EPA ID Number | | | | | | | | | | | | |

OMB# 2050-0024; Expires 04/30/2024

ADDENDUM TO THE SITE IDENTIFICATION FORM: NOTIFICATION OF HAZARDOUS SECONDARY MATERIAL ACTIVITY

ONLY fill out this form if:

- You are located in a State that allows you to manage excluded hazardous secondary material (HSM) under 40 CFR 260.30, 261.4(a)(23), (24), (25), or (27) (or state equivalent; See https://www.epa.gov/hw/where-2018-definition-solid-waste-rule-effect for a list of eligible states; AND
- You are or will be managing excluded HSM in compliance with 40 CFR 260.30, 261.4(a)(23), (24), (25), or (27) (or state equivalent) or have stopped managing excluded HSM in compliance with the exclusion(s) and do not expect to manage any amount of excluded HSM under the exclusion(s) for at least one year. Do not include any information regarding your hazardous waste activities in this section. Note: If your facility was granted a solid waste variance under 40 CFR 260.30 prior to July 13, 2015, your management of HSM under 40 CFR 260.30 is grandfathered under the previous regulations and you are not required to notify for the HSM management activity excluded under 40 CFR 260.30.

1. Reason for Notification (Include dates where requested)

☐ Facility will begin managing excluded HSM as of _____ (mm/dd/yyyy).

☐ Facility is still managing excluded HSM/re-notifying as required by March 1 of each even-numbered year.

☐ Facility has stopped managing excluded HSM as of _____ (mm/dd/yyyy) and is notifying as required.

2. Description of Excluded HSM Activity. Please list the appropriate codes (see Code List section of the instructions) and quantities, in short tons, to describe your excluded HSM activity ONLY (do not include any information regarding your hazardous wastes). Use additional pages if more space is needed.

A. Facility Code	B. Waste Code(s) for HSM	C. Estimate Short Tons of excluded HSM to be managed annually	D. Actual Short Tons of excluded HSM that was managed during the most recent odd-numbered year	E. Land-based Unit Code