RAPPAHANNOCK REGIONAL SOLID WASTE MANAGEMENT BOARD



489 ESKIMO HILL ROAD

STAFFORD, VIRGINIA, 22554

540 - 658 - 5279

APPLICATION FOR LANDFILL DISPOSAL OF SOILS

Review Submission Instructions prior to completing this application form.

Submit this application to R-Board, either by mail (at the address given above) or via electronic mail (RMarkwardt@staffordcountyva.gov).

GENERATOR

The "generator" is the owner of the property, from which the soils will be obtained.			
Generator:			
Contact:			
Mailing address:	r		
Telephone:	E-mail:		
EXCAVATOR		Check if same as above:	
The "excavator" is the entity that is physically removing the soils from the project area.			
Contractor:			
Contact:			
Mailing address:			
Telephone:	E-mail:		
HAULER		Check if same as above:	
The "hauler" is the entity that is physically transporting soils from project area to landfill.			
Contractor:			
Contact:			
Mailing address:			
Telephone:	E-mail:		
PROJECT AREA			
Project name (if applicable):			
Physical address:			
Most recent / current use of project area:			
Prior uses of project area:			
Recent / current use of adjacent property (uphill direction):			
Prior uses of adjacent property (uphill direction):			

Estimated amount of soil (tons):			
Estimated amount of soil (cubic yards):			
Check all soil categories that are deemed applicable:			
category 1 not contaminated	category 5 dry cleaning facility		
category 2 virgin petroleum	category 6 haz-waste generator		
category 3 used petroleum	category 7 other (describe)		
category 4 sediment / stormwater basin			
CHEMICAL ANALYSES			
Check all chemical analyses, for which soil has been analyzed:			
free liquids	EOX		
TPH-GRO	PCBs		
TPH-DRO	TCLP RCRA 8 metals		
BTEX	TCLP organic compounds		
Attach all laboratory certificates of analysis to this application form.			
GENERATOR CERTIFICATION			
I certify that I have reviewed and am familiar with the information submitted on this form, and that (to the best of my knowledge) the information provided on this form and any/all attachments to this form is true.			
Name:			
Signature:			
Date:			
R-BOARD USE ONLY			
Name of R-Board reviewer:			
Date application received:			
Date application approved or rejected:			
Check one:			
This application is approved.	This application is rejected.		
If rejected, explain reason:			
If reviewer has any reason to believe that receipt of subject soils may not be allowed under the facility permit, then reviewer will submit this information to DEQ for review.			
Date submitted to DEQ (if applicable):			
Check one (if applicable):			
DEQ approved.	DEQ rejected.		