

Waste Approval Process

You have been provided this document by the Riverside County Waste Management Department (RCWMD) because you have requested to utilize one of Riverside County's Landfills for the disposal of waste that may be prohibited or a waste that is out of the ordinary which needs further evaluation. Riverside County Landfills are prohibited from accepting hazardous waste and waste which is prohibited by the Regional Water Quality Control Boards (RWQCB). The RCWMD's acceptance policies for common waste streams can be found on its website at:

http://www.rivcowm.org/opencms/landfill_info/acceptable_waste.html.

If your waste stream is not listed on the RCWMD website and has the potential of being classified as a hazardous waste or a waste that is otherwise prohibited from landfilling, the waste must be approved through the RCWMD's waste approval process.

The purpose of the approval process is to ensure that your waste meets **ALL** of the following criteria:

The waste is not a hazardous waste as defined in the California Health and Safety Code, Division 20, Chapter 6.5, Section 25117.

The waste is not a designated waste, as defined in the California Water Code section 13173

The waste is not a special waste pursuant to Title 22 CCR Section 66261.124, or the waste is a special waste pursuant to Section 66261.124 that is approved for disposal in the solid waste facility permit for the landfill you wish to use.

The waste is consistent with the Waste Discharge Requirements for the landfill in question.

The waste is approved for disposal by the RCWMD.

RCWMD does not hold any liability for the proper classification of your waste stream. You, the generator of the waste, hold the sole responsibility for properly determining whether your waste is a regulated hazardous waste, and you, the generator of that waste, are ultimately responsible for the proper management of that waste. If you make a mistake in the classification process, you are subject to enforcement action, particularly if a hazardous waste is misclassified and managed as non-hazardous as defined in Title 22 CCR Article 3 Section 66260.200. Waste generators can find additional information and assistance on the California Department of Toxic Substances Control (DTSC) website at: <http://www.dtsc.ca.gov/>. Generators can find specific information regarding properly classifying their waste at: http://www.dtsc.ca.gov/HazardousWaste/upload/HWMP_DefiningHW11.pdf.

Under Riverside County Ordinance 779, the RCWMD has the final authority to determine what materials will be accepted for disposal regardless of the waste classification as a non-hazardous waste. For this reason, you should immediately contact the RCWMD Environmental Compliance Manager at (951) 486-3200 to learn if your material will be considered for disposal at a Riverside County Landfill. Only if the Environmental Compliance Manager agrees that your waste will be considered for disposal within Riverside County should you proceed with testing. Once you have been informed that the waste may be

considered for disposal, we recommend you contact the appropriate RWQCB listed below because each region may have special sampling, handling, disposal and/or testing requirements.

If testing has been requested, you will need to test your waste streams in accordance with the request, using standards which are consistent with California Health and Safety Code Division 20 Chapter 6.5, California Code of Regulations Title 22 Division 4.5 and 40 Code of Federal Regulations.

Once you have performed the required testing you will need to complete and sign the RCWMD Waste Profile Sheet (See Attachment A). Send a letter or e-mail and the completed profile sheet with all requested test data including chain of custodies, test results, and quality control reports to the RCWMD and the appropriate RWQCB listed below. Your letter or e-mail should specify which of Riverside County's Class III solid waste landfills you are requesting approval for disposal. A sample letter/e-mail is included as Attachment B. A list of all active Riverside County Class III solid waste landfills is located at http://www.rivcown.org/opencms/landfill_info/landfill_hours.html.

Riverside County Waste Management Department

For disposal at any Riverside County Class III Landfill:
Attn: Matthew Hickman, Environmental Compliance Manager
14310 Frederick Street
Moreno Valley, CA 92553
wasteapproval@co.riverside.ca.us

AND

Regional Water Quality Control Board (RWQCB)

(Select the appropriate address based on the landfill you are requesting approval for disposal.)

For disposal at the Blythe, Desert Center, Mecca II
or Oasis Sanitary Landfills:

RWQCB, Colorado River Basin
Attn: Herb Jackson, Engineering Geologist
(760) 346-7491
73-720 Fred Waring Drive, Ste. 100
Palm Desert, CA 92260
herb.jackson@waterboards.ca.gov

For disposal at the Badlands, El Sobrante, or
Lamb Canyon Sanitary Landfills:

RWQCB, Santa Ana Region
Attn: Cindy Li, Chief-Land Disposal Section
(951) 782-4130
3737 Main Street, Ste. 500
Riverside, CA 92501-3339
cli@waterboards.ca.gov

Forward a copy of the RWQCB approval letter or e-mail to the RCWMD Environmental Compliance Manager. The RCWMD will not consider the waste for disposal until the approval from the RWQCB has been received. It is within the RCWMD's authority to deny acceptance of any waste, regardless of the approval of the RWQCB.

ATTACHMENT A

RCWMD Generator Waste Profile Sheet

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GENERATOR WASTE PROFILE SHEET

Waste Profile #

Requested Disposal Facility:

- | | |
|---|---|
| <input type="checkbox"/> Badlands Landfill, Moreno Valley, CA | <input type="checkbox"/> Lamb Canyon Landfill, Beaumont, CA |
| <input type="checkbox"/> Mecca II Landfill, Mecca, CA | <input type="checkbox"/> Oasis Landfill, Oasis, CA |
| <input type="checkbox"/> Blythe Landfill, Blythe, CA | <input type="checkbox"/> El Sobrante Landfill, Corona, CA |

Date:

I. WASTE GENERATOR INFORMATION

Generator Name:			
Generator Site Address:			
City:	County:	State:	Zip:
Generator Mailing Address (if different):			
City:	County:	State:	Zip:
Address Where Waste Was Generated:			
City:	County:	State:	Zip:
Generator Contact Name:			
Phone Number:		Fax Number:	

II. TRANSPORTER INFORMATION

Transporter Name:		Contact Name:	
Transporter Address:			
City:	County:	State:	Zip:
Phone Number:	Fax Number:	State Transportation Number:	

III. PAYMENT INFORMATION

Method of Payment:
(If payment account is desired, please call (951) 486-3200)

IV. WASTE STREAM INFORMATION

Name of Waste:

Process Generating Waste (for contaminated soil, describe the site history including all business types once located on the property, attach additional pages if necessary, applicable environmental assessment reports shall also be attached):

Type of Waste: INDUSTRIAL PROCESS WASTE or POLLUTION CONTROL WASTE

Physical State: SOLID SEMI-SOLID POWDER LIQUID OTHER: _____

Method of Shipment: <input type="checkbox"/> BULK <input type="checkbox"/> DRUM <input type="checkbox"/> BAGGED <input type="checkbox"/> OTHER: _____				
Estimated Annual Volume:	<input type="checkbox"/> CUBIC YARD _____	<input type="checkbox"/> TONS _____	<input type="checkbox"/> GALLONS _____	<input type="checkbox"/> OTHER _____
Frequency: <input type="checkbox"/> ONE TIME <input type="checkbox"/> DAILY <input type="checkbox"/> WEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> OTHER: _____				
Special Handling Instructions:				

IV. REPRESENTATIVE SAMPLE CERTIFICATION

By signing below I certify that the sampling plan used and samples submitted for analysis are sufficient in number and quantity to provide a representative profile of the subject waste stream and that all samples collected were analyzed for all suspect hazardous parameters and that the testing was done in accordance to Article 3 of Chapter 11 hazardous waste (sections 66261.21 to 66261.24).

Sample Date:	Type of Sample: <input type="checkbox"/> COMPOSITE SAMPLE <input type="checkbox"/> GRAB SAMPLE
Laboratory:	Sample ID Numbers:
Sampler's Employer:	
Sampler's Name (printed):	Signature:

V. PHYSICAL CHARACTERISTICS OF WASTE

Characteristic Components				% by Weight (range)	
1.					
2.					
3.					
4.					
Color:	Odor (describe)	% Moisture	% Solid	Flash Point	pH
_____	_____	_____	_____	_____	_____
<i>Attach Laboratory Analytical Report (and/or Material Safety Data Sheet) Including Required Parameters Provided for this Profile</i>					
Does this waste exhibit any characteristic of ignitability as defined in Article 3 of Chapter 11 hazardous waste, section 66261.21?					<input type="checkbox"/> YES or <input type="checkbox"/> NO

Does this waste exhibit any characteristic of corrosivity as defined in Article 3 of Chapter 11 hazardous waste, section 66261.22?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Does this waste exhibit any characteristic of reactivity as defined in Article 3 of Chapter 11 hazardous waste, section 66261.23?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Does this waste exhibit any characteristic of toxicity as defined in Article 3 of Chapter 11 hazardous waste, section 66261.24?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Is this waste a RCRA hazardous waste as defined in Title 22 CCR, Chapter 11, Article 4?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Is this a regulated Toxic Material as defined by Federal and/or State regulations?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Is this a regulated Radioactive Waste as defined by Federal and/or State regulations?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Is this a regulated Medical or Infectious Waste as defined by Federal and/or State regulations?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Is this waste generated at a Federal Superfund Clean Up Site?	<input type="checkbox"/> YES or <input type="checkbox"/> NO

VI. GENERATOR CERTIFICATION

I hereby certify that to the best of my knowledge and belief, the information contained herein is a true, complete and an accurate description of the waste material being offered for disposal and that all known or suspected hazards have been disclosed. All Analytical Results/Material Safety Data Sheets submitted are truthful and complete and are representative of the waste. I further certify that by utilizing this profile, neither myself nor any other employee of the company will deliver for disposal or attempt to deliver for disposal any waste which is classified as toxic waste, hazardous waste or infectious waste, or any other waste material this facility is prohibited from accepting by law. I shall immediately give written notice of any change or condition pertaining to the waste provided herein. Our company hereby agrees to fully indemnify this disposal facility against any damages resulting from this certification being inaccurate or untrue. I further certify that the company has not altered the form or content of this profile sheet as provided by the Riverside County Waste Management Department (RCWMD). The undersigned individual warrants that he/she is authorized to sign this document on behalf of the Generator.

_____	_____
Authorized Representative Name and Title (Printed or Typed)	Company Name
_____	_____
Authorized Representative Signature	Date

VII. RIVERSIDE COUNTY WASTE MANAGEMENT DEPARTMENT APPROVAL

Approved <input type="checkbox"/>	Rejected <input type="checkbox"/>	Approval Date:
Conditions:		
_____		_____
Approving Representative Name and Title (Printed or Typed)		Date

Approving Representative Signature		

For any questions regarding this form, please contact the Environmental Compliance Manager of RCWMD at (951) 486-3200.

ATTACHMENT B
SAMPLE LETTER/E-Mail

<date>

<Agency Name>
<Agency Address>

Attn: <contact name>

Re: Written Approval to Dispose of <your waste> from <your site> at the <name of landfill>

The purpose of this letter/e-mail is to request approval to dispose of <name of waste> at the <name of landfill>. The detailed description of the waste properties, volumes and constituents are stated in the attached RCWMD Waste Profile Sheet.

Should you have any further questions regarding this waste stream please contact <Name and Title> at <List mail and email address and phone numbers.>

If you have any additional questions, please contact me at <phone number>.

Sincerely,

<your name>

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