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| Kentucky Department for Environmental Protection  Division of Waste Management  Hazardous Waste Branch  300 Sower Blvd, Frankfort, KY 40601  (502) 564-6716  **Hazardous Waste Annual Report Addendum**  (EPA Form 8700-13 A/B)  **FORM 1: Identification and Certification** | | | | | | | | | *FOR OFFICIAL USE ONLY.*  *DO NOT WRITE IN THIS SPACE.* | |
| **I. Site ID Numbers** | **A.** **EPA ID Number:**  KY −   −   − | | | | | | | **B. AGENCY INTEREST (AI) Number:** | | |
| **II. Reporting Year** | **A. Reporting Year: January 1 through December 31, 20** | | | | | | | | | |
| **III. 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: \_\_\_\_\_\_** |
| **IV. Type of Regulated Waste Activity** | | | | | | | | | | |
| **A. Hazardous Waste Activities** | | **B. Universal Waste Activities** | | | | | **C. Used Oil Activities** | | | |
| 1. **Generator of Hazardous Waste** 2. Is this a one-time-only or episodic hazardous waste activity report?   Yes No   1. Did you have a status change during the year?   Yes No   1. **Fuel Burner of Hazardous Waste for Energy Recovery**   Yes No  *(If “Yes”, mark all that apply)*  a. Industrial Boiler  b. Industrial Furnace | | 1. **Large Quantity Universal Waste Handler**   (over 11,000 pounds on-site storage)  Yes No *If yes, mark all that apply*  **Generate Accumulate**   1. Batteries 2. Pesticides 3. Mercury Containing Equipment      1. Lamps *(includes fluorescent lamps)*      1. Other: *(specify)* **\_\_\_\_\_\_**      1. Other: *(specify)* **\_\_\_\_\_\_** | | | | | 1. **Off-Specification Used Oil Burner** Yes No   *If “Yes,” mark all that apply*  a. Utility Boiler  b. Industrial Boiler  c. Industrial Furnace | | | |
| **V. Comments (Additional Information that will clarify any item in this report.)** | | | | | | | | | | |
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| Kentucky Department for Environmental Protection  Division of Waste Management  Hazardous Waste Branch  300 Sower Blvd, Frankfort, KY 40601  (502) 564-6716  **Hazardous Waste Annual Report Addendum**  (EPA Form 8700-13 A/B)  **FORM 2: Waste Generation and Management (EPA GM Form)** | | | | | | | | |
| **A.** **EPA ID Number:** KY −   −   − | | | | | **B. AGENCY INTEREST (AI) Number:** | | | |
| **Waste Description** (See instructions.) Check one:  **Liquid**  **Solid** (1) (General) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (2) (Item 9b of manifest) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| Is this waste both hazardous and radioactive?  Yes  No | | | Quantity Generated in Report Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_pounds | | | Enter the value used to convert this waste to pounds  (Leave blank if waste amount is already listed in pounds)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| ON-SITE MANAGEMENT  Was any of this waste managed on-site by treatment , recycling , disposal , or by discharge to a sewer or publicly owned treatment works (POTW) ? Check One.  Yes – *Complete* **On-site Process System** *block(s)*  No – *Skip to* **Waste Shipped Off-site** | | | | | | | | |
| WASTE SHIPPED OFF-SITE Was any of this waste shipped off site in 20\_\_ for treatment, disposal, or recycling?  Yes – *Continue completing this form and* **Form 4.**  No – *Form 2 is complete.* | | | | | | | | |
| **Si**  **te**  **1** | | **Name of receiving facility:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EPA ID Number of receiving facility:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Off-Site Management Method Code  H \_\_\_\_ | | | Total Quantity Shipped in 20\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ pounds | |
| Site **2** | | **Name of receiving facility:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EPA ID Number of receiving facility:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Off-Site Management Method Code  **H** \_\_\_\_ | | | Total Quantity Shipped in 20\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ pounds | |

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| Kentucky Department for Environmental Protection  Division of Waste Management  Hazardous Waste Branch  300 Sower Blvd, Frankfort, KY 40601  (502) 564-6716  **Hazardous Waste Annual Report Addendum**  (EPA Form 8700-13 A/B)  **FORM 3: Waste Received From Off Site (EPA WR Form)** | | | |
| **A.** **EPA ID Number:** KY −   −   − | | | **B. AGENCY INTEREST (AI) Number:** |
| **Waste**  **1** | **Waste Description** (See instructions.) Check one:  **Liquid**  **Solid**  (1) (General) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (2) (Manifest) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Is this waste both hazardous and radioactive?**  Yes  No | | **Name of generator from which this waste was received**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EPA ID Number of generator from which this waste was received**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Waste**  **2** | **Waste Description** (See instructions.) Check one:  **Liquid**  **Solid**  (1) (General) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (2) (Manifest)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Is this waste both hazardous and radioactive?**  Yes  No | | **Name of generator from which this waste was received**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EPA ID Number of generator from which this waste was received**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Waste**  **3** | **Waste Description** (See instructions.) Check one:  **Liquid**  **Solid**  (1) (General) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (2) (Manifest) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Is this waste both hazardous and radioactive?**  Yes  No | | **Name of generator from which this waste was received**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EPA ID Number of generator from which this waste was received**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

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| Kentucky Department for Environmental Protection  Division of Waste Management  Hazardous Waste Branch  300 Sower Blvd, Frankfort, KY 40601  (502) 564-6716  **Hazardous Waste Annual Report Addendum**  (EPA Form 8700-13 A/B)  **FORM 4: Summary of Waste Shipped Off Site (EPA OI Form)** | | | | |
| **A.** **EPA ID Number:** KY −   −   − | **B. AGENCY INTEREST (AI) Number:** | | | |
| **List All Receiving Facilities**  List each facility only once. | | **Total Number of Manifested Shipments** | **Total Pounds Shipped**  **for Reporting Year** | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facility Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facility Name \_\_\_\_\_\_\_\_\_*\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facility Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facility Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facility Name *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facility Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| **Total** | |  |  | |
| **List All Primary Transporters**  List each primary transporter only once. Do not list secondary transporters. | | **Total Number of Manifested Shipments** | **Total Pounds Shipped**  **for Reporting Year** | **Container Types** |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_ | |  |  |  |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name*\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| **Total** | |  |  |  |

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| Kentucky Department for Environmental Protection  Division of Waste Management  Hazardous Waste Branch  300 Sower Blvd, Frankfort, KY 40601  (502) 564-6716  **Hazardous Waste Annual Report Addendum**  (EPA Form 8700-13 A/B)  **FORM 5: Summary of Waste Shipped To Your Site** | | | | |
| **A.** **EPA ID Number:** KY −   −   − | **B. AGENCY INTEREST (AI) Number:** | | | |
| **List All Generators that Sent Waste to Your Facility**  List each facility only once. | | **Total Number of Manifested Shipments** | **Total Pounds Shipped**  **for Reporting Year** | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Generator Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Generator Name *\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Generator Name *\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Generator Name *\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Generator Name *\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Generator Name *\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| **Total** | |  |  | |
| **List All Primary Transporters**  List each primary transporter only once. Do not list secondary transporters. | | **Total Number of Manifested Shipments** | **Total Pounds Shipped**  **for Reporting Year** | **Container Types** |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name*\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| EPA ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transporter Name *\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |
| **Total** | |  |  |  |