

INSTRUCTIONS FOR COMPLETING BUSINESS DISPOSAL PILOT FORM

You will need to bring two (2) completed copies of the disposal form to the disposal site. *We can not make copies at the facilities.*

Please *complete* the form carefully, including the inventory. This information is important and will help to guide future plans for SQG disposal.

The form can be filled out on line and the two copies printed.

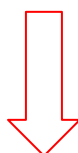
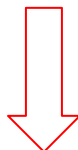
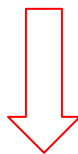
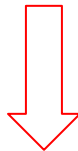
Saving the completed form on your computer (under **File – Save as**) allows you to edit your information. This also allows you to retain an electronic record.

Saving a blank form as a file on your computer (under **File – Save as**) allows you to complete it later and/or re-use the form.

Closing the form without saving it to your computer will delete any information you added. Another alternative is to print two blank forms to fill out by hand. (Print legibly)

You will need to bring two (2) completed copies of the form to the disposal site. Site staff will verify waste acceptance on each copy.

SEE A COMPLETED EXAMPLE BELOW





BUSINESS DISPOSAL FORM

All information on this form is required for participation.

Please **PRINT** legibly and firmly - You are making multiple copies.

Company: ABC Downgear, Inc.

Address: 1234 Roadhill Ave. SE Auburn 98002
Street Location (no P.O. box please) City Zip

Type of Business: Bicycle Repair
(ex. auto repair, nail salon, small appliance repair)

Office Phone Number: 253-555-5555 Owner/Mgr. Name: John Doe

E-Mail Address: abcd@network.com

NOTICE: This program is for King County businesses only that generate less than 220 lbs (or 27 gal) of hazardous waste monthly and less than 2.2 lbs. (1 qt) of certain Extremely Hazardous Wastes, and are Conditionally Exempt Small Quantity Generators under Washington State Department of Ecology Dangerous Waste Regulations (WAC 173-303). For details visit www.lhwmp.org/home/BHW/sqg.aspx or call our Business Waste Line at 206-263-8899.

I certify, to the best of my knowledge, all of the information I entered on this form is correct.

Name of Driver: John Smith Vehicle License #: 765 FLY

Signature of Driver _____ Date _____

Businesses should retain a copy of this receipt for a minimum of 5 years as proof of disposal.

Waste Type	How much?	Quantity/Amount (units) (check one for each waste type)	Office use only		
			code	quant.	units
Example:Waste Oil	3	<input checked="" type="checkbox"/> gallons <input type="checkbox"/> quarts			
Aerosols	10	items			
Batteries (auto) Limit 5	2	items			
Batteries (other than auto)	7	pounds			
Liquid Pesticides		<input type="checkbox"/> gallons <input type="checkbox"/> quarts			
Oil-based paint	5	<input checked="" type="checkbox"/> gallons <input type="checkbox"/> quarts			
Solid Pesticides		<input type="checkbox"/> pounds			
Used paint thinner/solvent/gasoline	2	<input type="checkbox"/> gallons <input checked="" type="checkbox"/> quarts			
Waste oil	5	<input checked="" type="checkbox"/> gallons <input type="checkbox"/> quarts			
Write in other wastes		Write in container/item size for each waste			
Concrete Sealer	2	Gallons			
Adhesive	1	Gallon			

Staff Only: Waste Received by: _____ Facility: SS - FS - WMB - NS
LHWMP Site Representative Circle one WMB City

Total Weight: _____ Service Date: _____

Original: King County LHWMP Copy: Customer