated Soils     | <input type="checkbox"/> Tires                         | <input type="checkbox"/> Leachate Management  |  |
| <input type="checkbox"/> Electronic Waste       | <input type="checkbox"/> Recycling                     | <input type="checkbox"/> Household Hazardous Waste and CESQG                              |  |

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SECTION V –WASTE DIVERSION

Please complete the following table for materials that are managed at your facility but diverted from disposal. To avoid double counting please also indicate where the material was sold or shipped to.

WASTE MATERIAL CATEGORIES	ITEMIZED MATERIALS	AMOUNT DIVERTED OR RECYCLED	PLEASE SPECIFY UNITS					WHERE WAS THE MATERIAL SOLD OR SHIPPED
<b>Paper:</b>	Office paper (high grade)		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Newspaper		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Mixed paper		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Phonebooks		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Cardboard:</b>	Corrugated		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Paperboard		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Metals:</b>	Aluminum cans		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Steel cans		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	White goods		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Auto scrap		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Industrial non-ferrous		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Industrial ferrous		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Batteries:</b>	Vehicle batteries		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Other batteries (AA's, etc.)		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Plastics:</b>	PET #1		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	HDPE #2		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Mixed plastic		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Organics:</b>	Food waste		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Yard waste		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Agricultural organics		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Bio solids		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Compostable products		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Waste vegetable/Cooking oil		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Wood:</b>	Lumber		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Branches		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Chipped wood		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Aggregates:</b>	Concrete		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Asphalt pavement		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Asphalt shingles		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Coal Combustion Waste:</b>	Fly ash		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Bottom ash		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Textiles:</b>	Carpet		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Clothing		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Glass:</b>	Glass		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Tires:</b>	Passenger tires		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Commercial tires		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Fluids:</b>	Used motor oil		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Anti-Freeze		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
	Other		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Electronics:</b>	E-Waste		<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
<b>Other (please specify):</b>			<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
			<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
			<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
			<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	
			<input type="checkbox"/> Tons	<input type="checkbox"/> Pounds	<input type="checkbox"/> Gallons	<input type="checkbox"/> Cubic Yards	<input type="checkbox"/> Other_____	

---

## SECTION VI - CERTIFICATION

I, the undersigned, hereby certify that the foregoing information is true and correct to the best of my knowledge and belief.

**Authorized Signature:** \_\_\_\_\_  
*(An authorized representative of the solid waste system must sign and date the certification.)*

**Print Name Here:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

---

Please return completed form and all necessary attachments to:

MONTANA DEQ – SOLID WASTE PROGRAM  
PO BOX 200901  
HELENA, MT 59620-0901

QUESTIONS??

Contact Mary Louise Hendrickson by phone at 406-444-1808, or by email at [mhendrickson@mt.gov](mailto:mhendrickson@mt.gov)