

**6 NYCRR Part 364**  
**Waste Transporter Registration Application**

New York State Department of Environmental Conservation  
Division of Materials Management  
625 Broadway, 9<sup>th</sup> Floor  
Albany, NY 12233-7251

Applicants for a registration, or for modification or renewal of an existing registration, must use this application form. Forms are available on the Department's website or upon request by calling (518) 402-8792. **All applications for new registrations must bear original signatures and must be mailed to the above address.** Applications for modification or renewal of an existing registration may be faxed to (518) 402-9034 or e-mailed to [transport@dec.ny.gov](mailto:transport@dec.ny.gov). Once authorized, registrations will be mailed to applicants; registrations will not be available for pick-up. Registrations are valid for one year from the date of authorization.

**REGISTRATIONS ARE NOT VALID UNTIL AUTHORIZED BY THE DEPARTMENT.**

All sections of this application must be completed. Incomplete applications will not be processed and will be deemed "Incomplete." Please verify application is complete before submitting.

**SECTION A – TYPE OF APPLICATION**

Do you currently have a valid Part 364 **PERMIT**?     No                       Yes, Permit Number: \_\_\_\_\_

**NEW**

Once authorized, a Registration number will be assigned. Holders of a currently valid Part 364 Permit will not be assigned a separate Registration number, but will use the Permit number.

**MODIFICATION**

Registration Number: \_\_\_\_\_

**RENEWAL**

Registration Number: \_\_\_\_\_

**SECTION B – REGISTRANT'S INFORMATION**

**REGISTRATION NO.** \_\_\_\_\_

Business Name \_\_\_\_\_

Business Physical Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

County \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Business Mailing Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

**SECTION C – WASTES TO BE TRANSPORTED**

REGISTRATION NO. \_\_\_\_\_

**(check all that apply)**

	<b>Add</b>	<b>Delete</b>
Construction and Demolition Debris [364-3.1(d)] (includes all categories of fill material)	<input type="checkbox"/>	<input type="checkbox"/>
Commercial Solid Waste [364-3.1(c)]	<input type="checkbox"/>	<input type="checkbox"/>
Household Hazardous Waste [364-3.1(b)]	<input type="checkbox"/>	<input type="checkbox"/>
Regulated Medical Waste [364-3.1(a)]	<input type="checkbox"/>	<input type="checkbox"/>
Sharps [364-3.1(e)]	<input type="checkbox"/>	<input type="checkbox"/>

**PLEASE TAKE NOTICE**, that transport of regulated waste not identified on your registration (**Section C**) is a violation of the provisions of Environmental Conservation Law (ECL) §27-0305 and regulations promulgated pursuant thereto. ECL §71-2703 provides that any person who violates any of the provisions of, or who fails to perform any duty imposed by Title 3 of Article 27 of this chapter or any rule or regulation promulgated pursuant thereto, or any term or condition of any certificate or permit issued pursuant thereto, or any final determination or order of the commissioner made pursuant to this title shall be liable for civil and/or criminal penalties. RMW may be transported (liability insurance coverage required) from generator owned or operated satellite locations in single loads of less than 50 pounds per month for the purposes of consolidation at a generator owned and operated central location, or to a hospital affiliated with and has a written contract with the generator.

**SECTION D – CERTIFICATION**

I hereby certify that the information contained in this application submitted in support of obtaining, modifying or renewing a New York State Waste Transporter Registration contains no information that I know to be false, incomplete, or to have changed prior to the date of submission without notification to the Department. I am aware that if I have knowingly omitted or falsified any information required to be disclosed, processing of the application may be delayed and the registration sought may be denied or subsequently revoked. I am aware that false statements or omissions herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the NYS Penal Law. Further, I affirm that all transfer, storage, treatment and disposal facilities to which wastes will be/are transported are authorized to accept the category of waste. Finally, I agree to indemnify and hold The People of the State of New York, Department, their officials, employees and contractors harmless from any claim or liability arising directly or indirectly out of this registration application, and the information contained herein, and any registration issued pursuant thereto.

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_