ASBESTOS LANDFILL RECOGNITION FORM (AAC-7 IS)

In-State Landfills
Louisiana Department of Environmental Quality
OES - Air Permits Division, Manufacturing Section
P.O. Box 4313, Baton Rouge, LA 70821-4313
Phone (225) 219-3179 Fax (225) 219-3156

I. Instructions: **AI No. _____**

This application must be completed and submitted to the Louisiana Department of Environmental Quality at the above address. All landfills must enclose a copy of the section of the approved permit that addresses friable and/or non-friable asbestos containing waste material (ACWM). Upon receipt of an acceptable application, the landfill will be included on Louisiana's Asbestos Recognition List. If you have any questions, please contact this office.

II. Landfill Information: (Please Print)

Name of Landfill:		**Physical Location of Landfill:**	
Mailing Address:		**Contact Name:**	
City:		**Contact Phone No.**	**Fax No.**
State:	**Zip Code:**	**Email Address:**	
Accepts: (check all that apply) ____ Friable ____ Non-friable ____ No ACWM		**If non-friable ACWM Only is Accepted:** _____ Category 1 _____ Category 2	
Landfill Type: (check one) _____Type I or II Commercial/Residential Landfill _____Type III Construction and Debris Landfill			

III. Availability and Compliance with LAC 33:III.Chapter 5151, Louisiana Asbestos Regulations.
(To be completed and signed by the facility manager. Please check "yes" or "no" after each statement)

A. A copy of LAC 33:III.Chapter 5151, which pertains to asbestos renovation/demolition and waste disposal, is on site at the landfill and made available to all employees.

____Yes ____No

B. The facility has properly trained employees concerning the above regulations.

____Yes ____No

C. The facility is permitted to accept asbestos-containing waste noted in Part II of this form.

____Yes ____No If yes, indicate LA Permit No._____

_____ _____ _____
Facility Manager (Print Name) **(Signature)** **(Date)**