

Hazardous Waste Handler Seminar

New Jersey State Police Building, Robbinsville, NJ

Prepared by: Bret Reburn
Principal Environmental Specialist
Bureau of Hazardous Waste Compliance & Enforcement
Central Regional Office -Robbinsville, NJ

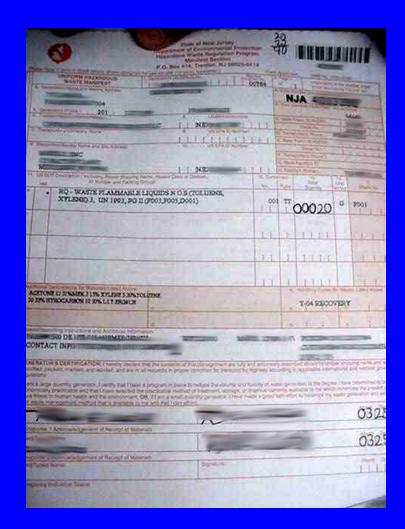
AS OF SEPTEMBER 5, 2006

- New Manifest Form (EPA Form 8700-22)
- New Continuation Form (Form 8700-22A)
- State Agencies NO LONGER provide manifest document
- For instructions, examples, registry, state requirements & method codes open:

http://www.epa.gov/epaoswer/hazwaste/gener/manifest/

Hazardous Waste Manifest New & Old

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Why change?

- Industry requested
- Confusing, burdensome & inconsistency between States waste codes & documents
- Standardizes form for all 50 States
- Preparation for E-manifest
- Printing standardization

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П	20. Design	nated Facility Owner	or Operator: Certificat	ion of receipt of haza	ardous materials cover	red by the mani	fest excer	of as noted in Item	n 18a					
Ш		ped Name					nature					Mor	nth Day	Year
EP.	A Form 870	00-22 (Rev. 3-05)	Previous editions a	are obsolete.				DESIG	SNATED F	ACILITY TO	DESTINA	TION STAT	TE (IF RE	QUIRED

- ITEM 1 Generator EPA ID
- ITEM 2 Page ___ of ___
- ITEM 3 Emergency Response #
 - Generator, Agency or Organization
 - Must be knowledgeable
 - 24 hours/day
- ITEM 4 Manifest Tracking #
 - Unique
 - Preprinted

Ï		rint or type. (Form designed for use on elite (12-pitch) typewriter.) FORM HAZARDOUS 1. Generator ID Number	2. Page 1 of 3. Em	ergency Response	Phone	4. Manifest	Tracking N	umber	OMB No.	
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П	5. Ge	enerator's Name and Mailing Address	Gener	ator's Site Address	(if different th	an mailing addres	8)			
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• ITEM 5 - Generator's:

- Mailing Address

Where manifest to be sent

- Telephone Number

Normal business or authorized agent

- Site Address

Where shipment originates

Only if different than mailing address

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Ш	15.	GENERATOR'S/OFFEROR'S marked and labeled/placarder	CERTIFICATION	t: I hereby declare that the	e contents of thi	s consignment a	re fully an	id accurately de	scribed above	by the proper shi	pping name, If export shi	and are classif	ed, packa the Prima	ged, nv
Ш	l	Exporter, I certify that the con I certify that the waste minimiz	tents of this consi	griment conform to the ter	ms of the attache	ed EPA Acknowle	edgment d	of Consent.						,
Ш	Gen	erator's/Offeror's Printed/Typed		DENINGUIII 40 CFK 2022	r(a) (ii i aiii a iai)		ature	uy (iiram a sina	ii quariny ge	nerator) is true.		Month	Day	Year
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DESIGNATED FACILITY	1 9. I	łazardous Waste Report Mana	gement Method (codes (i.e., codes for haza	ardous waste free	iment, disposal,	and recy	cling systems)						
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h	20. 5	Designated Facility Owner or O	narator Cartifical	ion of receipt of herovdo-	e meteriale on	ad by the monit	act concert	as nated in Hon	190					
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• ITEM 6 - Transporter 1:

- Company Name
- EPA Identification Number
- No vehicle or driver information allowed
- ITEM 7 Transporter 2:
 - Company Name
 - EPA Identification Number
 - No vehicle or driver information allowed
- Transporter 3 Use Continuation Sheet

Ple	898	e print or type. (Form designed for use on elite (12-pitch) typewriter.)						n Approved. C	OMB No. 2	2050-0039
lt	Ľ	WASTE MANIFEST		rgency Response		4. Manifest		umber		
Ш	5	. Generator's Name and Mailing Address	Genera	or's Site Address	if different the	an mailing addres	18)			
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Ш	6	Senerator's Phone: I. Transporter 1 Company Name				U.S. EPAID N	lumber			-
Ш	7	Transporter 2 Company Name				U.S. EPAID N	lumber			
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$\ $	ľ	i. Designated Facility Name and Site Address				U.S. EPA ID N	lumber			
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Ш	9 H	ia. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Contain No.	Type	11. Total Quantity	12. Unit WLAG	13. W	aste Codes	:
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Ш	1/	4. Special Handling Instructions and Additional Information								
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Ш	15	 GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consig 	gnment are fully :	and accurately dee	cribed above	by the proper shi	ipping name	, and are class	ified, packa	ged,
Ш	l	marked and labelediplacarded, and are in all respects in proper condition for transport according Exporter, I certify that the contents of this consignment conform to the terms of the stacked EPA.	Acknowledgmen	of Consent.			if export sh	ipment and I ar	n the Prima	ry
Ш	G	I certify that the waste minimization statement identified in 40 CFR 252.27(a) (if I am a large quan senerator's/Offeror's Printed/Typed Name	Signature	(b) (ii rama sina	i quariny ger	eratory is title.		Month	n Day	Year
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) FAC	Fi	Solity's Phone:				1		Mon		V
DESIGNATED FACILITY	14	8c. Signature of Alfemate Facility (or Generator)						Mon	h Day	Year
ESIG	19	Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste freatment, 12.	disposal, and rec	ycling systems)		4.				
ľ	L									
Ш		Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the finited Typed Name	ne manifest exce Signature	pt as noted in Item	18a			Mont	h Day	Year
H	A F	form 8700-22 (Rev. 3-05) Previous editions are obsolete.								
-17	11	Similar de La prior de des principales de la constante de la c		DESIG	MATED F	ACILITY TO D	JESTINA	HON STAT	e ne RE	wuiked)

• ITEM 8 - TSDF Information

- Company Name
- Site Address
- Telephone Number
- EPA Number

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039 1. Generator ID Number 2. Page 1 of 3. Emergency Response Phone UNIFORM HAZARDOUS WASTE MANIFEST Generator's Name and Mailing Address Generator's Site Address (if different than mailing address) Generator's Phone: 6. Transporter 1 Company Name U.S. EPA ID Number . Transporter 2 Company Name ILS EPAID Number Designated Facility Name and Site Addre U.S. EPA ID Number 9b. U.S. DOT Description (including a, Hazard Class, ID Number, 10. Containers 11. Total 12. Unit 13. Waste Codes and Packing Group (if any)) No. Quantity WL/Vol Special Handling Instructions and Additional Information GENERATOR'S/OFFEROR'S CERTIFICATION: Thereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.

Leatify that the waste minimization statement identified in 40 CFR 252.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Offeror's Printed/Typed Name 16. International Shipments Port of entry/exit: Import to U.S. Export from U.S. Transporter signature (for exports only): Date leaving U.S. 17. Transporter Adknowledgment of Receipt of Materials ransporter 1 Printed/Typed Name Transporter 2 Printed/Typed Name 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator) 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste freatment, disposal, and recycling systems) 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

9a

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

- ITEM 9a Hazardous Materials
 - Place "X" if waste is Hazardous Material
- ITEM 9b USDOT Description
 - USDOT Proper Shipping Name
 - Hazard Class or Division
 - Identification Number (UN/NA)
 - Packing Group
 - Technical Name(s) If applicable
 - Reportable Quantities If applicable

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DESIGNATED FACILITY		_									1	1	
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• ITEM 10 - Containers

- Number
- Types
 - Use required abbreviations
 - Table 1 of instructions has abbreviations

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1	ŀ	JNIFORM HAZARDOUS WASTE MANIFEST	Generator ID No.					ncy Response		4. Manifest	Tracking N	umber		
П	5	. Generator's Name and Mail	ng Address			-	Generator's	Site Address	(if different th	an mailing addre	38)			
	e	Senerator's Phone:				ı								
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DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

ITEM 11 - Total Quantity

- Round to nearest whole unit
- No decimals or fractions
- Use <u>actual</u> measurements for quantities
- Container capacities not acceptable
- Estimates allowed (if accurate)

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lt		NIFORM HAZARDOUS WASTE MANIFEST	Generator ID Nu	mber		2. Page 1 of	3. Emerge	ency Response	Phone	4. Manifest	Tracking N	umber	
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ITEM 12 - Units of Measure

- Weight/Volume
- Use appropriate abbreviations
- Table II of instructions has abbreviations
- ITEM 13 Waste Codes
 - Enter up to 6 Federal Waste Codes (D001, F005, P030 etc.)
 - Non-redundant state codes entered here

Ple	ase pri	int or type. (Form desig	ned for use on el	ite (12-pitch) typewr	iter.)						Form	Approved.	OMB No.	2050-003
†	UNIF	FORM HAZARDOUS ASTE MANIFEST	Generator ID Nu	ımber	•	2. Page 1 of	3. Emer	gency Response	Phone	4. Manifest				
	5. Ge	nerator's Name and Mailin	g Address				Generate	or's Site Address	(if different th	an mailing addres	36)			
	Cone	rator's Phone:				ı								
	6. Tra	ansporter 1 Company Nam	е							U.S. EPAID N	Number			
	7. Tra	neporter 2 Company Nam	е							U.S. EPAID N	lumber			
	8. De	signated Facility Name an	d Site Address							U.S. EPA ID N	lumber			
	Footbe	ty's Phone:												
	9a. HM	9b. U.S. DOT Description and Packing Group (if a		r Shipping Name, Haza	rd Class, ID Number,			10. Contair No.	ners Type	11. Total Quantity	12. Unit WLAG	13. V	Vaste Code	6
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		*										-		
	14. S	pecial Handling Instruction	s and Additional Inf	ormation										
	15.	GENERATOR'S/OFFERO marked and labeled/placar	R'S CERTIFICATIO	ON: I hereby declare the	at the contents of this	s consignment cording to appli	are fully a	nd accurately dem	scribed above	by the proper shi ental regulations.	ipping name, If export shi	and are clas	sified, pack m the Prim	aged, anv
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1	18. Di	iscrepancy												
	18a. C	Discrepancy Indication Spa	ice Quan	tity	Туре			Residue		Partial Rej	ection		Full Rej	ection
ı ∐	18b. A	Alternate Facility (or Gener	ator)				Ma	anifest Reference	Number:	U.S. EPA ID N	lumber			
FACIL	Facilit	ty's Phone:								ı				
DESIGNATED FACILITY	18c. S	Signature of Alternate Facil	ily (or Generator)									Mor	th Da	Year
DESIG	19. Ha	azardous Waste Report M	anagement Method	Codes (i.e., codes for I	hazardous waste free	ilment, disposa 3.	il, and recy	voling systems)		4.				
Ī	20. De	esignated Facility Owner o	r Operator: Certifica	ation of receipt of hazar	dous materials cover	ed by the mani	fest excep	f as noted in Iten	n 18a					
ļ		d/Typed Name	-	•			nature					Mon	th Day	Year
	Form	8700-22 (Rev. 3-05) F	revious editions	are obsolete				DEGL	NIATED E	A CILITY TO I	DECTINA 1	CON CTAT	- ar ne	OLUBER

• ITEM 14 - Special Handling Instructions

- Waste profile
- Container codes
- Bar codes
- Response Guide Numbers
- ITEM 14 Additional Information
 - Chemical names
 - Chemical percentages
 - Physical state

Ple	898	print or type. (Form desig	ned for use on elite (12-pito	h) typewriter.)						Form	Approved.	OMB No.	2050-0039
Ī	u	NIFORM HAZARDOUS WASTE MANIFEST	Generator ID Number	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2. Page 1 of	3. Eme	rgency Response	Phone	4. Manifest				
Ш	5.	Generator's Name and Mailin	ng Address		•	General	on's Site Address	(if different th	an mailing addres	18)			
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Ш	8.	Designated Facility Name an	d Site Address						U.S. EPA ID N	lumber			
\parallel	Fa	adility's Phone:											
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\mathbb{I}	l												
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Ш	L	I certify that the waste min	contents of this consignment con imization statement identified in		rge quantity gen	nerator) or		il quantity ger	nerator) is true.				
Џ	Ge	enerator's/Offeror's Printed/Typ	ped Name		Sig	gnature					Mon	th Day	Year
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			r Operator: Certification of recei	pt of hazardous materials cove	ered by the mani	lfest excep	ot as noted in Item	n 18a					
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ITEM 14 - Additional Information

- Alternate Facility Information
- Manifest Tracking # of Original Manifest
 Rejected loads
 - Rejected residues
 - PCB waste descriptions
 - PCB Out-of-Service Dates
 - Generators <u>not</u> required to enter state required information here

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Ī	_	JNIFORM HAZARDOUS WASTE MANIFEST	Generator ID Number	,,,,,,	2. Page 1 of	3. Emerg	ency Response	Phone	4. Manifest				
Ш	5	. Generator's Name and Mailir	ng Address			Generator	's Site Address	if different the	an mailing addres	18)			
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$\ $	ľ	. Designated Facility Name an	od Site Address						U.S. EPA ID N	lumber			
Ш	F	adity's Phone:											
Ш	9 H	 a. 9b. U.S. DOT Description and Packing Group (if a 		ng Name, Hazard Class, ID Numbe	sr,		10. Contair No.	Type	11. Total Quantity	12. Unit WLAG	13. Wa	ste Codes	
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	14	Ba. Discrepancy Indication Spa	ace Quantity	Туре			Residue	Number	Partial Rej	ection		Full Rejec	tion
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FACI	F	acility's Phone:							1				
DESIGNATED FACILITY	1	Bc. Signature of Alternate Faci	lity (or Generator)								Month	Day	Year
Sign	7	9. Hazardous Waste Report M	anagement Method Codes	(i.e., codes for hazardous waste tre	eatment, disposal,	, and recyc	ding systems)						_
B	1.		2		3.				4.				
Ш			or Operator: Certification of	receipt of hazardous materials cow			as noted in Item	18a					
╙	. P	rinted/Typed Name	<u> </u>		Sign	nature					Month	Day	Year
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• ITEM15 - Generator's/Offeror's Cert.

- Waste Minimization Statement
 Must be read, signed & dated by generator
 Certifies compliance with requirements
 Certifies shipment properly prepared
 Certifies shipment ready for transportation
- Generator or Offeror may write:

 "on behalf of" in signature block
 statement indicating authority to sign

Ple	ase print or ty	pe. (Form desig	ned for use on eli	te (12-pitch) typew	riter.)							Approved.	OMB No.	2050-003
t	UNIFORM	HAZARDOUS MANIFEST	Generator ID Nu	mber		2. Page 1 of	3. Eme	rgency Response	Phone	4. Manifest	Tracking Nu	mber		
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l	Generator's F	Phone:					l							
ı	6. Transporte	r 1 Company Nam	e							U.S. EPAID N	lumber			
l	7. Transporte	r 2 Company Nam	e							U.S. EPAID N	umber			
l	8. Designated	Facility Name an	d Site Address							U.S. EPA ID N	lumber			
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SIGNATED	19. Hazardou	s Waste Report M	anagement Method I	Codes (i.e., codes for	hazardous waste freet	tment, disposa	al, and rec	yoling systems)						
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١			r Operator: Certifical	lion of receipt of haza	rdous materials covere			ot as noted in Item	n 18a					
Ţ	Printed/Typed	name				sig	gnature					Mar	nth Day	Year

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

16

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

• ITEM 16 - International Shipments

- Primary exporter must:
 - Check export box
 - Enter point of exit from U.S.
- Importer must:
 - Check import box
 - Enter point of entry into U.S.
- Transporters of exports must sign/date

Pk		nt or type. (Form desig	ned for use on el	lite (12-pitch) typewri	iter.)							Approved.	OMB No.	2050-00
۱t	UNIE	FORM HAZARDOUS ASTE MANIFEST	Generator ID No.	umber		2. Page 1 of	3. Eme	rgency Response	Phone	4. Manifest	Tracking No	umber		
Ш	5. Ge	nerator's Name and Maili	ng Address			•	General	or's Site Address	(if different th	nan mailing addres	38)			
Ш														
Ш	Gene	rator's Phone:												
۱	6. Tra	insporter 1 Company Nan	1e							U.S. EPAID N	Number			
۱	7. Tra	nsporter 2 Company Nam	10							U.S. EPAID N	lumber			
Ш	8. De	signated Facility Name ar	nd Site Address							U.S. EPA ID N	lumber			
Ш														
Ш	Footb	ty's Phone:								1				
Ш	98.	9b. U.S. DOT Descripti	on (including Proper	r Shipping Name, Hazar	d Class, ID Number,			10. Contair	ners	11. Total	12. Unit	13.1	Waste Code	60
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Ш	15.	GENERATOR'S/OFFERO	R'S CERTIFICATION	DN: I hereby declare th	at the contents of this	s consignment	are fully a	nd accurately des	cribed above	e by the proper shi	ipping name	, and are clas	sified, paci	kaged,
Ш		marked and labeled/placa Exporter, I certify that the	contents of this cons	signment conform to the	terms of the attache	d EPA Acknow	rledgment	of Consent.			if export shi	ipment and I a	m the Prin	nary
Ш		certify that the waste mir rator's/Offeror's Printed/Ty		identified in 40 CFR 26	2.27(a) (if I am a larg		erator) or mature	(b) (if Iam a sma	il quantily ge	nerator) is true.		Mon	th Day	y Year
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П		esignated Facility Owner of d/Typed Name	or Operator: Certifica	ation of receipt of hazar	dous materials cover		fest excep ynature	ot as noted in Item	18a			Mor	th Day	y Year
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ΕP	Form	8700-22 (Rev. 3-05) I	Previous editions	are obsolete.				DESIG	NATED E	ACILITY TO I	DESTINA	TION STAT	E (IE RI	FOLURE

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

• ITEM 17 -

Transporter Acknowledgments of Receipt

- Transporter(s) must sign and date
- Transporter(s) of imports <u>and</u> exports may need to to enter information into the "International Shipments" block

Pk	9899	e print or type. (Form desig	ned for use on elite (12-pi	tch) typewriter.)						Form	Approved. (OMB No. 2	2050-0039
[1	_	UNIFORM HAZARDOUS WASTE MANIFEST	Generator ID Number	,	2. Page 1 of	3. Emer	gency Response	Phone	4. Manifest	Tracking Nu	ımber		
Ш	5	5. Generator's Name and Mail	ng Address		(Generato	n's Site Address	(if different th	an mailing addres	18)			
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Ш		Generator's Phone: 5. Transporter 1 Company Nan	16						U.S. EPAID N	lumber			
Ш	7	7. Transporter 2 Company Nan	ie .						U.S. EPA ID N	lumber			
Ш	8	B. Designated Facility Name ar	nd Site Address						U.S. EPA ID N	lumber			
Ш													
Ш	F	Fadility's Phone:											
Ш		9a. 9b. U.S. DOT Descript and Packing Group (if:	ion (including Proper Shipping any))	Name, Hazard Class, ID Number,			10. Contair No.	Type	11. Total Quantity	12. Unit WLAVal.	13. W	Vaste Codes	ŧ
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Ш	ľ	marked and labeled/placa Exporter, I certify that the	rded, and are in all respects in contents of this consignment o	proper condition for transport accommon to the terms of the attached	ording to applica d EPA Acknowle	able inter adgment	national and national of Consent.	onal governm	ental regulations.				
Ш	G	I certify that the waste mir Generator's/Offeror's Printed/Ty	imization statement identified ped Name	in 40 CFR 262:27(a) (if I am a larg	e quantily gene Sign	rator) or a ature	(b) (if Iam a sma	Il quantity ger	nerator) is true.		Mont	h Day	Year
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E L	1	Facility's Phone: 18c. Signature of Alternate Fac	fity (or Generator)						1		Mon	th Day	Year
DESIGNATED		19. Hazardous Waste Report M	anagement Method Codes (i.e	e., codes for hazardous waste treat	ment, disposal,	and recy	cling systems)						
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$\ $		20. Designated Facility Owner i	or Operator: Certification of rec	eipt of hazardous materials covere		est except ature	t as noted in Item	18a			Mon	th Day	Year
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18a

ITEM 18a - Discrepancy Indication

- TSDF note any differences
 - Quantity & Type (significant is defined)
 - Rejected wastes (full or partial)
 - Rejected container residues
- TSDF give reason for any rejection
- TSDF give reason for inability to remove
- TSDF enter other tracking number(s)
- TSDF send letter 15-days, if unresolved

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П	7. Tra	nsporter 2 Company Nan	ne						U.S. EPA ID I	Number			
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Ш		Exporter, I certify that the	irded, and are in all respects contents of this consignment	conform to the terms of th	e attached EPA Acknow	ledgment d	Consent.			. If export ship	ment and I am 1	he Primary	1
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18b

18c

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

ITEM 18b - Alternate Facility Receipt

- For full load rejections
- Alt.Fac. name, address, phone, EPA ID #
- Generators information (if sent back)
- Not for partially rejected loads or residues

• ITEM 18c - Alternate Facility Signature

- Alternate Facility/Generator sign here

Ple	ase pri	int or type. (Form desig			iter.)							n Approved. (OMB No.:	2050-003
lŧ		FORM HAZARDOUS ASTE MANIFEST	Generator ID No.	umber		2. Page 1 of	3. Emerge	ency Response	Phone	4. Manifest	Tracking N	umber		
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- ITEM 19 Management Method Codes
 - TSDF enter treatment codes (each waste)

- ITEM 20 Designated Facility Signature
 - Designated individual print/sign/date
 - Sign even if rejecting

RULE HIGHLIGHTS

Generator Requirements

- Prepare manifest [262.20(a)1]
- Designate alternate facility/accept waste back if undeliverable [262.20(d)]
- Use approved manifest form [262.21(g)1]
- Determine if consignment state requires copies or regulates additional wastes [262.21(g)2]
- Complete Item 15 to certify generator status [262.27]

Generator Requirements

- Returned shipments using <u>original</u> manifest
 sign at Item 18c upon receipt [262.34 m]
- Returned shipments using <u>new</u> manifest sign at Item 20 upon receipt [262.34 m]

Transporter Requirements

- Exported waste ensure waste accompanied by manifest <u>and</u> conforms to EPA Acknowledgement of Consent [263.20(a)]
- Unable to deliver waste due to emergency other than rejection contact generator for instructions/revise manifest [263.21(b)1]
- Shipment rejected while transporter still on site comply with the applicable requirements of 40 C.F.R. 263.21(b)2

TSDF Requirements

- Upon receipt of waste owner, operator <u>or</u> <u>agent</u> must:
 - Sign and date all copies
 - Note any discrepancies
 - Give transporter copy
 - Send copy to generator within 30 days
 - Retain copies for 3 years [264.71(a)2]
- Send copy to Department within 30 days receipt of imported waste [264.71(a)3]

TSDF Requirements

- Determine if consignment state requires copies or regulates additional wastes [264.71(e)]
- Reconcile significant manifest discrepancies with generator within 15 days or inform DEP [264.72(c)]
- Rejecting waste or if container residue exceeds quantity for "empty" [264.72(d)]

TSDF Requirements

- Full or partial load rejections to be sent to an alternate facility [264.72(e)]
- Instructions for rejected wastes and residues that must be sent back to the generator [264.72(f)] Updated as per attached memo
- Rejecting waste or if container residue exceeds quantity for "empty" after manifest signed, dated and returned [264.72(g)]

New Jersey Requirements

- Proposed to be removed in N.J.A.C. 7:26G:
 - 6.1(c)5 (properly completing)
 - 6.1(c)9 (copy submittal)
 - 6.2 (hierarchy)
 - 6.3(a)1, 6.3(a)1i, 6.3(a)1ii, 6.3(a)2, 6.3(b) and 6.3(c) (rejections)

Contact Names and Web Links

• EPA Office of Solid Waste - Bryan Groce

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e-mail groce.bryan@epa.gov

Wanda LeBleu

Tel. (703) 308-0438 e-mail lebleu.wanda@epa.gov

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Main (609) 292-7081 Direct (609) 984-2161

http://www.nj.gov/dep/dshw/hwr/manfstmw/mmwgru.htm 45