

BERGEN COUNTY UTILITIES AUTHORITY
Hazardous Waste Management and Disposal Program
Foot of Mehrhof Road
Little Ferry, New Jersey 07643
(201) 807-8696 (201) 641-3509 - fax

ID No: _____
Date: _____
Reviewed: _____

CESQG HAZARDOUS WASTE REGISTRATION FORM AND SERVICE INVENTORY

Only this completed form will be accepted for Program Preregistration Purposes

Generator Company/ Institution Name: _____
Street Address: _____ Mailing/Billing Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____ Position: _____
Phone No: () _____ Fax No: () _____

TYPE OF OPERATION (Give a brief description of the Business operated at the site address.)

CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR SURVEY

NJX Number: _____

Does (or did) your company have an EPA ID Number? _____ Yes _____ No

If Yes, Provide number (s) : _____

Please check the category (ies) that apply (ies) to your operation. In a calendar month Generation Limits do not exceed:

- _____ 100 kilograms (220 lbs.) of non-acutely hazardous wastes
_____ 1 kilogram (2.2 lbs.) of acutely hazardous waste
_____ 100 kilograms (220 lbs.) of any residue or contaminated soil, waste, or other debris resulting from the cleanup of a spill of acutely hazardous waste
_____ Accumulates no more than 1,000 kilograms (2,200 lbs.) of hazardous waste on site at any time

HAZARDOUS WASTE SERVICE INVENTORY

**** NO UNLABELED WASTES OR CONTAINERS WITH UNKNOWN CONTENTS CAN BE ACCEPTED ****

PLEASE LIST EACH ITEM SEPARATELY

<u>MATERIAL/ITEM</u>	<u>CONTAINER SIZE/TYPE</u>	<u>ESTIMATED WEIGHT</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

<u>MATERIAL/ITEM</u>	<u>CONTAINER SIZE/TYPE</u>	<u>ESTIMATED WEIGHT</u>
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

(IF MORE SPACE IS NEEDED, ATTACH A SHEET TO PROVIDE ADDITIONAL LISTING OF MATERIALS FOR DISPOSAL)

() Check box if you will be providing additional disposal sheets

All price quotes are based on the information provided by the generator; any changes to or falsification of this information will result in disqualification from participating in the Bergen County Utilities Hazardous Waste Collection Program

FOR COUNTY AND VENDOR USE

Authorized Vendor Signature: _____

Date: _____

Collection and Disposal Fee: \$ _____

Authorized County Signature: _____

Date: _____

CERTIFICATION

I certify that _____ is a conditionally exempt small quantity generator (CESQG) pursuant to N.J.A.C. 7:26-8.3 (generates less than 100 kg {220 lbs.} of hazardous waste or less than 1 kg {2.2 lbs.} of acutely hazardous waste, or less than 1,001 gallons of oil per month and does not accumulate more than these quantities at any one time) and that the above information is true and accurate, under penalty of law. I certify that the listing of materials to be delivered to the Bergen County Utilities Authority hazardous waste collection program is complete and accurate.

Authorized Generator Representative (please print): _____

Generator Representative Signature: _____ Date: _____

PAYMENT IS DUE ON OR BEFORE DROP-OFF BY CHECK TO:

Bergen County Utilities Authority – Solid Waste Division
P.O. Box 9
Little Ferry, New Jersey 07643

COMPLETED FORM & ONE COPY **MUST** BE SUBMITTED AT DROP-OFF AS PROOF OF APPROVED PREREGISTRATION.

Confirmation of Drop-off: _____	Vendor Confirmation of Acceptance: _____
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Directions to Bergen County Campgaw Mountain Reservation –

Traveling Route 17 North

Take into Mahwah. Take Route 202 (Morristown/Suffern) exit. Make left at stop sign. Pass Ramapo College on left. Make left onto Darlington Avenue; bear right at fork onto Campgaw. The Institute is about ½ mile on the right.

Traveling Route 208 West

Take into Oakland. Take Rt. 202/Ramapo Valley Road North. Right onto Darlington, bear right at fork onto Campgaw. The Institute is about ½ mile on the right.