

**DEPARTMENT OF ENVIRONMENTAL QUALITY
 PERMITTING AND COMPLIANCE DIVISION
 WASTE AND UNDERGROUND TANK MANAGEMENT BUREAU
 SOLID WASTE PROGRAM
 P.O. Box 200901
 HELENA, MT 59620-0901
 PHONE: 406-444-5300
 FAX: 406-444-1374**

**LICENSE APPLICATION
 HOUSEHOLD HAZARDOUS WASTE
 ELECTRONIC WASTE
 COLLECTION EVENT**

Application must be reviewed at least 10 days prior to the proposed event date.
Section 1 – General Information

Applicant Name: <i>(If licensed Class II facility, provide facility name and contact information)</i>	Applicant Address:	Phone:
Applicant Title:		Fax:

HHW or E-Waste Consultant:
 Name: _____ Title: _____
 Address: _____ Phone: _____

HHW or E-Waste Disposal/Recycling Facility:
 Facility Name: _____
 Facility Contact: _____ Title: _____
 Facility Address: _____
 EPA ID Number: _____ Phone: _____

Facility Name: _____
 Facility Contact: _____ Title: _____
 Facility Address: _____
 EPA ID Number: _____ Phone: _____

Facility Name: _____
 Facility Contact: _____ Title: _____
 Facility Address: _____
 EPA ID Number: _____ Phone: _____

Transporter Information:
 Name: _____ Contact: _____
 Address: _____ Phone: _____
 EPA ID Number: _____

Section 2 – Site Location Information

<i>Proposed Site Location Address:</i>	<i>Legal Description of Proposed Site Location:</i>	<i>Is property owned by applicant?</i> []Yes []No <i>If not, provide name/address of lessor who holds title to the property</i>
<i>Total Acreage Proposed for the Event:</i>	<i>Population to be served:</i>	<i>Name:</i>
<i>Proposed Accumulation Dates and Method of Storage:</i>		<i>Address:</i>

Section 3 – Event Information/Attachments

Provide a description of proposed treatment, final disposal, or recycling procedures to be used:

The following attachments are required:

- o Site Plan*** - Plan view delineating the location of the waste screening, collection, processing, and storage areas for the collected materials, site ingress and egress, emergency evacuation routes.
- o Operational Plan*** that includes waste acceptance criteria, waste rejection criteria, provisions for the separation of wastes, spill control/containment methods, emergency contact information, event contingency and emergency evacuation procedures.
- o Event Collection Plan*** that provides a summary of the expected sources, types, and quantities of materials to be collected.

Section 4 - Certification

This is to certify that I have personally examined and am familiar with the information in this application and all attached documents. To the best of my knowledge, information, and belief, the submitted information is accurate and complete.

Applicant Signature

Date