



COMMERCIAL HAULER & SPECIAL WASTE HAULER REGISTRATION FORM

In accordance with the Solid Waste Act (NMSA 1978, § 74-9-8.H) and the New Mexico Solid Waste Rules (20.9.3.31 NMAC), commercial haulers and haulers of special waste shall register with the Department thirty (30) days prior to operations and every five years thereafter. To register as a commercial hauler or hauler of special waste, complete this form providing all required information. Assistance may be obtained by contacting the Solid Waste Bureau's Permit Section at (505)690-8615.

I. GENERAL INFORMATION:

A. LEGAL NAME OF TRANSPORTER:

NAME

NAME OF OWNER (If different)

DRIVER'S LICENSE NUMBER & STATE OF ISSUE (If business is a proprietorship or partnership)

B. MAILING ADDRESS:

C. PHYSICAL STREET ADDRESS (If different from the mailing address):

D. BUSINESS TELEPHONE:

E. BUSINESS EMAIL:

F. LOCAL REPRESENTATIVE AND TELEPHONE:

NAME

TELEPHONE

ADDRESS

CITY/STATE/ZIP CODE

G. HAS HAULER EVER TRANSPORTED WASTE UNDER ANOTHER NAME? IF SO, GIVE PREVIOUS NAME(S), ADDRESS(ES), AND LENGTH OF TIME DOING BUSINESS UNDER THAT NAME:

NAME

ADDRESS

LENGTH OF TIME

H. CONTACT PERSON, ADDRESS AND TELEPHONE NUMBER (Complete if a person other than the local contact person should be NMED's primary contact):

NAME

TELEPHONE

ADDRESS

CITY/STATE/ZIP CODE

I. TYPE/CLASSIFICATION OF WASTE TO BE HAULED:

MSW

CONSTRUCTION & DEMOLITION ONLY

SPECIAL WASTE (If checked, applicant must complete Section IV)

II. INSURANCE (Information in this section pertains only to vehicle liability insurance):

A. NAME OF INSURANCE COMPANY: _____

B. ADDRESS: _____

C. POLICY NUMBER, AMOUNT OF LIABILITY INSURANCE & EFFECTIVE DATE:

III. OPERATIONS:

A. ANTICIPATED START DATE OF OPERATION (for new operators), HOURS OF OPERATION AND DAYS OF COLLECTION:

ANTICIPATED START DATE

HOURS OF COLLECTION

DAYS OF COLLECTION

B. MEANS OF CONTROLLING ODORS (Describe methods to be used or attach a written plan):

C. NUMBER AND TYPE OF STORAGE CONTAINERS TO BE USED FOR RESIDENCES, COMMERCIAL, INSTITUTIONAL AND INDUSTRIAL ESTABLISHMENTS TO BE SERVED:

NUMBER	TYPE & SIZE OF CONTAINER(S)
_____	_____
_____	_____
_____	_____

D. PHYSICAL LOCATION OF ALL EQUIPMENT, EMPTY CONTAINER OR VEHICLE STORAGE YARDS IN NEW MEXICO:

E. TRANSPORT DISTANCE FROM THE NEAREST AND FARTHEST POINTS OF COLLECTION TO THE PRIMARY SOLID WASTE FACILITY:

F. IDENTITY OF EACH SOLID WASTE FACILITY, COLLECTION CENTER OR OTHER REGISTERED OPERATION RECEIVING SOLID WASTE FOR DISPOSAL OR TRANSFER (Must include the facility's permitted name, physical address, telephone, and state-issued permit or registration number – if necessary, attach an additional sheet):

G. STORAGE FACILITIES OPERATED AS PART OF THE APPLICANT'S COMMERCIAL OR SPECIAL WASTE HAULING OPERATIONS (Commercial haulers or haulers of special waste are not required to separately register storage or collection facilities that are part of the hauler's operations as long as the operational rate of the collection facility does not exceed 240 cubic yards per day monthly average (including recyclable material); the collection facility does not serve the general public, meaning that only waste collected by the applicant's hauling operations may be stored at the facility and the facility shall not be open to the public; and the facility's operations are described and included as part of the commercial hauler or hauler of special wasteregistration).

IF A STORAGE FACILITY IS PROPOSED, THE APPLICANT SHALL ATTACH AN OPERATIONS PLAN AND A SITE MAP ADDRESSING THE FOLLOWING:

1. The Operations Plan shall, at a minimum, describe the exact physical location of the storage area(s), the types of waste to be stored, on-site equipment (if any), the method of storage and containment of the waste, the maximum length of time such waste shall remain in temporary storage, and methods or procedures that will be undertaken to preclude creation of a public nuisance, mitigate odors, prevent litter and ensure that the operational limit of 240 cubic yards per day is maintained. Haulers of special waste shall describe in detail how the special

waste will be managed, containerized, labeled, manifested and reloaded (if applicable) for disposal or treatment to ensure sufficient protection of public health and the environment.

Operations Plan Attached

2. The Site Map does not have to be drawn to scale, but it shall, at a minimum, indicate the zoning of the facility and the surrounding area, all storage, loading and unloading areas, fencing and gates, signage (if any), entrances/exits and roadways, buildings and the specific location of all solid waste, special waste or recyclables storage areas.

Site Map Attached

H. COLLECTION VEHICLES AND TRAILERS:

NUMBER	TYPE OF VEHICLE & TRAILER (Include the year, make, model, size or maximum cubic yards per vehicle/trailer, and indicate the type of cover system – if necessary, attach an additional sheet):
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I. STREET ADDRESS & ZONING OF VEHICLE MAINTENANCE YARD:

J. TRANSPORT/TRANSFER REQUIREMENTS FOR SPECIAL WASTE HAULERS (Indicate necessary special handling, transportation and disposal requirements for the special waste):

K. IDENTIFY TRAINING PROVIDED FOR DRIVERS AND CREW FOR DIFFERENTIATING BETWEEN HAZARDOUS WASTE, SPECIAL WASTE AND OTHER SOLID WASTE (Attach a copy of your training manual or outline, which must be signed & dated by the hauler’s owner or authorized representative).

Training Attached

L. CERTIFICATION OF LICENSE AND REGISTRATION REQUIREMENTS FOR DRIVERS, VEHICLES AND TRAILERS (Attach copies of current driver’s licenses, vehicle registrations, and trailer registrations OR attach a signed, dated letter identifying the drivers/vehicles/trailers and certifying that they are, and will continue to be, properly licensed or registered).

Certification Attached

IV. SPECIAL WASTE HAULERS:

A. A CONTINGENCY PLAN, INCLUDING A LIST OF THE CLEAN UP KIT CONTENTS, MUST BE SUBMITTED AT THE TIME OF APPLICATION. A COPY OF THE APPROVED CONTINGENCY PLAN AND THE ACTUAL CLEAN UP KIT MUST BE KEPT WITHIN EACH COLLECTION VEHICLE DURING HAULING OPERATIONS.

B. ALL SPECIAL WASTE HAULERS MUST COMPLETE THE FOLLOWING (Please check the types of special waste to be transported):

- | | | |
|--------------------------|-----|---|
| <input type="checkbox"/> | 1. | Treated Formerly Characteristic Hazardous Wastes (TFCH) |
| <input type="checkbox"/> | 2. | Packing House and Killing Plant Offal |
| <input type="checkbox"/> | 3. | Regulated Asbestos Waste |
| <input type="checkbox"/> | 4. | Ash |
| <input type="checkbox"/> | 5. | Infectious Waste |
| <input type="checkbox"/> | 6. | Sludge |
| <input type="checkbox"/> | 7. | Industrial Solid Waste |
| <input type="checkbox"/> | 8. | [Reserved] |
| <input type="checkbox"/> | 9. | Spill of a Chemical Substance or Commercial Product |
| <input type="checkbox"/> | 10. | Petroleum Contaminated Soils |
| <input type="checkbox"/> | 11. | Oil Conservation Division (OCD) Wastes |
| <input type="checkbox"/> | 12. | Other (Specify): |
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V. CERTIFICATIONS:

A. I CERTIFY THAT THE APPROVED WASTE IDENTIFICATION TRAINING PROGRAM WILL BE IMPLEMENTED (Section III-K): _____
INITIALS

B. IF APPLICANT IS **NOT** A PUBLIC ENTITY OR A PUBLICLY HELD CORPORATION, HAVE ANY OF THE OWNER(S) OR OPERATOR(S) EVER BEEN FINED FOR VIOLATION OF ANY ENVIRONMENTAL LAWS OF ANY STATE OR THE UNITED STATES? YES _____ NO _____
INITIALS INITIALS

C. IF APPLICANT **IS** A PUBLIC ENTITY OR A PUBLICLY HELD CORPORATION, HAVE ANY OF THE OWNER(S) OR OPERATOR(S) BEEN FINED FOR VIOLATION OF ANY ENVIRONMENTAL LAWS WITHIN THE STATE OF NEW MEXICO WITHIN THE LAST FIVE (5) YEARS? YES _____ NO _____
INITIALS INITIALS

D. IF APPLICANT IS **NOT** A PUBLIC ENTITY OR A PUBLICLY HELD CORPORATION, HAVE ANY OF THE OWNER(S) OR OPERATOR(S) EVER HAD ANY PERMIT OR REGISTRATION REVOKED OR PERMANENTLY SUSPENDED FOR CAUSE UNDER ENVIRONMENTAL LAWS OF ANY STATE OR THE UNITED STATES? YES _____ NO _____
INITIALS INITIALS

E. IF APPLICANT ***IS*** A PUBLIC ENTITY OR A PUBLICLY HELD CORPORATION, HAVE ANY OF THE OWNER(S) OR OPERATOR(S) HAD ANY PERMIT OR REGISTRATION REVOKED OR PERMANENTLY SUSPENDED FOR CAUSE UNDER ENVIRONMENTAL LAWS WITHIN THE STATE OF NEW MEXICO WITHIN THE LAST FIVE (5) YEARS? YES _____ NO _____
INITIALS INITIALS

VI. REGISTRATION FEE The registration fee shall be paid by the applicant at the time of initial application and every five years thereafter at the time of registration renewal. The registration fee shall be paid by check or money order **made payable to the "New Mexico Environment Department"** and is non-refundable. The registration fee may be hand delivered or mailed along with this application to:

**Manager, Permit Section
Solid Waste Bureau, New Mexico Environment Department
1190 St. Francis Drive, P.O. Box 5469
Santa Fe, New Mexico 87502-546**

A. IF APPLICANT REGISTERS TWO OR LESS TRUCKS AND HAULS NO SPECIAL WASTE, THE REGISTRATION FEE SHALL BE: **\$100.00.**

B. IF APPLICANT REGISTERS THREE OR MORE TRUCKS OR HAULS ANY SPECIAL WASTE, THE REGISTRATION FEE SHALL BE: **\$300.00.**

VII. THE UNDERSIGNED ATTESTS THAT THE INFORMATION PROVIDED UPON THIS REGISTRATION FORM, INCLUDING ALL ATTACHMENTS, IS ACCURATE.

SIGNATURE AND TITLE

DATE