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|  | | | | | **ASBESTOS LANDFILL RECOGNITION APPLICATION (AAC-7 IS)** | | | | | | | | | | | | | | | | |  | | |
|  | | | | | **In-State Landfills** | | | | | | | | | | | | | | | | | *For LDEQ* | | |
|  | | | | | **Louisiana Department of Environmental Quality (LDEQ)** | | | | | | | | | | | | | | | | | *Use Only* | | |
|  | | | | | **Office of Environmental Services (OES)** | | | | | | | | | | | | | | | | | *RAL* |  | |
|  | | | | | **Public Participation and Permit Support Division (PPPSD)** | | | | | | | | | | | | | | | | |  |  | |
|  | | | | | **Notifications and Accreditations Section (NAS)** | | | | | | | | | | | | | | | | |  |  | |
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| *U.S. Mail Address*  NAS/PPPSD/OES  LDEQ  P.O. Box 4313  Baton Rouge, LA 70821-4313 | | | | | | | | | | | | *Service Carrier or Hand-Delivery Address*  NAS/PPPSD/OES  LDEQ  602 N. 5th St.  Baton Rouge, LA 70802 | | | | | | | | | | | | |
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| 1. **Instructions** | | | | | | | | | | | |  | | | | | | | | | | | | |
| This application must be completed and submitted to the Louisiana Department of Environmental Quality (LDEQ) at one of the above addresses. All landfill applications must include the required attachments regarding the approved permit that addresses asbestos-containing waste (see Section III). Upon the LDEQ’s issuance of an Asbestos Landfill Recognition Approval Letter, the landfill will be included on the LDEQ’s list of Recognized Asbestos Landfills. If you have any questions, please contact Charles Finley, Environmental Scientist Manager, at (225) 219-3714; or Keri Meyers, Environmental Scientist Supervisor, at (225) 219-3300. **Please print all information.** | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Landfill Information** | | | | | | | | | | | |  | | | | | | | | | | | | |
| **Name of Landfill** | | | | | | | | | **Physical Location of Landfill** | | | | | | | | | | | | **Agency Interest (AI) No.** | | | |
|  | | | | | | | | |  | | | | | | | | | | | |  | | | |
| **Mailing Address** | | | | | | | | | | | | **Contact Name** | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | | | | |
| **City** | | | | | | | | | | | | **Contact Phone No.** | | | | | **Fax No.** | | | | | | | |
|  | | | | | | | | | | | | ( ) |  | | | | ( ) | | | | |  | | |
| **State** | | | | | | | **Zip Code** | | | | | **Email Address** | | | | | | | | | | | | |
|  | | | | | | |  | | | | |  | | | | | | | | | | | | |
| **Asbestos Types Accepted** | | | | | | | | **If Non-Friable Asbestos Containing Material (ACM) Only is Accepted** (Check one) | | | | | | | | | | | | | | | | |
| Friable | | | | Non-friable | | | | Category 1 | | | | Category 2 | | | | Categories 1 & 2 | | | | | | | | |
| **Landfill Type** (Check one) | | | | | |  | | | | | | | | |  | | | | | | | | | |
| Type I Industrial | | | | | | Type II Commercial/Residential | | | | | | | | | Type I/II Industrial and Commercial/Residential | | | | | | | | | |
| 1. **Attachments** | | | | | | | | | | | |  | | | | | | | | | | | | |
| The following must be attached to this application. NOTE: Application will not be processed without these documents. | | | | | | | | | | | | | | | | | | | | | | | | |
| * A copy of the LDEQ Solid Waste permit approval letter for the effective solid waste permit authorizing the facility to accept asbestos-containing waste in accordance with LAC 33:III.5151.J.1.a.vi (b) | | | | | | | | | | | | | | Solid Waste permit approval letter is attached | | | | | | | | | | |
| Indicate Permit No. | | | |  | | | | | |  |
|  | | | | | |  |
| * A copy of the Quality Assurance/Quality Control Plan associated with the above permit | | | | | | | | | | | | | | Quality Assurance/Quality Control Plan is attached | | | | | | | | | | |
| 1. **Availability and Compliance with the Louisiana Environmental Quality Regulations** | | | | | | | | | | | | | | | | | | | | | | | | |
| To be completed and signed by the facility manager (Check “yes” or “no” after each statement) | | | | | | | | | | | | | | | | | | | | |  | | |  |
|  | A. | A copy of the Louisiana solid waste regulations pertaining to asbestos renovation/demolition and waste disposal is on-site at the landfill and made available to all employees per LAC 33:VII.711.C.2.c. | | | | | | | | | | | | | | | | | | |  | Yes  No | | |
|  | B. | The facility has properly trained employees concerning asbestos waste disposal per LAC 33:VII.711.C.2.c. | | | | | | | | | | | | | | | | | | |  | Yes  No | | |
| C. | | The facility agrees to return completed, signed Asbestos Disposal Verification Forms (ADVF) to the LDEQ within 30 working days per LAC 33:III.5151.F.2.f.iv. | | | | | | | | | | | | | | | | | | |  | Yes  No | | |
|  | | |  |  | | | | | |  |  | | | | | | | |  | |  | | |  |
|  | | |  | **Facility Manager** (Print Name) | | | | | |  | Facility Manager (Signature) | | | | | | | |  | Date | | | |  |