

Contact Name

## LAND APPLICATION WORKSHEET

## NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF WASTE MANAGEMENT

SFN 62287 (02-2023)

Telephone: 701-328-5166
Fax: 701-328-5200
Email: solidwaste@nd.gov
Website: https://deq.nd.gov/wm

This worksheet is intended to help implement the Department's **Guideline 39 - Septage**, **Sump and Pit Waste**, **and Restaurant Grease Trap Waste Management**, specifically for those generators who intend to land apply such inert wastes. Any person who land applies waste from a business or commercial operation is subject to the provisions of the North Dakota Solid Waste Management Rules (NDAC 33.1-20). Please call the Department's Solid Waste Program at 701-328-5166 to coordinate your plan with a Department staff member. The Department's guidelines can be downloaded at: <a href="https://deq.nd.gov/wm/Publications.aspx">https://deq.nd.gov/wm/Publications.aspx</a>

Telephone Number

Street or PO Box Maili	ing Address	Email Addres	Email Address						
City		State	ZIP Co	ode					
		olease attach copies o		or description:					
Name of Waste Source		Waste Type (	Waste Type (describe)						
Approximate Volume/\	<b>Year</b>	How is the wa	How is the waste generated?						
Does the waste have a	any free oil, free grease, shee	en, odor, or other unusual char	acteristic? Describe						
	use supplemental sh	eets and maps as nec	essary. Also discus	nple, S1/2 of SE1/4 of NV s any site-specific issue					
Site No. 1	of Section:	Township:	Range:	County:					
Property Owner			Teleph	one Number					
Total Acreage		Appli	Application Rate (tons, yards, or gallons per acre)						
Describe soil type, slop	pes, management issues (soi	il incorporation, tillage, etc.) –	Please attach map (soil sur	vey) with site highlighted					
Will material be stored	on-site? If so, please descri	be							
Site No. 2	of Section:	Township:	Range:	County:					
Property Owner			Telephone Number						
Total Acreage		Appli	Application Rate (tons, yards, or gallons per acre)						
Describe soil type, slop	pes, management issues (soi	il incorporation, tillage, etc.) –	Please attach map (soil sur	vey) with site highlighted					

wiii material be stored t	on-site? If so, please descri	ibe						
Site No. 3	of Section:	То	wnship:		Range:		Cour	nty:
Property Owner						Telephone Nu	mber	
Total Acreage				Applica	tion Rate (tons, y	vards, or gallons	s per acre)	
	na managament inguas (as	il in composati	on tillogo					i abto d
Describe soil type, slope	es, management issues (so	iii iricorporatii	on, illiage, i	elc.) – Pi	ease allach map	(Soli Survey) wi	ın site nigni	igniea
Will material be stored of	on-site? If so, please descri	ibe						
	discuss conservatio							
	e and pasture mana at surface water pollu					tion buffers	s, and o	tner conservation
	enalty of law that th ecordance with a sy							
	mation submitted. B directly responsible							
my knowledge a	nd belief, true, acco cedures. I am aware	urate and	comple	ete. A	ctivities will	be condu	cted in a	accordance with
•	cedures. Tam aware	tilat trier	e are sig	IIIIICai	n penanies ic	or Submittin		
Applicant's Signature:							Date Sign	ed:
Applicant Name (Print)		Applican	t Title			Telephone I	Number	
Street or PO Box Mailin	g Address				Email Address			
City			State			ZIP Code		
,								
	eet and suppleme	ntal			akota Depar			ntal Quality
information to:  Division of Waste Management 4201 Normandy Street								
					k, ND 58503			
	Staff Reviewer	or Local F	Public He	ealth U	nit (or other	authorized	person)	
Print Name			Signature		. (5: 55)			Date