LAND APPLICATION OF RESIDUAL WASTE
ANNUAL OPERATION REPORT

Instructions

1. This report is due on or before March 1 each year covering the period January 1 to December 31 of the preceding year.

2. Send one (1) copy of the report and the check for the administrative fee made payable to the “Commonwealth of Pennsylvania” to the attention of the Solid Waste Manager in the Regional Office listed below.

3. Send one (1) copy of the report to:

   Bureau of Land Recycling and Waste Management
   Division of Waste Minimization and Planning
   P.O. Box 8472
   Harrisburg, PA 17105-8472

4. The report forms may be reproduced without modification of content.

IDENTIFY ALL ATTACHMENTS BY PERMIT NUMBER AND DATE PREPARED

REGIONAL OFFICES
(and counties served)

DEP Southeast Region
Lee Park, Suite 6010
555 North Lane
Conshohocken, PA 19428-2233
Phone: 610-832-6212
Bucks - Chester - Delaware -
Montgomery - Philadelphia

DEP Northcentral Region
208 W. Third Street, Suite 101
Williamsport, PA 17701-6448
Phone: 717-327-3653
Bradford - Cameron - Centre - Clearfield - Clinton -
Columbia - Lycoming - Montour - Northumberland -
Potter - Snyder - Sullivan - Tioga - Union

DEP Northeast Region
2 Public Square
Wilkes-Barre, PA 18711-0790
Phone: 717-826-2516
Carbon - Lackawanna - Lehigh -
Luzerne - Monroe - Northampton -
Pike - Schuylkill - Susquehanna -
Wayne - Wyoming

DEP Southcentral Region
One Ararat Boulevard
Harrisburg, PA 17110-9714
Phone: 717-657-4588
Adams - Bedford - Berks - Blair -
Cumberland - Dauphin - Franklin - Fulton -
Huntingdon - Juniata - Lancaster -
Lebanon - Mifflin - Perry - York

DEP Southwest Region
400 Waterfront Drive
Pittsburgh, PA 15222-4745
Phone: 412-442-4000
Allegheny - Armstrong - Beaver - Cambria -
Fayette - Greene - Indiana - Somerset -
Washington - Westmoreland

DEP Northwest Region
230 Chestnut Street
Meadville, PA 16335-3481
Phone: 814-724-8526
Butler - Clarion - Crawford - Elk - Erie -
Forest - Jefferson - Lawrence - McKean -
Mercer - Venango - Warren
LAND APPLICATION OF RESIDUAL WASTE
ANNUAL OPERATION REPORT

YEAR _________

SITE INFORMATION
(Please type or print)

Name of Permittee ________________________________ Phone (____) __________________

Name____________________________ County ________________
Street ______________________________ Municipality __________________
City ______________________________ State ______ Zip ______________________
Tax I.D. __________________ or S.S.# ______________

A. Type of Facility: (Check One)

☐ Agricultural Utilization ☐ Land Disposal ☐ Land Reclamation

B. Topographic Map

Attach a topographic map of the same scale and contour interval as the map submitted with the application, showing the field boundaries where residual waste has been applied, and the volume applied to each field or other designated application area.

C. List permitted sites where residual waste was not applied during the report year. Attach additional sheets with the same headings if needed.

<table>
<thead>
<tr>
<th>Permittee</th>
<th>Permit No.</th>
<th>Site Name</th>
<th>County</th>
<th>Township</th>
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</table>
INSTRUCTIONS: Enter the Name, Mailing Address, County (PA County) and State of each Generator under the column titled Generator Information. Enter the 3 digit Code number (from the Waste Code Appendix) for each waste type applied. Enter the total Weight to the nearest 1/10 ton, of each waste type applied in the spaces in the proper column. Enter the State abbreviation from Table 2, and the PA County Code from Table 1. Enter the generator information only once for each generator. Leave the Generator Information Section blank for additional waste codes from the same generator.

<table>
<thead>
<tr>
<th>Generator Information (Type or Print)</th>
<th>% Solids</th>
<th>Waste Code (From Appendix)</th>
<th>Total Weight or Volume in Tons or Gallons</th>
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TOTAL FOR THIS SHEET
D. CERTIFICATION OF ANALYSIS

Certification that the operator has received the analysis or certification required by §287.54 (relating to chemical analysis of waste) for each type of waste received at the facility, and that the residual waste that is received at the facility meets the condition in the facility’s permit.

☐ All required analyses were received during the year.

E. SOILS ANALYSIS

For agricultural utilization and surface land disposal facilities which have received residual waste in the calendar year, please submit a chemical analysis of soil for each field at the facility for pH, phosphorous, cadmium, zinc, copper, lead, nickel, chromium, mercury and any other constituents contained in the waste that may be leached into the environment as determined under §287.132 unless otherwise specified by the Department in the permit.

F. ANNUAL GROUNDWATER MONITORING EVALUATION

Include results of annual groundwater monitoring if required by the Department.

G. PERMIT AND OPERATION STATUS

1. Change of Ownership - Identification of Interests - Compliance Information.

☐ NO. If “NO,” complete a copy of Form C1 “Compliance History Certification” (2500-PM-LRWM0195) and attach it to this report.

☐ YES. If “YES,” complete a copy of Form C, “Compliance History” (2540-FM-LRWM0058) and attach it to this report.

2. Right of Entry - Lease Agreement - Land Ownership.

☐ NO.

☐ YES. If “YES”, submit a revised copy of Form E, “Contractual Consent of Landowner” (2540-PM-LRWM0353). Changes involving land ownership may require the submittal of Part B2 and B3 of Form C concerning surface or subsurface land ownership.

H. PERMIT ADMINISTRATION FEE

Please submit a check payable to the “Commonwealth of Pennsylvania”. Attach the check to one of the copies being sent to the Regional Office.

☐ $300.00 - Agricultural Utilization of Residual Waste.

☐ $1,500.00 - Land Reclamation with Residual Waste.

☐ $1,500.00 - Surface Land Disposal of Residual Waste.

I. FINANCIAL ASSURANCE

1. Attach a written update of the total bond liability for the facility in accordance with Section 271.331 - bond amount determination and 287.332 - bond amount adjustments. If additional bond is determined to be necessary, it shall be submitted to the Department within 90 days after the annual report is due.

☐ Additional bond is not required. Report is attached.

☐ Additional bond will be submitted. Report is attached.
LAND APPLICATION OF RESIDUAL WASTE
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For the report year _________ (January 1 to December 31)
(enter year)

2. Attach a current Certificate of Insurance as specified in Section 287.371 -- 287.373(a).

IDENTIFY ALL ATTACHMENTS BY PERMIT NUMBER AND DATE PREPARED

Officer Certification

This is to certify that I have personally examined this report and am familiar with the information submitted in it and all attached documents. I am aware of the Department of Environmental Protection requirements for this report and this facility. To the best of my knowledge, information and belief, the information submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

Name of Officer __________________________ Date __________________________
(Please Print)
Signature __________________________ Telephone __________________________
Title __________________________