New Jersey Department of Environmental Protection

Site Remediation and Waste Management Program
Division of Solid and Hazardous Waste

TEMPORARY DEBRIS MANAGEMENT AREA
PRE-APPROVAL REQUEST FORM

Instructions:

- For information on completing this form please see the "Temporary Debris Management Area Form Instructions" available at: http://www.state.nj.us/dep/dshw, or contact the Division of Solid and Hazardous Waste at (609) 633-1418.
- E-mail completed form with attachments to: solidwasteemergencies@dep.nj.gov or fax to: (609) 984-0565 or send via regular mail to: NJ Department of Environmental Protection, Division of Solid and Hazardous Waste, Mail Code 401-02C, PO Box 420, Trenton, NJ 08625-0420.

Applicant

Requesting Entity: _____

Mailing Address: _____

Municipality: _____ Zip Code: _____

Primary Contact

Name: _____ Title: _____

Office Phone Number: _____ Ext: _____ Fax: _____

Cell phone Number: _____

Email Address: _____

Proposed Location of Temporary Debris Management Area (TDMA)

Site Name (if appropriate): _____

Street Address: _____ County: _____

Block: _____ Lot(s): _____

Block: _____ Lot(s): _____

Current Use of Site: _____

1. Is the property owned by the entity requesting approval? .... ☐ Yes   ☐ No
   If "**No**",

   - Provide the name of the property owner:

     Property Owner Name: _____

   - Attach a copy of the written agreement between the entity requesting approval and the property owner which allows use of the property for a TDMA.

2. Will other government entities be permitted to use the site? .... ☐ Yes   ☐ No
   If "**Yes**",

   - List the government entities that will be permitted to use the site:

     _____

   - Attach a shared service agreement which allows the above entities to use the site.

3. Describe security measures that will be taken to prevent unauthorized access to the site (i.e., fence, gate, police patrol, etc.):

4. Describe measures to control dust emissions (e.g., water truck, hosing, paved road, truck tarping, etc.):

STORAGE AREAS

Vegetative Debris
1. Will vegetative debris be processed on site? .... ☐ Yes   ☐ No
2. **Unprocessed** Vegetative Waste Number of stockpiles: _____ Each *unprocessed* waste stockpile will be: Length _____ x Width _____ x Height _____ *(in feet)*
3. **Processed** Vegetative Waste Number of stockpiles: _____ Each *processed* waste stockpile will be: ..... Length _____ x Width _____ x Height _____ *(in feet)*
4. Stockpile(s) will be located on: ☐ Grass   ☐ Gravel   ☐ Other (specify): _____
Construction and Demolition Debris
1. Number of stockpiles: _____
2. Each stockpile will be: .... Length _____ x Width _____ x Height _____ *(in feet)*
3. Stockpile(s) will be located on: ☐ Asphalt   ☐ Concrete   ☐ Grass   ☐ Gravel   ☐ Other (specify): _____
4. Will waste be stored in containers? .... ☐ Yes   ☐ No If "**Yes**", what type of container? _____ Number of containers: _____   Size of containers: _____ *(yd³)*
Bulky Solid Waste
1. Number of stockpiles: _____
2. Each stockpile will be: .... Length _____ x Width _____ x Height _____ *(in feet)*
3. Stockpile(s) will be located on: ☐ Asphalt   ☐ Concrete   ☐ Grass   ☐ Gravel   ☐ Other (specify): _____
4. Will waste be stored in containers? .... ☐ Yes   ☐ No If "**Yes**", what type of container? _____ Number of containers: _____   Size of containers: _____ *(yd³)*
White Goods
1. Number of stockpiles: _____
2. Each stockpile will be: .... Length _____ x Width _____ x Height _____ *(in feet)*
3. Stockpile(s) will be located on: ☐ Asphalt   ☐ Concrete   ☐ Other (specify): _____
4. Will waste be stored in containers? .... ☐ Yes   ☐ No If "**Yes**", what type of container? _____ Number of containers: _____   Size of containers: _____ *(yd³)*

Household Hazardous Waste
Note: Household Hazardous Waste must be stored in containers
1. Type of containers: _____
2. Number of containers: _____   Size of containers: _____ *(yd³)*
3. Container will be located on:
☐ Asphalt   ☐ Concrete   ☐ Other (specify): _____
E-Waste
Note: E-Waste must be stored in containers
1. Type of containers: _____
2. Number of containers: _____   Size of containers: _____ *(yd³)*
3. Container will be located on:
☐ Asphalt   ☐ Concrete   ☐ Other (specify): _____
Municipal Solid Waste (**Putrescible**)
Note: Municipal Solid Waste must be stored in containers
1. Type of containers: _____
2. Number of containers: _____   Size of containers: _____ *(yd³)*
3. Container will be located on:
☐ Asphalt   ☐ Concrete   ☐ Other (specify): _____

ATTACHMENTS

The following items must be submitted with this form:

- **Site Drawing –** Please review the Site Drawing requirements listed in the TDMA Instructions.
- **Photographs –** Please submit current photographs of the site which show existing conditions. (Google Earth or other satellite images are not sufficient.)

Indicate the date the photos were taken: _____

Note: An additional technical review of the TDMA site will be conducted by the Department. The Department will coordinate obtaining approvals from Historic Preservation, Stormwater Management, Endangered Species, Freshwater Wetlands, Flood Hazard Areas, the Pinelands Commission (if applicable), and the Highlands Council (if applicable). Additional information may be requested.

CERTIFICATIONS AND ENDORSEMENTS

Note: The local fire official and the County OEM Office may sign off below or attach separate endorsements from each official:

Certification by Mayor, Public Works Supervisor, or local OEM of entity requesting approval
"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information and that submitting false information may be grounds for termination of any approval granted. I agree to abide by the conditions stipulated in any approvals issued for the operation of this site as a TDMA." **Signature:** _____ **Date:** _____ **Name / Title:** _____

Local Fire Official
I have reviewed the information contained on this form and have no objections to the use of the site as a TDMA. **Signature:** _____ **Date:** _____ **Name / Title:** _____

County Office of Emergency Management
I have reviewed the information contained on this form and have no objections to the use of the site as a TDMA. **Signature:** _____ **Date:** _____ **Name / Title:** _____

Additional Information: