

District of Kitimat Municipal Landfill Controlled Waste Application Form



IMPORTANT: This form is to be completed by a representative of the controlled waste generator. Complete sections that are applicable to generated waste, sign and date. Please attach any additional information (analyses, etc.) that describes the controlled waste. Send completed applications to engineering@kitimat.ca

We are collecting your personal information to verify that all materials accepted for disposal are compliant with our BC ENV operational permit. If you have questions about our collection of your information, please contact us at administration@kitimat.ca or at (250) 632-8900. We are collecting your personal information under section [e.g. 26(c)] of the Freedom of Information and Protection of Privacy Act.

Approval No.: _____

PART A - GENERATOR

Company Name:	
Business Address:	
Contact Name:	Telephone: ()
Title:	E-Mail:

PART B – SOURCE SITE INFORMATION

Site Address: Please include a site map on a separate page	
Legal Owner of Site:	
Contact Name:	Telephone: ()
Contact Title:	E-Mail:
Site ID (if applicable):	PID:
Legal Description:	
Have you ever received a Notice of Likely or Actual Migration per Section 57(1.1) or 60.1(2) of the Contaminated Site Regulation for this property: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Has the property ever been used for any industrial or commercial uses described in Schedule 2 of the Contaminated Site Regulation: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes – Schedule 2 reference and description (include high-risk designation, if applicable):	
Reason for Generating Controlled Waste:	

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PART C – WASTE CHARACTERIZATION

Select applicable waste stream(s):

- Asbestos (complete **PART C.1**)
- Construction and Demolition Waste (>5 m³), concrete and asphalt (complete **PART C.2**)
- Bulk liquids (complete **PART C.3**)
- Inert Fill (complete **pa C.4**)

PART C.1 – ASBESTOS

Is the total weight of Asbestos Containing Material Greater than 5kg?

no yes, provide a copy of your Hazardous Waste Manifest to the landfill operator, prior to disposal.

Describe the asbestos containing material composition and source (eg. White asbestos, tremolite in floor tiles):

Describe the containment method used to transport the material:

PART C.2 – CONSTRUCTION AND DEMOLITION WASTE, CONCRETE, ASPHALT

Was this material tested for asbestos?

no, provide reason why not: _____.

yes, provide a dated copy of the results and return with application form.

Was the paint tested for leachable lead paint?

no, provide reason why not: _____.

yes, please provide a dated copy of the results and return with application form.

To save landfill airspace, we ask that you segregate the following items for disposal:

- ✓ Metal
- ✓ Clean wood
- ✓ Appliances
- ✓ Light fixtures (product care items should go to KUTE recycling depot)
- ✓ Cardboard (bring to KUTE recycling depot)
- ✓ Concrete
- ✓ Concrete with rebar
- ✓ Asphalt

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PART C.3 – SEPTAGE AND SEWAGE TREATMENT SLUDGE	
Is this bulk water or semi-solid sludge? <input type="checkbox"/> Bulk water <input type="checkbox"/> semi-solid sludge How much material do you intend to dispose? When do you intend on disposing this load? <input type="checkbox"/> 1 time event <input type="checkbox"/> over 2-3 days <input type="checkbox"/> _____week(s)	
PART C.4 – INERT FILL	
Is the application for single fill type or multiple fill types: <input type="checkbox"/> Single <input type="checkbox"/> Multiple <i>Note: Co-mingled inert fill types may be rejected by facility. Generator shall segregate fill types at source site. Clean wood waste (excluding stumps), concrete and asphalt shall be segregated and transported and disposed of separately. Kitimat Landfill does not accept stumps; these should be processed at the source site.</i>	
Physical State: <input type="checkbox"/> Dry <input type="checkbox"/> Damp <input type="checkbox"/> Water Saturated <input type="checkbox"/> Other (describe):	
Odour: <input type="checkbox"/> Strong <input type="checkbox"/> Slight <input type="checkbox"/> None Describe:	
Debris in Fill: <input type="checkbox"/> No <input type="checkbox"/> Yes, Describe:	
Approximate angle of the stockpile (provide explanation of pile stability. Can it hold itself up?):	
Waste Composition: describe all significant fill components followed by approximate composition below	
Component: [e.g. soil texture description (i.e. top soil, sand and gravel, silt)]	Composition (%):
Estimate Start Date (DD-MMM-YY):	Estimate End Date (DD-MMM-YY):

PART C.4.1 - FILL CLASSIFICATION

Is there any reason to believe the inert fill would meet the definition of “contaminated” as defined by the Contaminated Sites Regulation or be leachate generating? <input type="checkbox"/> Yes <input type="checkbox"/> No
If YES, Describe:
Has a representative sample been submitted for analysis? <input type="checkbox"/> Yes, please attach analytical results to application <input type="checkbox"/> No, please explain why. _____.

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PART C.4.2 – ATTACHMENTS Attach any relevant information to assist in the approval process.

<input type="checkbox"/> Analysis <input type="checkbox"/> Leachate Tests <input type="checkbox"/> Photo <input type="checkbox"/> Memo <input type="checkbox"/> Other:	
Laboratory Reference Number:	Number of Pages Attached:

PART C.4.3 - REPRESENTATIVE SAMPLE CERTIFICATION

This section is to be completed by the person responsible for obtaining samples of the above-described fill (if required). I certify that the sample for which the analytical data was provided for the fill described above is representative of the fill and was collected and preserved in a manner consistent with accepted technical standards.		
Name:		Signature:
Company:		Title:
Telephone: ()		Sample collection date:
Single sample:	Composite sample(s):	(# of sample points?):

PART D - GENERATOR'S CERTIFICATION

THIS SECTION TO BE COMPLETED BY AN AUTHORIZED REPRESENTATIVE OF THE GENERATOR. The generator warrants that, to the best of their knowledge, the information provided on this Application is true. The generator acknowledges that, if the waste referred to in this Application is determined to be other than as represented in this Application, the generator, at their sole expense and risk, will attend at such place as the fill is located and remove the fill immediately upon instruction from the District of Kitimat to do so. Failure to remove the waste will entitle the District of Kitimat to deal with the waste in the manner they consider appropriate in the circumstances, at the sole expense and risk of the generator.		
Generator's name:		
Per (authorized signatory):	Name:	Date:

Submit completed applications and their attachments to: engineering@kitimat.ca

or

District of Kitimat City Hall
Engineering Services
270 City Centre
Kitimat B.C., V8C 2H7

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TO BE COMPLETED BY DISTRICT OF KITIMAT ENGINEERING SERVICES

Waste Application Status: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Under Review – More Information Required (see attached)		
Conditions for acceptance:		
Special Handling / Operational Comments:		
Approval No.:	Approved by:	Approval Date:
Suitable for: <input type="checkbox"/> Cover <input type="checkbox"/> Clean Soil Pile <input type="checkbox"/> C&D Area <input type="checkbox"/> Direct Landfill <input type="checkbox"/> Other:		
Was a Separate Soil Relocation Notification Form or Agreement Prepared for this fill : <input type="checkbox"/> Yes <input type="checkbox"/> No		
Was a Separate Regulatory Approval or Notification obtained for this fill: <input type="checkbox"/> Yes <input type="checkbox"/> No		

DISTRIBUTION

1. Original to Applicant
2. Environmental Services Manager
3. Landfill Operating Contractor
4. Central File Number