### ROSEVILLE FIRE DEPARTMENT UNIFIED PROGRAM CONSOLIDATED FORM HAZARDOUS WASTE

# **RECYCLABLE MATERIALS REPORT - PAGE 1**

FOR EXCLUDED OR EXEMPTED MATERIALS ONLY

FACILITY ID#	3	1	0		1 5										EPA ID#						2
																					•
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As)  3																					
DATES OF DEDO		G DED	IOD							EGI	<b>.</b>	TD 16	2.0.4	TDE .				500	ENDRY	S D A TELE	501
DATES OF REPORTING PERIOD BEGINNING DATE 500 END							ENDING	i DATE													
	I. TYPE OF RECYCLING ACTIVITIES  If yes, please follow instructions.																				
1. Do you recycle r														YES	☐ NO		502			are both the generator and	
recyclable mater generated (onsite				oca	ation a	at w	vhich t	ne m	ater	ial w	vas									ne Recyclable Materials Reports II and V.	port. Do not
· ·		, ,																	1		
2. Do you recycle r	nore	than 1	00 kg	r/m	nonth	of 1	non_m	anife	eter	1			П	YES			503	a If	VES you	are an offsite recycler but i	not the
excluded recycle											ı		Ш	IES	∐ NO					Complete a Recyclable Mate	
(offsite recycling	g)?																			erator that sends you mater	ials.
		Bu	ısine	sse	es tha	t or	nly ser	ıd re	ecyc	lable	e m	ate	rials	to an	offsite recyclers	are	not 1	requi	red to file	this report	
					I	[. (	OFF	SIT	E (	GEN	<b>NE</b>	RA	OTA	RO	F RECYCLA	ABI	LE N	IAT	ERIAL		
	Only complete when the generator is different from the recycler.																				
OFFSITE GENERA	TOF	R OF R	RECY	CI	LABI	ΕN	MATE	RIA	L							504	OFF	FSITE	GENERA	ATOR EPA ID#	505
CTDEET ADDRES	c																		506	DHONE	507
STREET ADDRES	STREET ADDRESS 506 PHONE 507																				
CITY																508	STA	TE	509	ZIP CODE	510
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MAILING ADDRESS (IF DIFFERENT) 511																					
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CITY															_	512	STA	ATE	513	ZIP CODE	514
									I	II.	C	ER	TIF	TICA	TION SECT	Oľ	N				
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure																					
that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete.																					
and control and complete.																					
SIGNATURE OF C	ERT	TFIER												DAT	R.	515	NAI	ME O	F DOCUM	MENT PREPARER	516
		L ILK												2111	_		1 1/2 11		. 20001		
NAME OF SIGNER	R (pr	int)										5	517	TITL	E OF SIGNER		<u> </u>				518

#### Recyclable Materials Biennial Report Page 1

Complete this report if you recycle more than 100 kilograms per month of recyclable material under a claim that the material qualifies for an exclusion or exemption pursuant to HSC 25143.2. Facilities that recycle at the same location at which the material was generated (onsite recyclers) and facilities that recycle materials generated at an offsite location (offsite recyclers) must complete a report. Persons who send materials to another location to be recycled, and who do not recycle material onsite under a claim to an exclusion or exemption provided in HSC 25143.2, need not complete a report.

Offsite recyclers must complete one report for each generator from whom they receive recyclable materials. Complete a separate Page 2 of the Report for each recyclable material. When this report is submitted, provide a copy of the completed report to the generator of the material recycled.

Refer to HSC 25143.10 for reporting requirements for recyclers.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

- 1. FACILITY ID NUMBER - Leave this blank. This number is assigned by the CUPA. This is the unique number that identifies your facility.
- EPA ID NUMBER Enter your facility 12-character U.S. Environmental Protection Agency (U.S. EPA) or California 2. Identification number. For facilities in California, the number usually starts with the letters ACA. If you do not have a number contact the DTSC Telephone Information Center at (916) 324-1781, (800) - 61-TOXIC or (800) 61-86942, to obtain one.
- BUSINESS NAME Enter the full legal name of the business.
- 500. BEGINNING DATE OF REPORTING PERIOD Enter the beginning date of the reporting period for this report. This report is for two calendar years and is due on July 1 of every even-numbered year.
- 501. ENDING DATE OF REPORTING PERIOD Enter the ending date of the reporting period for this report.
- 502. ONSITE RECYCLING Check Yes if the recycling facility recycles more than 100 kilograms per month of recyclable material generated onsite under a claim that the material gualifies for an exclusion or exemption pursuant to HSC 25143.2. Check No if the recycling facility does not recycle onsite.
- 503 OFFSITE RECYCLING Check Yes if the recycling facility recycles more than 100 kilograms per month of recyclable material under a claim that the material qualifies for an exclusion, or exemption pursuant to HSC 25143.2, and that material was received from one or more offsite locations. Check No if the recycling facility does not recycle material generated offsite.
- 504 OFFSITE GENERATOR NAME If the generator is different from the recycler, enter the name of the person that generated the recyclable material. Complete a separate report for each generator.

material.

- 505 OFFSITE GENERATOR EPA ID NUMBER Enter the generators 12-character U.S. Environmental Protection Agency (EPA) identification number. If the generator needs but does not yet have an identification number, the owner or operator can contact the Telephone Information Center at (916) 324-1781.
- 506 OFFSITE GENERATOR STREET ADDRESS -
- Complete items 506-510 for each generator of recyclable
- 507 OFFSITE GENERATOR PHONE NUMBER
- 508 OFFSITE GENERATOR CITY
- 509 OFFSITE GENERATOR STATE
- 510 OFFSITE GENERATOR ZIP CODE
- 511 OFFSITE GENERATOR MAILING ADDRESS -
- 512 CITY FOR MAILING ADDRESS

- Complete items 511-514 if the mailing address for the offsite generator is different from the street address.
- 513 STATE FOR MAILING ADDRESS
- 514 ZIP CODE FOR MAILING ADDRESS
  - SIGNATURE OF CERTIFIER The business owner/operator of the recycling facility shall sign in the space provided. This signature certifies that the signer believes that the information submitted is true, accurate, and complete.
- 515 DATE CERTIFIED Enter the date that the certification was signed.
- 516 NAME OF DOCUMENT PREPARER Enter the name of the person who prepared the report.
- 517 CERTIFIER NAME Enter the full printed name of the certifier.
- 518 CERTIFIER TITLE Enter the title of the person signing the report.

#### ROSEVILLE FIRE DEPARTMENT UNIFIED PROGRAM CONSOLIDATED FORM HAZARDOUS WASTE

## **RECYCLABLE MATERIALS REPORT - PAGE 2**

FOR EXCLUDED OR EXEMPTED MATERIALS ONLY

(one description per material recycled, attach additional pages, if needed)

TOTAL NUMBER OF RECYCLABLE MATERI	IALS	519	Page of					
FACILITY ID# 3 1 0	1 5		1 BUSINESS NAME (Same as F.	ACILITY NAME or DBA – Doing Business As)	3			
		IV RECYCLARLE M.	 ATERIAL INFORMATIO	)N				
			SCRIPTION	<i>7</i> 11				
	MMON NAM	ME OF RECYCLABLE 521	QUANTITY DURING TWO 52 YEAR REPORTING	UNITS ☐ a. Gallons ☐ c. Tons	523			
MATERIAL NUMBER MA	TERIAL		PERIOD					
				☐ b. Pounds ☐ d. Kilograms				
RECYCLABLE MATERIAL DESC	RIPTION				524			
THE TOLL BEEF THE TENER BEEF	1101							
RECYCLING PROCESS AND BENI	EFICIAL U	SE OF RECYCLABLE MATE	RIAL		525			
AUTHORIZING PROVISION OF HS	SC SECTIO	ON 25143.2 526	BASIS FOR CLAIM TO AN EX	CLUSION OR EXEMPTION	527			
	D D	DODLICE AND CONCERNIE	NT INFORMATION: OFFSIT	E ONLY				
Only complete if recyclable				to HSC Section 25143.2(b) or (d)(5) or (6).				
HAZARDOUS CONSTITUE	ENT	HAZARDOUS (	CONSTITUENT	LIST FINAL PRODUCT(S) MADE FROM THIS				
				RECYCLABLE MATERIAL AND BENEFICIAL USE OF FINAL PRODUCT(S)				
		In Recyclable Material	In Final Product					
	528	529	531		533			
		UNITS 530	UNITS 532					
		□ a percent □ b ppm	a percent b ppm					
	534	535	537		539			
		UNITS 536	UNITS 538					
		a percent b ppm	a percent b ppm					
	540	541	543		545			
		UNITS 542	UNITS 544					
		UNITS	Omis					
		1						
		a percent b ppm	a percent b ppm					
	546	a percent b ppm	a percent b ppm		551			

a percent b ppm a percent b ppm						
If more than four constituents are recycled, attach additional sheets using this same format.						
V. DOCUMENTATION OF KNOWN MARKET (Offsite recyclers only)						
DOCUMENTATION IS ATTACHED: Offsite recyclers must attach documentation that there was a known market for disposition of the recyclable material and any products manufactured from the recyclable materials and provide copy of this report to the generator when the report is submitted to the CUPA. (HSC Section 25143.10(a)(3)(A))						

#### Recyclable Materials Biennial Report Page 2

Complete a separate Page 2 of the Report for each recyclable material.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or AA identify whether the submittal is complete and if any pages are separated.

- 519 TOTAL NUMBER OF RECYCLABLE MATERIALS Enter the total number of recyclable materials which will be described in this report. Complete a separate Report Page 2 for each recyclable material and verify that the number of pages is the same as the total number listed here.
- 520 RECYCLABLE MATERIAL NUMBER Enter the unique identification number of the recyclable material that is described on this page. The recyclable materials can be numbered sequentially, or by any other system as long as the numbers are not repeated or duplicated.
- 521 COMMON NAME (RECYCLABLE MATERIAL) Enter the common name of the material recycled. This is the same as item 207, the Common Name on the Hazardous Materials Inventory Chemical Description page.
- 522 QUANTITY DURING TWO YEAR REPORTING PERIOD Enter the total quantity of this recyclable material recycled during the two-year reporting period. Round to nearest decimal. In this case, 1.4 tons = 1 ton reported.
- 523 UNITS Enter the unit of measure for the quantity reported in item 522.
- 524 RECYCLABLE MATERIAL DESCRIPTION Describe the recyclable material that was used in the recycling process, if not described in item 521, COMMON NAME.
- 525 RECYCLABLE MATERIAL PROCESS DESCRIPTION Describe the recycling process and, if the recyclable material was used to provide a product, or was used as a substitute for a product, describe the beneficial use of the recyclable material.
- 526 AUTHORIZING PROVISION OF HSC SECTION 25143.2 Enter the subdivision(s), and subparagraph(s) (if applicable) of HSC 25143.2 that served as the basis for the claim to exemption or exclusion. For example:HSC 25143.2(d)(2)(C).
- 527 BASIS FOR CLAIM TO EXCLUSION OR EXEMPTION Explain the basis for the claim to an exclusion or exemption.
- 528. HAZARDOUS CONSTITUENT 1-4 Describe up to four hazardous constituents of the recyclable material (use common name, if appropriate). If more than four constituents of the recyclable material are recycled, attach additional sheets using the same format as on the UPCF. (Report for constituents 2 through 4 in 534, 540, and 546.)
- 529. CONCENTRATION RECYCLABLE MATERIAL 1-4 Enter the concentrations of up to four hazardous constituents of the recyclable material as a decimal number. (Report for constituents 2 through 4 in 535, 541, and 547.)
- 530. UNITS RECYCLABLE MATERIAL 1-4 Enter the unit of measure of the concentration that is most appropriate, for up to four hazardous constituents of the recyclable material. (Report for constituents 2 through 4 in 536, 542, and 548.)
- 531. CONCENTRATION FINAL PRODUCT 1-4 Enter the concentrations in the final product of up to four hazardous constituents of the recyclable material as a decimal number. (Report for constituents 2 through 4 in 537, 543, and 549.)
- 532. UNITS FINAL PRODUCT 1-4 Enter the unit of measure of the concentration in the final product, for up to four hazardous constituents of the recyclable material. (Report for constituents 2 through 4 in 538, 544, and 550.)
- 533. FINAL PRODUCT/USES FOR CONSTITUENT 1-4 Describe the final product(s) that resulted from the recycling process and how each product was beneficially used. (Report for constituents 2 through 4 in 539, 545, and 551.)
- 552. DOCUMENTATION For offsite recyclers, check the box to indicate that documentation of known market is provided. Documentation is required pursuant to HSC 325143.10(a)(3)(A) to show that there was a known market for disposition of the recyclable material and any products manufactured from it.