

Submit to: Maine DEP
Attn: Geraldine Travers
17 State House Station
Augusta, Maine 04333

Due annually by March 28th

Annual Report Form
for ON-GOING BENEFICIAL USE OF SOLID WASTE

For YEAR: _____

Name of Facility: _____

Location: _____ E-mail: _____

DEP License: S- _____

Facility Operator: _____ E-mail: _____ Phone: _____

Facility Operator mailing address: _____

Contractor Contact: _____ E-mail: _____ Phone: _____

Billing Contact: _____ E-mail: _____ Phone: _____

1. Summary of activity during past year:

A. Enter the amount in weight or volume of each type of waste generated or received by the facility, its source, and the state(s) or province(s) of origin.

Type of waste	Generator	Amount by generator	Unit of measure	State/province of origin

Facility Name: _____

Reporting year _____

2. Operations

Provide a general summary of the beneficial use activity for the reporting year, including problems encountered and follow-up actions, changes to handling operation, and a summary of odor or other complaints received related to the beneficial use during the reporting year. If required to report by license condition, include the location of the beneficial use activity for the past year.

3. Monitoring and waste characterization (as applicable).

A summary and evaluation of any required testing or on-going characterization of the waste; recommended changes may be submitted. Attach additional sheets or provide a separate attachment if additional space is needed.

Testing/characterization results

Changes in testing/characterization program (if any)

I have examined this report and to the best of my knowledge and believe, said report is true, correct and complete.

Signature of person completing this form _____

I have examined this report and to the best of my knowledge and believe, said report is true, correct and complete.

Printed name of person completing this form _____

PLEASE ATTACH ADDITIONAL PAGES AS NEEDED