

6 NYCRR PARTS 364
Waste Transporter Registration Application
New York State Department of Environmental Conservation
Division of Materials Management
625 Broadway, 9th Floor
Albany, NY 12233-7251

Applications for a registration, or for modification of an existing registration must use this application form. Forms are available on the Department's website or upon request by calling (518)402-8792. **All applications for new registration must bear original signatures of chief operating officer of company (equivalent to a vice president or higher) and can be mailed to the above address, e-mailed (transport@dec.ny.gov), or faxed to (518) 402-9034.** Applications for modification may be mailed, faxed, or emailed. Once authorized, registrations will be forwarded electronically or by mail; registrations will not be available for pick-up.

SECTION A – TYPE OF APPLICATION

Do you currently have a valid Part 364 PERMIT?

No Yes, Permit Number: _____

New Registration Application

Once authorized, a Registration number will be assigned.

Have you ever been issued a Part 364/381 Permit/Registration, either in your name or in the name of any business you have owned, operated or held a management position?

No Yes, Permit/Registration Number: _____

No Yes Have you ever been convicted of any crime or offense under the New York State Environmental Conservation Law (ECL), New York State solid waste management regulations (NYCRR Parts 360-369), or similar environmental laws or regulations in another state?

No Yes Has any company that you have owned, operated or held a management position in, ever been convicted of any crime or offense under the New York State Environmental Conservation Law (ECL)?

Modification Application (complete Sections **A, B, C,** and **D** with any changes).

Registration Number: _____

Check One: Process Modification Upon Receipt

Process Effective of Upcoming Renewal Date

(if no selection, modification request will be processed Upon Receipt)

Renewal Application (complete Sections **A, B, C,** and **D** with any changes)

Registration Number: _____

Check one: Renew (with no changes)

Renew with modifications (Please make the appropriate changes on this form)

Do not Renew

SECTION B – NAME AND ADDRESS

REGISTRATION NO. _____

Business Name _____

Business Physical Address _____

City _____ State/Province _____ Zip Code _____

County _____

Phone (_____) _____ E-Mail _____

Business Mailing Address (if different)

City _____ State/Province _____ Zip Code _____

SECTION C – CERTIFICATION

I hereby certify that the information contained in this application submitted in support of obtaining, modifying or renewing a New York State Waste Transporter Registration contains no information that I know to be false, incomplete, or to have changed prior to the date of submission without notification to the Department. I am aware that if I have knowingly omitted or falsified any information required to be disclosed, processing of the application may be delayed and the registration sought may be denied or subsequently revoked. I am aware that false statement or omissions herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the NYS Penal Law. Further, I affirm that all transfer, storage, treatment and disposal facilities to which wastes will be /are transported are authorized to accept the category of waste. Finally, I agree to indemnify and hold The People of the State of New York Department, their officials, employees and contractors harmless from any claim or liability arising directly or indirectly out of this registration application, and the information contained herein, and any registration issued pursuant thereto.

PRINT FULL LEGAL NAME (incl. middle name/initial):_____ **Title** _____**Date of Birth** _____ (required for new applications only)**Signature** _____ **Date** _____

| (check all that apply) | Add | Delete |
|---|--------------------------|--------------------------|
| Construction and Demolition Debris [364-3.1(d)] (includes all categories of fill material) | <input type="checkbox"/> | <input type="checkbox"/> |
| Commercial Solid Waste [364-3.1(c)] | <input type="checkbox"/> | <input type="checkbox"/> |
| Household Hazardous Waste [364-3.1(b)] | <input type="checkbox"/> | <input type="checkbox"/> |
| Regulated Medical Waste [364-3.1(a)] | <input type="checkbox"/> | <input type="checkbox"/> |
| Sharps [364-3.1(e)] | <input type="checkbox"/> | <input type="checkbox"/> |
| Waste Tires [364-3.1(f)] | <input type="checkbox"/> | <input type="checkbox"/> |
| Waste Oil [364-3.1(g)] | <input type="checkbox"/> | <input type="checkbox"/> |

PLEASE TAKE NOTICE, that transport of regulated waste not identified on your registration (Section D) is a violation of the provisions of Environmental Conservation Law (ECL) §27-0305 and regulations promulgated pursuant thereto. ECL §71-2703 provides that any person who violates any of the provisions of, or who fails to perform any duty imposed by Title 3 of Article 27 of this chapter or any rule or regulation promulgated pursuant thereto, or any term or condition of any certificate of permit issued pursuant thereto, or any final determination or order of the commissioner made pursuant to this title shall be liable for civil and/or criminal penalties. RMW may be transported (liability insurance coverage required) from generator owned or operated satellite locations in single loads of less than 50 pounds per month for the purposes of consolidation at a generator owned and operated central location, or to a hospital affiliated with and has a written contract with the generator.