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| Kentucky Department for Environmental Protection Division of Waste ManagementHazardous Waste Branch300 Sower Blvd, Frankfort, KY 40601(502) 564-6716Registration Of Hazardous Waste Activity Addendum(EPA Form 8700-12) | *FOR OFFICIAL USE ONLY.**DO NOT WRITE IN THIS SPACE.* |
|  | **Fee Submitted:** $      *(Fill in amount enclosed – see instructions to determine your fee)* |
| **I. Reason for Submittal***(Mark all boxes that apply)* | **Reason for Submittal:**[ ]  **NEW** – provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)[ ]  **RENEWAL** – renew your EPA ID Number. Enter month your current certificate expires      [ ]  **REACTIVATE AN EPA ID NUMBER**[ ]  **MODIFICATION** – provide subsequent notification or update site identification information.*Mark all applicable modifications*:[ ] Generator Status [ ] Contact Person [ ] Add/Delete Waste Streams [ ] Ownership🞺 [ ] Company Name🞺 [ ] Other (Explain)       🞺Enter previous owner and/or company name:         |
| **II. Facility Name and Lat/Long** | **Facility Name:**       **Facility Latitude:**       **Facility Longitude:**       |
| **III. ID Numbers** | **A.** **EPA ID Number:**  KY −   −   −    | **B. AGENCY INTEREST (AI) Number:**  |
| **IV. Legal Landowner of the Real Property:** | **Name of Landowner:** |
|  | **Date Became Owner: (mm/dd/yyyy)****/   /** | **Landowner Type:** [ ] Private [ ] Federal [ ] State [ ] Municipal [ ] County [ ] Other |
|  | **Phone Number:** | **Phone Number Extension:** |
|  | **Street Address or P. O. Box:** |
|  | **City:** | **State:** | **Country:** | **Zip Code:** |
| **V. Type of Regulated Waste Activity***Mark “X” in the appropriate boxes for waste activities not included in the EPA Form 8700. Complete any additional spaces as instructed.* |
| **If Marked on EPA Form 8700 as a Transporter of Hazardous Waste, then mark “X” in all boxes that apply**[ ]  a. Transporter for Hire[ ]  b. Transfer Facility[ ]  c. Transport for Self | **If Marked on EPA Form 8700 as a Recycler of Hazardous Waste, then mark “X” in all boxes that apply**[ ]  a. Recycler of Lead Acid Batteries[ ]  b. Recycler of Precious Metals[ ]  c. Other Recycler *Specify*  |
| **If Marked on EPA Form 8700 as an Off-Specification Used Oil Burner, then mark “X” in all boxes that apply**[ ]  a. Utility Boiler[ ]  b. Industrial Boiler[ ]  c. Industrial Furnace | [ ]  **Used Oil Collection Center** a. Storage capacity of facility: gallons |
| [ ]  **Laboratory Conducting Treatability Studies** | [ ]  **Used Oil Recycler**1. Amount recycled in previous calendar year: gallons
 |
| [ ]  **E-Scrap Collection Center** | [ ]  **Publicly Owned Treatment Works (POTW) Receiving Hazardous Waste** |
| [ ]  **Household Collection** | [ ]  **Other** *(describe)*:       |
| [ ]  **Generator Treating Hazardous Waste On-Site**\**Provide a brief description:*      \**Additional Application Requirements for Treatment On-Site Activities – see instructions* |

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| **EPA ID Number: KY −   −   −    Agency Interest Number:** |
| **VI. Description of Current Hazardous Wastes***Complete one line per waste stream. Use additional pages as necessary.****NOTE:*** *For modifications, all current waste streams must be listed in addition to any new ones.* |
| **Description of Waste** | **EPA Waste Number(s)** | **Physical State** | **Maximum Amount of Waste Generated in a Calendar Month** | **Estimated Annual Quantity of Waste Generated** | **Unit of Measure** |
| *Example: paint related waste material* | *D001**D035* | *L* | *500* | *1,500* | *P* |
| **A.**  |       |       |       |       |       |
| **B.**  |       |       |       |       |       |
| **C.**  |       |       |       |       |       |
| **D.**  |       |       |       |       |       |
| **E.**  |       |       |       |       |       |
| **F.**  |       |       |       |       |       |
| **G.**  |       |       |       |       |       |
| **H.**  |       |       |       |       |       |
| **I.**  |       |       |       |       |       |
| **J.**  |       |       |       |       |       |
| **TOTAL FOR ALL WASTE STREAMS** |       |       |       |
| **VII. Waste Streams Being Deleted***Refer to your previous registration and list any waste streams this facility is no longer generating.**This section is NOT APPLICABLE to first time applicants.* |
| **Description of Waste** | **EPA Waste Number(s)** | **Description of Waste** | **EPA Waste Number(s)** |
| A.       |       | D.       |       |
| B.       |       | E.       |       |
| C.       |       | F.       |                 |
| **VIII. Comments** |
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