

HAZARDOUS WASTE GENERATOR LICENSE APPLICATION & MANAGEMENT PLAN

Any business or government agency that generates hazardous waste must apply for a hazardous waste generator license within 75 days of generating waste.

SUBMIT THE FOLLOWING TO: RamseyHazWaste@co.ramsey.mn.us or mail to the address listed above.

- Signed license application
- Management plan(s)
- Certificate of Compliance

HAZARDOUS WASTE GENERATOR INFORMATION:

Hazardous Waste Identification Number (HWID#):			
Generator Name/Business Name:			
Generator Site Address:		City:	State: MN
		Zip Code:	
Property Owner:	Address:		Phone:
North American Industry Classification System (NAICS) Code:			

CORRESPONDENCE:

Site

Site Contact:	Title:	Phone:	Email:

Mailing

Mailing Contact:	Title:	Phone:	Email:	
Mailing Address:		City:	State:	Zip Code:

Billing

Billing Contact:	Title:	Phone:	Email:	
Billing Address:		City:	State:	Zip Code:

Emergency

Emergency Contact:	Title:	Phone:	Email:
---------------------------	---------------	---------------	---------------

CERTIFICATION:

I certify under penalty of the law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. I hereby apply for a Ramsey County Hazardous Waste Generator License subject to all conditions and provisions of MN Rules 7045 and the Ramsey County Hazardous Waste Management Ordinance.

Applicant's Name:	Applicant's Title:
Applicant's Signature:	Date:

MANAGEMENT PLAN

Complete a column for each [hazardous waste](#), including [used oil and related waste](#), and [universal waste](#). Additional forms - [Management Plan](#)

Generator Name/Business Name:

	Column 1	Column 2
(COUNTY USE ONLY)	H E N	H E N
Waste Name		
4-digit Hazardous Waste Code(s)		
Year Waste was First Produced		
Physical State (Check One)	Solid Liquid Gas Sludge	Solid Liquid Gas Sludge
Source or Process of Generation		
Amount per Year in Gallons or Pounds		
Aboveground or Underground Storage Tank (Check One)	Aboveground Storage Tank Underground Storage Tank	Aboveground Storage Tank Underground Storage Tank
On-site Management		
Management Method (Check One)	Accumulate Burn as fuel Neutralize Recycle Treat/sewer Other	Accumulate Burn as fuel Neutralize Recycle Treat/sewer Other
Off-site Management		
Transporter Name		
Transporter ID Number		
Designated Facility Name		
Designated Facility ID Number		
Designated Facility Management Method (Check One)	Burn as fuel Chemical fixation incineration neutralization Recycle Treat/sewer Other	Burn as fuel Chemical fixation incineration neutralization Recycle Treat/sewer Other

MANAGEMENT PLAN

Complete a column for each [hazardous waste](#), including [used oil and related waste](#), and [universal waste](#). Additional forms - [Management Plan](#)

Generator Name/Business Name:

	Column 3	Column 4
(COUNTY USE ONLY)	H E N	H E N
Waste Name		
4-digit Hazardous Waste Code(s)		
Year Waste was First Produced		
Physical State (Check One)	Solid Liquid Gas Sludge	Solid Liquid Gas Sludge
Source or Process of Generation		
Amount per Year in Gallons or Pounds		
Aboveground or Underground Storage Tank (Check One)	Aboveground Storage Tank Underground Storage Tank	Aboveground Storage Tank Underground Storage Tank
On-site Management		
Management Method (Check One)	Accumulate Burn as fuel Neutralize Recycle Treat/sewer Other	Accumulate Burn as fuel Neutralize Recycle Treat/sewer Other
Off-site Management		
Transporter Name		
Transporter ID Number		
Designated Facility Name		
Designated Facility ID Number		
Designated Facility Management Method (Check One)	Burn as fuel Chemical fixation incineration neutralization Recycle Treat/sewer Other	Burn as fuel Chemical fixation incineration neutralization Recycle Treat/sewer Other