

**APPLICATION FOR A HAZARDOUS WASTE TREATMENT,
STORAGE AND DISPOSAL PERMIT****Before completing this form, read the step-by-step instructions provided with this form.**

SECTION A. APPLICANT IDENTIFIER			
Applicant's Name			
SECTION B. APPLICANTS MAILING ADDRESS			
Mailing Address			
SECTION C. FACILITY NAME			
Official Facility Name			
SECTION D. EPA I.D. NUMBER			
EPA I.D. Number			
SECTION E. FACILITY LOCATION			
Street or Specific Identifier			Municipality
City or Town	State	Zip Code	County
SECTION F. CONTACT PERSON			
Name, Title			Phone #
SECTION G. FACILITY OWNER			
Name of Facility's Legal Owner			Phone #
Street, and P.O. Box #	City or Town	State	Zip Code
SECTION H. FACILITY OPERATOR			
Name of Facility's Legal Owner			Phone #
Street, and P.O. Box #	City or Town	State	Zip Code
SECTION I. FACILITY OWNER CERTIFICATION			
"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons whom manage the system, or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations."			
_____		_____	_____
Name		Signature	Date
SECTION J. FACILITY OPERATOR CERTIFICATION			
"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations."			
_____		_____	_____
Name		Signature	Date

HAZARDOUS WASTE TREATMENT, STORAGE AND DISPOSAL PERMIT APPLICATION CHECKLIST (PART B PERMIT APPLICATION)

THIS CHECKLIST MUST BE ENCLOSED WITH YOUR APPLICATION FORM.

All TSD facility permit applications must be processed in accordance with the Pennsylvania Hazardous Waste Management regulations Chapter 260a.-270a., and the incorporated Federal Regulations found in 40 CFR Chapters 260-270. Information on the permit program is contained in Chapter 270a. and 40 CFR Part 270. Chapter 264a. and 40 CFR Part 264, address operation and design standards for all types of facilities.

This checklist should be used to assist you in verifying the completeness of your application. The checklist contains the minimum information acceptable to the Department for a permit application, therefore it should not be considered a substitute for a permit application, therefore it should not be considered a substitute for reading and addressing the regulations themselves.

The checklist provided herein will address any and all types of Hazardous Waste TSD facilities. Your first step should be to delete those sections which do not apply to your proposed facility.

For each item that is provided in the checklist, reference the page number or specific place in the application where it is addressed. If the item is not provided, you should explain briefly in the comments column.

REQUESTED INFORMATION

Section

- A. General Information Requirements
- B. Facility Description
- C. Waste characteristics
- D. Process Information
 - 1 Containers
 - 2 Tanks
 - 3 Waste Piles
 - 4 Surface Impoundments
 - 5 Incinerators]
 - 6 Landfills
 - 7 Land treatment
 - 8 Miscellaneous treatment units
 - 9 Boiler/Industrial Furnaces
 - 10 Containment Buildings
 - 11 Drip Pads
- E. Groundwater Monitoring
- F. Procedures to Prevent Hazards
- G. Contingency Plan
- H. Personnel Training
- I. Closure, Post Closure and Financial Requirements
- J. Solid Waste Management Units
- K. Reserved
- L. Part B Certification
- M. Subpart AA process vents
- N. Subpart BB Equipment Leaks
- O. Subpart CC Air Emission Standards
- P. Post-Closure Facility Requirements
- Q. Exposure Information