



**TRANSFER STATION FACILITY ANNUAL REPORT**  
NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY  
DIVISION OF WASTE MANAGEMENT  
12-2025

Telephone: 701.328.5166  
Fax: 701.328.5200  
Website: <https://deq.nd.gov/WM>

Please complete the form and sign. Attach additional pages as necessary.

Clear Fields

**1. Facility Information**

Facility Name	Owner/Operator Name		Telephone Number
Facility Mailing Address	City	State	ZIP Code
Facility Location Address	City	State	ZIP Code
Email Address	Permit Number		

**2. Calendar Period Covered by Report** (Ex. January 1<sup>st</sup> – December 31<sup>st</sup>)

From	To	Year
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**3. Annual Total Quantity of Each Waste Category Accepted for Transfer for Disposal:**

Check the box to indicate each unit of measurement (Ex. Tons or Cubic Yards)

Waste Type	Total Waste Amount	Unit of Measurement
Industrial Waste		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )
Inert Waste		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )
Municipal Solid Waste (MSW)		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )
Special Waste (i.e. Coal Combustion Residuals (CCR), Oilfield and Special)		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )

**4. Annual Total Quantity of Each Waste Category Segregated for Recycling:**

Check the box to indicate each unit of measurement (Ex. Tons, Cubic Yards, or Units)

This section is intended only for waste types segregated for recycling purposes

Waste Type	Total Waste Amount	Unit of Measurement
Asphalt & Concrete		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )
Compost & Yard Waste		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )
Electronic Waste		<input type="checkbox"/> Tons <input type="checkbox"/> Units
Household Hazardous Waste (HHW)		<input type="checkbox"/> Tons <input type="checkbox"/> Units
Land Treatment		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )
Scrap Metal/White Goods		<input type="checkbox"/> Tons <input type="checkbox"/> Units
Tires		<input type="checkbox"/> Tons <input type="checkbox"/> Units
Wood Waste (ex. burned or given away) – Includes items such as trees, branches, and pallets		<input type="checkbox"/> Tons <input type="checkbox"/> Cubic yards (yds <sup>3</sup> )

5. Amount of Waste Put Into Each Surface Impoundment(s) During the Reporting Period:

*This question may not be applicable to all facilities*

6. Noncompliance (Explain Any Occurrences of Noncompliance)

7. Name, Date, and Signature of the Preparer:

Signature	Date
Printed Name	

OPTIONAL ANNUAL INFORMATION BELOW:

1. Operation – Provide the tipping fee for each type of waste the facility accepts.

☐

*Please check the box if the information you have provided meets the requirements for confidential business information in accordance with NDCC Subdivision 44-04-18.4(2)(a)) and you want to keep it confidential.*

E-mail a completed form to: [solidwaste@nd.gov](mailto:solidwaste@nd.gov) or mail completed form to:

North Dakota Department of Environmental Quality  
Solid Waste Program  
4201 Normandy Street  
Bismarck, ND 58503-1324