



Notification and Reporting Form
Bureau of Land & Waste Management
Hazardous Waste Compliance and Enforcement Section
2600 Bull Street, Columbia, SC 29201

(Official Use Only)

Federal \_\_\_\_\_

State \_\_\_\_\_

Status \_\_\_\_\_

Fee Paid \_\_\_\_\_

Refer to the INSTRUCTIONS. Important Note: This form will supersede all previous forms submitted by your company. Provide information on all current activities at your company.

Company's EPA ID Number:

Grid for EPA ID Number

I. First Notification or Subsequent Notification: Mark "X" in the appropriate box to indicate whether this is your company's First Notification of regulated waste activity or a Subsequent Notification.

- A. First Notification: (To obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).
B. Subsequent Notification: (Complete Company's EPA ID Number Box and information that has changed).
1. Small Quantity Generator Annual Declaration Year
2. Business Closed At This Location (EPA ID# will be deactivated)
3. No Hazardous Waste business still open (EPA ID# will be deactivated)

II. Name of Company (Include company specific site name)

Blank line for company name

III. Location of Company (Physical address not P.O. Box or Route #)

Street:
City: State: Zip Code:
County:

IV. Land Type: Private County District Federal Tribal Municipal State Other

V. North American Industry Classification (NAICS) Codes(s): A. B.

VI. Company's Mailing Address:

Street:
City: State: Zip Code:

VII. Company's Contact Person (Person to be contacted regarding waste activities)

Last: First:
Title: Phone:
Street: City: State: Zip Code:
Email:

VIII. Name of Company's Legal Owner

Street: Phone:
City: State: Zip Code:
Change of Owner: Yes No Date Changed:
Owner Type: Private County District Federal Tribal Municipal State Other

IX. Name of Company's Operator

Street: Phone:
City: State: Zip Code:
Change of Operator: Yes No Date Changed:
Operator Type: Private County District Federal Tribal Municipal State Other

Company's EPA ID Number

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X. **Type of Regulated Waste Activity** (Mark "X" in the appropriate boxes. Refer to instructions).

**A. Hazardous Waste Activity**

- 1. Generator (choose only one of the following three categories)
  - a. LQG: Greater than 1000 kg/mo (2,200 lbs.)
  - b. SQG: 100 to 1000 kg/mo (220-2,200 lbs.)
  - c. CESQG: Less than 100 kg/mo (220 lbs.)

In addition, indicate other generator activities (check all that apply)

- d. Store Waste in
    - Tanks
    - Containers
    - Drip Pads
    - Containment Buildings
  - e. United States Importer of Hazardous Waste
  - f. Mixed Waste (hazardous and radioactive) Generator
- 2. Transporter of Hazardous Waste (NOTE: A permit is required for this activity)  Transporter  Transfer facility
  - 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) (NOTE: A permit is required for this activity; see instructions)  On-site Facility  Off site Facility  
Indicate Type(s) of Activities  Treater  Disposer  Storer
  - 4.  Recycler of Hazardous Waste (at your site) (NOTE: A hazardous waste permit may be required for this activity)
  - 5. Exempt Boiler and/or Industrial Furnace
    - a. Small Quantity On-site Burner Exemption
    - b. Smelting, Melting, Refining Furnance Exemption
  - 6.  Receives Hazardous Waste from Off-site

**B. Universal Waste Activities**

1. Large Quantity Handler of Universal Waste (refer to Regulations to determine what is regulated). Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply):

- a. Batteries
- b. Pesticides
- c. Thermostats
- d. Lamps
- e. Other (specify)  \_\_\_\_\_

2.  Destination Facility of Universal Waste (NOTE: A hazardous waste permit may be required for this activity)

**C. Used Oil Activities**

- 1. Used Oil Transporter - Indicate Types(s) of Activity(ies) (NOTE: A permit is required for this activity)
  - a. Transporter
  - b. Transfer Facility
- 2. Used Oil Processor and/or Re-refiner - Indicate Types(s) of Activity(ies)
  - a. Processor
  - b. Re-refiner
- 3.  Off-Specification Used Oil Burner
- 4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies)
  - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
  - b. Marketer Who First Claims the Used Oil Meets the Specifications

**D. Eligible Academic Entities with Laboratories** - Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to R.61-79.262 Subpart K  
You must check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to R.61-79.262 Subpart K.

- 1. Opting into R.61-79.262 Subpart K for the management of hazardous wastes in laboratories  
 See the item-by-item instructions of types of eligible academic entities. Mark all that apply:
  - a. College or University
  - b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
  - c. Non-profit institute that is owned or has a formal written affiliation agreement with a college or university
  
- 2. Withdrawing from R.61-79.262 Subpart K for the management of hazardous wastes in laboratories

**E. Hazardous Secondary Material (HSM) Activity - SOUTH CAROLINA HAS NOT ADOPTED THIS REGULATION AT THIS TIME.**

**XI. Comments**

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**XII. Description of Regulated Waste** (Use additional sheets if necessary)

**A. Characteristics of Nonlisted Hazardous Wastes.** Mark "X" in the boxes corresponding to the characteristics of nonlisted hazardous wastes your company handles.

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s). Continue in Section B if necessary).																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>																				

**B. Listed Hazardous Wastes or Other Wastes .** (See instructions)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
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<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
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**XIII. 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 the 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 a fine and imprisonment for knowing violations.

I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimized the present and future threat to human health and the environment.

I also certify the out-of-state generators utilizing this facility have programs in place to reduce the volume or quantity and toxicity of waste using a method currently available which minimized the present and future threat to human health and the environment.

Signature	Name and Official Title (type or print)	Date Signed
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**Company's EPA ID Number**

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**XIV. Description of Regulated Wastes Continued** (Additional sheet)

B. Listed Hazardous Waste or other Wastes (Use this page only if you need to list more than 12 waste codes.)

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
49	50	51	52	53	54
55	56	57	58	59	60
61	62	63	64	65	66
67	68	69	70	71	72
73	74	75	76	77	78
79	80	81	82	83	84
85	86	87	88	89	90
91	92	93	94	95	96
97	98	99	100	101	102
103	104	105	106	107	108
109	110	111	112	113	114