UNIFIED PROGRAM CONSOLIDATED FORM

HAZARDOUS WASTE

REMOTE WASTE CONSOLIDATION SITE ANNUAL NOTIFICATION

							rage						
a. Initial b. Revised		c. Annual		720									
I. GENERAL INFORMATION													
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3	FACII	LITY ID#											1
II. CONSOLIDATION SITE INFORMATION													
			721			EDA	ID#						2
ADDRESS 72				FACII									723
CITY						ZIP (. ~~.				724
DESCRIPTION OF THE TYPE(S) OF REMOTE LOCATION(S) AND SOURCE(S power pole)) PROW W	THE NON-	KCKA I	IAZAKL	003	WASI	E WI	LL BL	COLI	ECTEL) (i.e.		
DESCRIPTION OF THE TYPE OF HAZARDOUS WASTE THAT MAY BE COLI	LECTED												725
The you treat your hazardous waste at this consolidation site?		MONTHLY ONSOLIDATED		727 U	NITS	☐ a.	Poun	ds [] b. (Gallons			728
III. BASIS FOR NOT	r neel	ING A FFD	FRAI	PFR	MI	г							
(Check all that apply)	I INEED	ING A FED.	LIA		VIVII I								729
 □ a. The hazardous waste being consolidated is not hazardous waste law. □ b. The hazardous waste is hazardous waste under federal law, subject to permitting requirements under federal law for the 	, but transp	portation to and a	ıccumul										
IV. C	CERTIF	FICATIONS											
I certify under penalty of law that the activities described in these documer for remote waste and consolidation sites. I further certify that this documer system designed to assure that qualified personnel properly gather and evaluate the system, or those directly responsible for gathering the information, the aware that there are substantial penalties for submitting false information, in	nts meet the ent and all aluate the i	ne applicable elig attachments wer nformation subm on is, to the best of	re prepa nitted. I of my k	ared und Based or anowled	ler my n my i ge and	direc inquir d belie	tion o y of t ef, tru	or sup he pe ie, acc	ervisi rson o curate,	on in a or perso , and co	ccordar ns who	nce wit	h a ge
SIGNATURE OWNER/OPERATOR		DATE											730
NAME OF OWNER/OPERATOR (Print)	731	TITLE OF OW	/NER/C	OPERA'	ГOR								732

Remote Waste Consolidation Site Annual Notification

Complete this page if you are a generator and you collect non-RCRA or non-RCRA regulated hazardous waste initially at remote sites and subsequently transport the hazardous waste to consolidation sites which you also operate.

Complete one Remote Waste Consolidation Site Annual Notification per consolidation site. All generators having the intent to operate under this exemption must notify the CUPA annually.

Refer to HSC §25110.10 for eligibility and notification requirements.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

- 1. FACILITY ID NUMBER Leave this blank. This number is assigned by the CUPA. This is the unique number which identifies your facility.
- 2. EPA ID NUMBER Enter the EPA ID number for the facility.
- 3. BUSINESS NAME Enter the full legal name of the business.
- 720. NOTIFICATION STATUS Check the reason the notification is being completed.
- 721. ADDRESS Enter the street address of consolidation site. If no address exists, enter a legal description of the site.
- 722. CITY Enter the city or unincorporated area of consolidation site.
- 723. ZIP CODE Enter the zip code of the consolidation site.
- 724. DESCRIPTION OF REMOTE LOCATION(S) Describe the type of location(s) and source(s) from which the non-RCRA hazardous waste will initially be collected (i.e. power pole).
- 725. DESCRIPTION OF WASTE(S) COLLECTED Describe the specific waste type(s) to be consolidated. Attach a continuation sheet showing additional wastes, if necessary.
- 726. ONSITE HAZARDOUS WASTE TREATMENT Check "Yes" if hazardous waste is treated at this consolidation site, check "No" if it is not.
- 727. ESTIMATED MONTHLY VOLUME CONSOLIDATED Enter the estimated monthly total volume of hazardous waste to be consolidated at this site.
- 728. UNITS Check the units for the volume consolidated.
- 729. BASIS FOR NOT NEEDING A FEDERAL PERMIT Check the reason for not needing a federal permit for this site.

 If the hazardous waste is RCRA hazardous waste, describe the reason you are not subject to permitting requirements under federal law in the space provided.
 - SIGNATURE The business owner or officer of the company who is authorized to make decisions for the facility and who has operational control, shall sign in the space provided. In most companies, this is not the environmental compliance or technical staff. The title should indicate that an appropriately authorized person is signing for the company. You are signing the certifications and attesting to their accuracy under penalty of law for submitting false information. Original signatures are required.
- 730. DATE CERTIFIED Enter the date that the document was signed.
- 731. OWNER/ OPERATOR NAME Enter the full printed name of the person signing the page.
- 732. OWNER/ OPERATOR TITLE Enter the title of the person signing the page.