



Notification of Universal Waste Handler Activities

Instructions:

- In order to complete the universal waste handlers exemption acknowledgment application, once all prior township and other approvals are attained, please fill out the below form.
Copies of the completed form must be sent to the Department, both in electronically and hard copies by mail.
Please send electronic copies to: exemptrecycling@dep.nj.gov. The host Municipality's zoning officer, host County Health Department, host County Solid Waste Coordinator, and host County Recycling Coordinator must be copied in the email.
Please send hard copies to: Mail Code 401-02C, New Jersey Department of Environmental Protection, Division of Solid & Hazardous Waste, Bureau of Recycling & Hazardous Waste Management, P.O. Box 420, Trenton, New Jersey 08625-0420. The host Municipality's zoning officer, host County Health Department, Solid Waste Coordinator, and Recycling Coordinator must receive a copy of the form; proof may be given in the form of return mail receipts.
Contact information for the townships and recycling & solid waste coordinators can be found at http://www.nj.gov/dep/dshw/recycling/recycoor.htm

An unofficial copy of the Recycling Regulations, N.J.A.C. 7:26A-1.4, can be obtained from the Department's internet website at: www.state.nj.us/dep/dshw/resource/rules.htm

OPERATOR INFORMATION

Name: _____ Title: _____

Corporation Company: _____

Mailing Address: _____

Municipality: _____ County: _____ State: _____ Zip Code: _____

Telephone Number: _____ Extension: _____ Fax: _____

Email Address: _____

UNIVERSAL WASTE EXEMPTION(S) CLAIMED

1. Which universal waste handler exemption(s) are you claiming pursuant to N.J.A.C. 7:26A-1.4(a)?

(Check the applicable box) Exemption #: 14 (Small Quantity Handler) [] 15 (Large Quantity Handler) []

2. Please provide details behind the operations that are to be the subject of this exemption:

Blank lines for providing details behind the operations.

OPERATIONAL DESCRIPTION

Please provide the Department with the following operational-specific information:

1. EPA IDENTIFICATION NUMBER: _____ (If submitting as a Large Quantity Handler)

2. MATERIALS TO BE HANDLED: (Check all that apply)

- Batteries [] Mercury Containing Devices [] Consumer Electronics []
Pesticides [] Lamps [] Oil-based Finishes []

PLEASE ADVANCE TO NEXT PAGE FOR THE LATTER HALF OF THE APPLICATION REQUIREMENTS.

Notification of Universal Waste Handler Activities – Part II

ACTIVITY LOCATION

Provide the location where activity is to be conducted (*if activity is to be conducted at more than one location, you must complete and submit a notification form for each location.*):

Street Address: _____

Municipality: _____ County: _____ Zip Code: _____

Block(s): _____ Lot(s): _____ Location Description (*construction site, shopping mall, farm, industrial park, etc.*): _____

Date activity will commence _____ Anticipated completion date (*if applicable*): _____

CERTIFICATION

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. Additionally, I certify that I have obtained all applicable and required municipal, county, and Department Approvals prior to submitting this notification. I further certify that the operation described herein satisfies the criteria for exemption as set forth in N.J.A.C. 7:26A-1.4. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. I understand that, in addition to criminal penalties, I may be liable for a civil penalty pursuant to N.J.A.C. 7:26-5 and that submitting false information may be grounds for termination of any exemption.

Owner Name: _____ Signature: _____ Date: _____

Operator Name: _____ Signature: _____ Date: _____

UNIVERSAL WASTE SUMMARY LIST

Exemption #	Description of Exempt Universal Waste Recycling Activities
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14	Collection, consolidation, and transfer of universal waste for recycling, treatment, or disposal and/or Class D recyclables for recycling, managed by small quantity handlers.
15	Collection, consolidation, and transfer of universal waste for recycling, treatment, or disposal and/or Class D recyclables for recycling, managed by large quantity handlers.

This list of descriptions is only a summary of existing recycling exemptions. The complete text and all operational requirements currently in effect, can be found at N.J.A.C. 7:26A-1.4 et seq. available at: www.state.nj.us/dep/dshw/resource/rules.htm