



Hans W. Kernkamp, General Manager-Chief Engineer

Waste Approval Process

You have been provided this document by the Riverside County Department of Waste Resources (RCDWR) 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 RCDWR's acceptance policies for common waste streams can be found on its website at:

<http://www.rcwaste.org/opencms/WasteGuide/index.html>.

If your waste stream is not listed on the RCDWR 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 RCDWR'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 RCDWR.

RCDWR 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_DefiningHW111.pdf.

Under Riverside County Ordinance 779, the RCDWR 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 RCDWR Waste Approval Staff at (951) 486-3200 to learn if your material will be considered for disposal at a Riverside County Landfill. A RCDWR Generator Waste Profile Sheet (Attachment A) shall be submitted to the RCDWR. Only if the RCDWR's Waste Approval Staff 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 RWQCB approval is required, forward a copy of the RWQCB approval letter or e-mail to the RCDWR Waste Approval Staff. The RCDWR will not consider the waste for disposal until the approval from the RWQCB has been received. It is within

the RCDWR's authority to deny acceptance of any waste, regardless of the approval of the RWQCB. A sample letter/e-mail is included as Attachment B.

Effective August 6, 2015, RWQCB, Santa Ana Region approval is not required for soil; however, you will need to contact the RCDWR Waste Approval Staff. The RCDWR will notify you of any required waste sample testing, sampling frequency, constituents of concern for testing, and testing methods listed in Attachment C.

If testing has been requested by either the Water Board or RCDWR, 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

A list of all active Riverside County Class III solid waste landfills is located at <http://www.rcwaste.org/opencms/landfill/hours.html>.

Contact information for the RCDWR and the Water Boards are as follows:

Riverside County Department of Waste Resources

For disposal at any Riverside County Class III Landfill:

Attn: Department Waste Approval Staff

14310 Frederick Street

Moreno Valley, CA 92553

wasteapproval@rcwaste.org

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

Attachment A

RCDWR 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 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/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 Department of Waste Resources (RCDWR). 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 DEPARTMENT OF WASTE RESOURCES 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 RCDWR Waste Approval Staff 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 RCDWR Generator 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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Attachment C

Soil Testing Requirements

The waste must be sampled and analyzed for the following contaminant(s):

CUBIC YARDS OF SOIL	NO. OF SAMPLES
Less than 100*	2
101 to 500	4
501 to 2500	6
For each 500 CY greater than 2500**	1 additional sample

For quantities less than 20 CYs, no sampling is required.

** For quantities greater than 20,000 CYs, an alternative sampling frequency may be considered.

- CAM17 Heavy Metals, EPA Method 6010B
- Pesticides with No PCBs, EPA Method 8081A
- Pesticides with PCBs, EPA Method 8080A
- Herbicides, EPA Method 8151A
- Volatile Organics and BTEX, EPA Method 5035A or 8021B or 8260B
- Semi-Volatile Organics with No PCBs, EPA Method 8270C
- Semi-Volatile Organics with PCBs, EPA Method 8270D
- Electrical Conductivity, Saturated Paste Extraction Method
- pH, EPA Method 150.1
- Dioxins, EPA Method 8290
- TPH, EPA Method 8015B or M
- PAH, EPA Method 8310
- Other: _____

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