Requirements for Hazardous Waste Transporters

PLEASE READ CAREFULLY

The New Jersey Department of Environmental Protection (NJDEP) requires ALL solid and medical waste transporters to register with the Department prior to picking up or disposing of waste in New Jersey. (see N.J.S.A. 13:1E-1 et. seq., N.J.A.C. 7:26G-7). A courtesy copy of New Jersey’s waste regulations may be found at http://www.nj.gov/dep/rules

- Transporters hauling self-generated waste must complete the “AFFIDAVIT OF AN EXEMPT GENERATOR UNDER N.J.S.A. 13:1E-127g(1) through (7)” which must then be notarized and attached to the application. Alternatively you can be interviewed by an authorized county agency listed on the web site http://www.nj.gov/dep/dshw/hwr/swcountyinterviewlist.pdf

- Transporters hauling waste generated by another person or business are required to obtain an “A-901 License” and a Certificate of Public Convenience and Necessity (“CPCN”). Forms and information on these requirements may be downloaded from the Unit Resources dropdown link found at http://www.nj.gov/dep/dshw/hwr/rego/liclic/lru.htm. For A-901 questions please contact the Office of the Attorney General at (609) 292-6018. For CPCN questions please contact NJDEP’s Economic Regulation Unit at 609-984-6985. Note: An A901 licensed transporter cannot apply to become self-generator unless they first surrender their A901 license and CPCN.

- Pursuant to N.J.S.A. 54:50-24 et seq, your information will be shared with the Division of Taxation who will verify all tax issues are resolved as detailed in attached letter from their agency. Your application will not be processed until we receive such clearance.

- Vehicles must be registered as “Commercial” with the motor vehicle agency. Passenger (“Pass”) or Passenger-Commercial (“Pass-Com”) vehicle registrations are not acceptable and your application will be returned.

If your application package is approved and deemed administratively complete, it will be processed and entered into the NJDEP computer system. Subsequently a bill will be sent to you from the Department of Treasury which can be paid online or you can mail them a check. The decals will not be mailed until this bill has been paid in full. Be advised this process may take up to 8-10 weeks and you cannot legally transport waste until you have received your decal(s) and affixed them to your equipment.

If your application package is not approved or is submitted incompletely, NJDEP will mail you a Notice of Deficiency listing the missing items or requesting that you schedule a face-to-face interview at NJDEP.

If you have any questions please call 609-292-7081. You can also obtain additional information at the web site http://www.nj.gov/dep/dshw/hwr/rego/liclic/lru.htm.

There is no direct cost associated with obtaining hazardous waste transporter decals. However, each year you will be assessed a fee for each ton of waste transported the previous year. More information is available on the web site: http://www.nj.gov/dep/enforcement/hw-fees.html
# Initial Application to Become a Registered Hazardous Waste Transporter

**FOR NJDEP Use Only:**

<table>
<thead>
<tr>
<th>NJDEP Registration #</th>
<th>NJEMS Program Interest #</th>
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<table>
<thead>
<tr>
<th>Company Name:</th>
<th>Alternate Name:</th>
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<tr>
<th>Physical Address:</th>
<th>City:</th>
<th>State:</th>
<th>Zip:</th>
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<tr>
<th>Mailing Address:</th>
<th>City:</th>
<th>State:</th>
<th>Zip:</th>
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<tr>
<th>Contact Name-Last:</th>
<th>First:</th>
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<tr>
<th>Office Phone:</th>
<th>Fax:</th>
<th>Cell Phone:</th>
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<table>
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<tr>
<th>E-Mail Address:</th>
<th>Organization Type (Circle One):</th>
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### Social Security Number:

<table>
<thead>
<tr>
<th>Name Federal Employer ID #:</th>
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<table>
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<tr>
<th>Incorporation Date:</th>
<th>County:</th>
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<tr>
<th>A-901 Approval Date (if applicable):</th>
<th>Previous DEP registration #:</th>
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<tr>
<th>USEPA ID #:</th>
<th>USDOT #:</th>
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<tr>
<th>For leased equipment, Lessor's USDOT number(s):</th>
<th>(Attach additional sheets if needed)</th>
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### Type of Insurance Coverage (Circle One):

- MCS-90
- MCS-82
- Commercial Liability
- Other:

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<tr>
<th>Insurance Company Name:</th>
<th>Policy #:</th>
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**Is the firm seeking a license in compliance with the minimum financial responsibility requirements covering public liabilities, property damage and environmental restoration set out in Section 30 of the Federal Motor Carrier Act of 1980 (23 USC 315) and 49 CFR 387 as adopted?** Circle Answer: **Yes No**

**Has any owner, officer or employee of the firm seeking a license, been convicted of any criminal offense under state or federal law for acts or omissions involving the illegal handling, storage, transportation, processing or disposal of hazardous waste or for transactions involving hazardous waste in the last ten years (N.J.A.C. 7:26 G-7.2(a) 2,ii)?** Circle Answer: **Yes No**

**Have all transporter employees who will handle hazardous waste successfully completed a program of instruction that teaches them to perform their duties in a way that ensures the transporter's compliance with the New Jersey Hazardous Waste Regulations?** (Hazardous Materials Transportation Act, 49 CFR Parts 171 through 180 as amended or supplemented & N.J.A.C. 7:26 G-7.3) Circle Answer: **Yes No**

### EQUITY (COMPANY OWNERSHIP)

- "Equity" means any ownership interest in a business. It includes sole proprietorship, partner’s shares, and stock in corporations. The form of ownership interest should be indicated in your answers below under the heading, Type of Equity, state whether shares are voting or non-voting. Attach additional sheets if needed.

<table>
<thead>
<tr>
<th>Name</th>
<th>Federal Employer ID #:</th>
<th>Type of Equity</th>
<th>% of Total Equity</th>
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</table>

**CERTIFICATION:** I hereby certify that the foregoing statements are true and I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment which may take the form of monetary penalties or revocation. I will notify the Department, in writing, of any changes to the information within this registration statement within thirty days. Furthermore, I certify that I am responsible for providing insurance for public liability and environmental restoration for any equipment registered with the Department to transport solid and/or medical waste, whether owned or leased. I authorize the New Jersey Department of Environmental Protection to confirm liability coverage with my insurance company. I further certify my company has the proper authority to operate on the public highways. I also acknowledge that pursuant to N.J.S.A. 54:50-24 et seq. my information will be shared with the Division of Taxation to verify there are no outstanding tax issues and understand my application will not be reviewed until such issues are resolved.

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<tr>
<th>Printed Name</th>
<th>Signature</th>
<th>Title</th>
<th>Date Signed</th>
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</table>
**EQUIPMENT:** Please list below each piece of equipment to be used for transporting waste. For all such equipment (except containers) YOU MUST INCLUDE A COPY OF MOTOR VEHICLE REGISTRATION AND PROOF OF INSURANCE. Passenger or Pass-Comm vehicle registrations are not acceptable.

- **VIN**: Vehicle Identification Number as it appears on the Motor Vehicle registration
- **OVERNIGHT ADDRESS**: Where vehicle is parked overnight
- **STATE**: Which issued motor vehicle registration
- **LICENSE PLATE NO.**: Permanent License Plate Number

<table>
<thead>
<tr>
<th>Vehicle Type * (Circle Letter)</th>
<th>License Plate #</th>
<th>State</th>
<th>Leased YES* or NO (Circle Answer)</th>
<th>DEP USE ONLY DECAL #</th>
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<tbody>
<tr>
<td>VIN:</td>
<td>S M T</td>
<td></td>
<td>Yes</td>
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<tr>
<td>OVERNIGHT ADDRESS (Where vehicle can be inspected, NO PO Boxes):</td>
<td>S M T</td>
<td>Yes</td>
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<td>Yes</td>
<td>No</td>
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</table>

Quantity of Container Decals Needed: ________________

XX XXXXXXXX XXXXX YES OR NO

**EQUIPMENT TOTALS:** SINGLE (S): _____ CAB (M): _____ TRAILER (T): _____ CONTAINER (C): _____
STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
AFFIDAVIT OF AN EXEMPT GENERATOR UNDER N.J.S.A. 13:1E-127g(1) through (7)

I, the undersigned, am the duly authorized representative of __________________________ an applicant for a hazardous waste registration from the New Jersey Department of Environmental Protection. I hereby certify that the applicant named above is EXEMPT from the requirement to submit a disclosure statement for the following reason(s):

[ ] Public Entity - The applicant is a State department, division, agency, commission or authority, or county, municipality or agency representing the State of ____________________; or Federal government.

[ ] Self-Generator - The application is solely for the collection, transportation, treatment, storage or disposal of hazardous waste generated by the applicant who is NOT a commercial waste business.

[ ] Hazardous Waste FACILITY
   (Capacity) The applicant is for the operation of a hazardous waste facility, if at least 75% of the total design capacity of that facility is utilized to treat, store or dispose of hazardous waste generated by the applicant.

[ ] Hazardous Waste FACILITY
   (Classification) The applicant is for the operation of a hazardous waste facility, which is considered as such solely as the result of the recycling or refining of hazardous wastes which are or contain the following precious metals: gold, silver, osmium, platinum, palladium, iridium, rhodium, ruthenium, or copper.

[ ] Hazardous Waste TRANSPORTER
   (Classification) The application is solely for the transportation of hazardous waste, which are or contain precious metals (as described above) to a hazardous waste facility (as described above) for the purposes of reclamation.

[ ] Management of Activated Carbon - The application is solely for the collection, transportation, treatment, storage or disposal of granular activated carbon used in the absorption of hazardous waste.

Please provide a brief description of the services offered by your company (Please PRINT and write clearly in the spaces below):

______________________________________________

Please identify all other licenses, authorities, permits or approvals to transport waste in other states:

____________________________________________________________________________________________________________

I certify that waste generated by my business is completely self-generated. I certify that I shall not receive nor transport waste from third parties. I hereby swear (or affirm) that the statements, brief description and attached interview notes made and answered by me are true. I am aware that if any of these statements and brief description made by me is willfully false, then I am subject to criminal prosecution for false swearing; and that filing a fraudulent affidavit could result in the assessment of civil penalties of not less than $40,000 or more than $50,000.

Print Name & Title as the Company Official __________________________ Signature __________________________ Date __________ Telephone Number __________

Notary Stamp Below

State of ________ County of __________________________

Sworn to and subscribed before me this _______day of ______________________ 20______

___________________________

Print Name of Notary Public

___________________________

Signature of Notary Public
Registered Non-Government NJDEP Transporters must have the authority to operate as a transporter on the public highways and meet any applicable State or Federal Insurance requirements. In addition, pursuant to N.J.A.C. 7:26.3.2(l) and N.J.A.C. 7:26G-7.2(b)(7), permittees, licensees and exempt transporters shall, for purposes of solid waste and hazardous activities respectively and to the extent provided for under New Jersey law, be responsible for the actions and omissions of their lessors and their vehicle operators.

Provide a copy of your MCS-90 or MCS-82 (listing your company with vehicle information), or a Certificate of Insurance (listing your company as insured with the vehicle info or the phrase, "any vehicle").

Pursuant to N.J.A.C. 7:26G-7.2(a)(2)i proof of compliance with the minimum financial responsibility requirements covering public liabilities, property damage and environmental damage set out in 49 C.F.R. Part 387

Pursuant to N.J.A.C. 7:26 3.2(a)(6), registered Transporters must comply with NJMVC rules and regulations.

NOTE: Insurance cards or certificates of insurance will only be accepted from “intrastate” only, transporters.

**Additional Information & Guidance for Acceptable Proof of Insurance:**

The Federal Motor Carrier Safety Administration (FMSCA) has web sites to provide guidance in regards to minimum levels of financial responsibility for motor carriers. Their home page can is located at: [http://www.fmcsa.dot.gov/](http://www.fmcsa.dot.gov/)

For specific motor carrier questions you can contact the FMSCA at:

[http://www.fmcsa.dot.gov/about/contact/who-to-contact/contactus.htm](http://www.fmcsa.dot.gov/about/contact/who-to-contact/contactus.htm)

[http://www.fmcsa.dot.gov/about/contact/offices/displayfieldroster.asp](http://www.fmcsa.dot.gov/about/contact/offices/displayfieldroster.asp)

For Hazardous Waste and Interstate Solid Waste Transporters

**Question:** Is the financial responsibility requirement met when an owner-operator (lessor) provides the motor carrier (lessee) a copy of the policy and Form MCS-90 where the carrier is named as an additional insured to the policy (Form MCS-90)?

**Answer:** Guidance: No. The motor carrier has the responsibility to obtain the proper financial responsibility levels.


**Question:** What is the difference between interstate commerce and intrastate commerce?

**Answer:** Interstate commerce is trade, traffic, or transportation involving the crossing of a State boundary. Either the vehicle, its passengers, or cargo must cross a State boundary, or there must be the intent to cross a State boundary to be considered an interstate carrier. Intrastate commerce is trade, traffic, or transportation within a single State.

[http://www.fmcsa.dot.gov/about/other/faq/faqs.asp#name2](http://www.fmcsa.dot.gov/about/other/faq/faqs.asp#name2)

This material is abbreviated and being supplied for informational purposes only. You are still obliged to exercise due diligence and are responsible to meet any and all applicable rules and regulations of the appropriate governmental agencies. For example as a registered FMCSA Motor Carrier, leases supplied to the NJDEP may also be subject to Federal Leasing requirements under 49 CFR Part 376.

As a NJDEP Registered Transporter you are responsible for the actions and omissions of all vehicles operated under your exclusive use, possession, and control. Insurance to protect the public and provide for environmental restoration in the event of an accident is required under New Jersey regulations.

**Be advised that the New Jersey Department of Environmental Protection may contact your insurance company to confirm liability coverage.**
The New Jersey Division of Taxation (Taxation) will review your State tax account as part of the New Jersey Department of Environmental Protection (NJDEP) application.

Taxation must issue a clearance to NJDEP in order for your application to be processed.

What do you need to know?

1. Your business must be registered with the NJ Division of Revenue (NJDOR).
2. Your business must be registered for employer tax purposes with Taxation (employer withholding tax, Unemployment/Disability, Sales & Use tax, etc.), if applicable.
3. Corporate charters must be in good standing, if applicable.
4. Waste hauling is subject to Sales Tax in New Jersey.

What should you do?

1. Make sure your business is registered with the NJDOR. Visit NJDOR’s website at: http://www.nj.gov/treasury/revenue/busregcert.shtml
2. Make sure your business is registered for all applicable NJ employer taxes by visiting NJDOR’s website at: https://www.state.nj.us/cgi-bin/treasury/revenue/dcr/reg/sos_dcrnew01_page1.cgi
3. Make sure corporate charter is in good standing (if applicable). Visit NJDOR’s website at: http://www.state.nj.us/treasury/revenue/standcert.shtml
4. Make sure your business is registered for Sales and Use tax for waste hauling by completing FORM NJ-REG or updating your registration on NJDOR’s website at: https://www16.state.nj.us/TYTR_REGC/jsp/OwnershipLogin.jsp
5. Make sure your business is current on all State tax filings and payments.
   Visit https://www1.state.nj.us/TYTR_TaxDebts/JSP/LoginType.jsp to see if your business has any outstanding liabilities.
   To file and pay State taxes, visit http://www.state.nj.us/treasury/taxation/online.shtml

Have questions?

We are here to help!

1. Registration questions: visit the Division of Revenue and Enterprise Services website at: http://www.state.nj.us/treasury/revenue/gettingregistered.shtml or call Client Services at (609) 292-9292.
2. NJDEP application or processing questions: contact DEP at (609) 292-7081.
3. Tax questions: email the Division of Taxation at: BusinessAssistanceTC.Taxation@treas.nj.gov

Need more information on Sales and Use tax for waste hauling?

http://www.state.nj.us/treasury/taxation/
http://www.state.nj.us/treasury/taxation/pdf/pubs/stn/fall00.pdf (page 5)
Initial Application to Become Registered as
Hazardous Waste Transporter
Checklist

Company Name: ____________________________

☐ **Hazardous Waste Initial Application:** Accurately completed and Signed Original form (2 Pages)

☐ “AFFIDAVIT OF AN EXEMPT GENERATOR UNDER N.J.S.A. 13:1E-127g(1) through (7)”
   – Notarized and sign original form

☐ **Insurance:**  VALID copies of applicable insurance information FOR ALL VEHICLES
   ☐ Valid Motor Vehicle Insurance Card or
   ☐ MCS-90 or MCS-82

☐ **Motor Vehicle Registration(s):** VALID copies FOR ALL VEHICLES
   Motor Vehicle registration must indicate that the vehicle is registered as Commercial and display the name of the NJDEP registrant (e.g. your company). **Passenger or Pass-Comm vehicle registrations are not acceptable.** For all equipment not registered under the name of the NJDEP registrant or for any lease equipment, see next requirement under LEASED VEHICLES

☐ **LEASED VEHICLES**  You must submit both:
   ☐ Copy of written lease agreement **AND**
   ☐ Original NJDEP Lease Certification for ALL leased vehicles


☐ Copies of licenses, authorities, permits or approvals to transport waste in other states.

☐ **This COMPLETED Checklist**

Please mail the **original** application, questionnaires and notarized affidavit along with **legible copies** of all required documentation listed above to:

New Jersey Department of Environmental Protection
Division of Compliance Operations and Coordination
Bureau of Licensing & Registrations
9 Ewing Street, Mail Code 09-01
Trenton, NJ 08625-0420

**DO NOT E-MAIL, FAX OR HAND-DELIVER APPLICATION**