



## Biennial Update (BU)

For more details, please refer to Part C of the guidance:

<http://www.dec.ny.gov/chemical/8769.html>

Facility Name –

EPA ID –

Contact Name at Facility -

Title of Contact –

Phone Number(s) –

Email Address –

Fax Number (optional) –

Date of Submission -

Check if your mailing address changed. If so, provide new address in comments box below.

Check if you hold a Part 373 permit for Treatment, Storage and Disposal.

Check if you are a generator of acute hazardous wastes.

Additional Comments (optional) -

Do you have any **new** Waste Streams since your last submittal?.....yes      no

**If yes**, describe (narratively) the source(s) of generation and the disposal method of the hazardous waste(s). For each waste stream identified, provide an evaluation of the technical feasibility and economic practicability of each waste reduction option outlined in [Part A.7](#) of the guidance.

**If no**, fill in the required information for your existing waste streams on Pages 3 through 6 and in [Tables 1 and 2](#).

For each waste stream, provide an estimate, and basis for such estimate, of the costs incurred for managing each waste, including but not limited to, storage costs, on-site treatment or disposal costs, transportation costs, commercial disposal fees and regulatory fees in accordance with [Part C.2](#) of the guidance.

**If changes described in the following bullet-points occurred at your site since your previous BU, provide a description in the box below. If there were no changes, indicate accordingly.**

- For any hazardous waste stream that is no longer generated or is no longer classified as hazardous, an explanation must be provided;
- Changes in existing or planned educational training and other programs provided to employees to motivate hazardous waste reduction efforts and increase awareness of potential hazardous waste reduction opportunities; and
- Changes in your commitment, priorities and goals, resource requirements, monitoring program and plans and schedules for future hazardous waste reduction actions, including the designation of the office or department responsible for implementing the waste reduction program.

**Use this space to re-evaluate the technical and economic feasibility of waste reduction alternatives for each waste stream, and please note the following:**

- See [Part A.7](#) of the guidance for the list of waste reduction alternatives.
- Any changes to selected waste reduction alternatives made since the previous BU must be explained here.
- Any waste reduction alternatives that are selected need to be included on [Table 2](#), along with an estimated waste reduction, return on investment, and a goal date.
- *Note: A new evaluation needs to be completed for any waste streams that are being included in your plan for the first time. For existing waste streams, a re-evaluation of the waste reduction alternatives needs to be completed.*

# REQUIRED TABLES

An excel document for **tables 1 and 2** can be found to the left of this page as an attachment. You may use this document, or attach your own tables to this pdf. Please click the [paperclip icon](#) to edit the excel tables which will save directly to this pdf.

Please check the boxes below once you have completed each table.

Table 1

Table 2

## CERTIFICATION

This page should be signed and dated by at least one responsible official or senior staff member. An additional signatory is optional.

"I am a senior facility manager or authorized facility signatory, and am fully authorized to commit financial and/or staff resources to implementing this HWRP. In addition, I am familiar with the requirements of Article 27, Section 0908 of the Environmental Conservation Law. Further, I have personally examined and am familiar with the information contained in this HWRP. The information contained in this HWRP is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete."

**Optional:** You may provide an additional signatory below.