

WASTE DISPOSAL VARIANCE APPLICATION

NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF WASTE MANAGEMENT

SFN 51098 (06-2022)

Clear Fields

FOR STATE USE ONLY
File
County

Please read the Department's Waste Disposal Variance Guideline before completing this variance application. In addition, applicable portions of the state solid waste management regulations should be referenced in completing the applications. The source, type, and characteristics of your waste will determine which rules apply. Applications must be thorough and complete to be considered. A written Waste Disposal Variance must be received from the Department before disposal may begin. Please call the Department's Solid Waste Program at (701) 328-5166 to coordinate your application with a Department staff member.

5166 to coordina 1. Waste Desc	ate your application	ne Departme on with a De _l	oartment staff memb	er.	ase call	the Departmer	its Solid Wa	iste Program at (701) 328-	
Waste Source							Approximate Waste Volume		
General Geograp	hic Location							1	
Legal Description	County	Section	Township			Range	Range		
Responsible Party							Telephor	Telephone Number	
Address				City			State	ZIP Code	
2. Proposed V	/aste Disposal L	ocation		·			<u>.</u>		
of Section:	Section: To		Township			County			
Total Acreage				1					
Property Owner							Telephor	Telephone Number	
Address				City	City			ZIP Code	
Present Land Use				Future Land Use					
3. Contractor	For Waste Dispo	sal		-1					
Name				Contact					
Address				City			State	ZIP Code	
Telephone Number				Mobile Telephone Number					
Equipment Used	for Waste Disposal								
4. Maps									
	aps accompany the d Soil Survey Map		ee Instructions in <u>Dispo</u> Unpublished Soil Surve			leline): CFSA Map	Тор	ographic Map	
5. Disposal Si	te and Soil Char	acteristic							
Site Slope (percent) Distance to Surface Water (feet)			Depth to Seasonal High Water Table (feet)						
Soil Type and Tex	ture	ı		1					

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6. Disposal Site Design							
Base Grade							
Linear Design							
Final Cover Design							
Leachate Collection System (if applicable)							
Diagrams Enclosed of These Components Yes No							
7. Supplemental Application Forms							
Indicate which supplemental forms are completed and attached to the app Application for Open Burn Variance Notificat	olication: tion of Demolition and Renovation						
8. Local Zoning Approval							
Waste disposal must not conflict with local zoning ordinances. Con- or city) to determine waste disposal compliance with zoning ordina application.	sult with representatives of the applicable zoning jances. A representative of the local zoning jurisd	urisdiction (county, township iction <u>must</u> sign the					
I, the undersigned, certify that waste disposal at the location desc	ribed on this application does not conflict with loc	al zoning ordinances.					
Signature	Printed Name	Date					
Zoning Jurisdiction	Printed Name	Date					
9. Signatures Signatures are required by the following: the party responsible for contractor; and owner of waste disposal site.	the waste and/or owner of the property schedule	ed for demolition; the					
Party Responsible for Waste: The waste and/or the structure sidescribed in the Department's Waste Disposal Variance Guidel demolition.	scheduled for demolition has been inspected. Prince will not be disposed and/or will be removed	phibited waste or materials from the structure prior to					
Signature	Printed Name	Date					
Contractor: The waste disposal site will be operated and closed a	according to Department's Waste Disposal Variar	ıce Guideline.					
Signature	Printed Name	Date					
Disposal Site Owner: A notification of inert waste disposal will be filed with the County Register of Deeds. The notification will be completed according to the Department's Waste Disposal Variance Guideline. Closed solid waste management units may not be used for cultivated crops, heavy grazing, buildings, or any other use which might disturb the protective vegetative and soil cover. The Department will be provided with a certified copy of the notice within thirty (30) days of filing.							
Signature	Printed Name	Date					
L	1	1					

Mail this application and supplemental forms to: North Dakota Department of Environmental Quality

Division of Waste Management

4201 Normandy Street Bismarck, ND 58503-1324

Telephone: 701-328-5166 \cdot Fax: 701-328-5200 \cdot Website: https://deq.nd.gov/WM