



**Conditionally Exempt Hazardous Waste Generator Program for:
Tillamook County Transfer Station, 1315 Ekloff Road, Tillamook.
An appointment is required to use this program**

Scheduled CEG dates in 2017: March 3rd, June 2nd, and October 6th

Please fill out the information requested on these two pages and Send to **Stericycle Environmental Services, LLC**, Attn: Pat Hymas, Stericycle Environmental Services, LLC by email, FAX. **For Information call 800.547.2436 x2523**

E: pat.hymas@stericycle.com; Fax: 360.835.8872; Mail: Stericycle, Pat Hymas, 625 S. 32nd Street, Washougal, WA 98761

This program is for Conditionally Exempt Hazardous Waste Generators (CEG) only. See Certification - page 2.

Your information

| | | | |
|--------------------------------|-------------|-------------------------------|----------|
| Generator Name (Business Name) | | Type of Business/Organization | |
| Street address | City | State | Zip Code |
| Contact Name | Telephone # | Email address or FAX Number | |

Please complete an inventory of the material you wish to drop off. Stericycle will review the inventory and your information. If the material is acceptable and your information and certification is complete, Stericycle will return this form to you with an appointment time and cost estimate – based on your inventory. The amount you owe will be determined at the site during your drop off appointment; this amount will be due at time of drop off. Stericycle will fill in the shaded sections.

| Material | Container Size (1G, 5G) | Number of Containers | Price Per container size | Estimated Cost |
|---|-------------------------|----------------------|--------------------------|----------------|
| Architectural Paint (Covered by Paint Care Oregon, in original, labeled containers) | | | | |
| Paint (Unlabelled or Non-Architectural) | | | | |
| Paint related material, solvent, thinner, sealer, resin, glue | | | | |
| Corrosive Liquids (Acids, Alkalines) | | | | |
| Fluorescent Lamps, Whole | | | | |
| PCB light ballasts and capacitors | | | | |
| Electronic Waste (TVs, Computers) | | | | |
| Mercury (Thermometers, switches, amalgam) | | | | |
| Aerosols | | | | |
| Antifreeze | | | | |
| Machine Coolants | | | | |
| Batteries (Alkaline) | | | | |
| Fuels and Oils | | | | |
| Photo Chemicals | | | | |
| Pesticides | | | | |
| Other, Please describe | | | | |
| Other, Please describe | | | | |
| Other, Please describe | | | | |
| Total Estimated Cost (Actual amount will be calculated based on waste material received) | | | | |

Certification

State and federal regulations limit the use of CEG hazardous waste collection programs to those businesses that generate less than 220 pounds of hazardous waste per month and have not accumulated more than 2,200 pounds of hazardous waste. If your business or organization produces or accumulates more hazardous waste than these amounts you may be subject to additional regulations and reporting requirements. Stericycle Environmental Services, LLC may assist you with this material – but not under this program.

Please sign below to certify your organization is a conditionally exempt small quantity generator. Call Stericycle with any questions you may have.

I certify the business I am representing is a Conditionally Exempt Hazardous Waste Generator who generates less than 220 pounds per month of hazardous waste and less than 2.2 pounds of acutely hazardous waste per month. I also certify that this business has not accumulated more than 2,200 pounds of hazardous waste or more than 2.2 pounds of acutely hazardous waste at this time. I understand that I must get pre-approval from Stericycle prior to dropping off my wastes at the event. I am prepared to pay the disposal cost determined by Stericycle personnel upon their review of the material at the time of drop off. The estimate on the preceding page is an estimate only. I understand that generation and disposal of hazardous waste is regulated by Federal, State, and Local governments and that future liability for these wastes is governed by law. Stericycle Environmental Services, LLC cannot assume liability that belongs to the generator according to regulations.

Company Name

Print Authorized Company Representative Name

Signature of Authorized Representative

Date

Stericycle to Fill out:

Your appointment Date: _____

Your appointment Time: _____

Thank you for your business and choosing to properly manage waste.

