

**6 NYCRR Parts 364/381**  
**Waste Transporter Permit 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 permit, or for modification of an existing permit 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 permits must bear original signatures and must be mailed to the above address.** Applications for modification may be mailed, faxed to (518) 402-9034, or e-mailed to [transport@dec.ny.gov](mailto:transport@dec.ny.gov). Once authorized, permits will be mailed to applicants; permits will not be available for pick-up. **DO NOT remit payment with your application: you will be invoiced separately.**

**TYPE OF APPLICATION: (check one)**

- New Permit Application** (Complete Sections **A - F**)  
Once authorized, a permit number will be assigned.

Have you ever had a Part 364 Permit/Registration?

No    Yes, Permit/Registration Number: \_\_\_\_\_

- Modification Application** (Complete Sections **A and B**, and any changes to Sections **C - F**).  
**Permit Number:** \_\_\_\_\_

**Check One:** Process Modification Upon Receipt \_\_\_\_\_  
Process Effective of Upcoming Renewal Date \_\_\_\_\_

(If no selection, modification request will be processed Upon Receipt)

**Application Sections Include the Following:**

- A** Name and Address
- B** Certification
- C** Waste Descriptions
- D** Receiving Facility Information
- E** Vehicle Information
- F** Insurance

**Note:** Any of the sections of the application that are not complete will be indicated, and the entire application may be returned to the applicant. Such returned application will serve as the Department's "**Incomplete Notification.**" Once corrected, the entire application must be returned to the Department.

**SECTION A – NAME and ADDRESS**

PERMIT NO. \_\_\_\_\_

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

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

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

County \_\_\_\_\_

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

USEPA ID No. \_\_\_\_\_ (required for transporters of hazardous waste/waste oil)

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

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

Address vehicles are stored when not in use

Street \_\_\_\_\_

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

**SECTION B – CERTIFICATION**

I hereby certify that the information contained in this application submitted in support of obtaining a New York State Regulated Waste Transporter permit 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 also certify that all employees who are or will be involved in the transportation and handling of hazardous materials or medical waste have been or will be trained (**every three years**) in accordance with the requirements set forth in 49 CFR §172.700 subpart H, and 29 CFR §1910.120 and 1910.200 (**conducted annually**) before they handle hazardous materials. I also certify that all insurance coverages referenced herein comply with 6 NYCRR 364-4.7. 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 permit sought herein may be denied or subsequently revoked. I am aware that false statement or omissions herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the NYS Penal Law, and that failure to pay all outstanding fees, provide proof of general liability insurance (hazardous, low level radioactive and medical waste transporters only), evidence of workers' compensation insurance or submit an annual report for the previous calendar year, may delay processing or result in revocation of the permit. Further, The Permittee affirms that all transfer, storage, treatment and disposal facilities to which waste will be/are transported are authorized to accept the waste(s) identified in this permit. Finally, I agree to indemnify and hold The People of the State of New York, the Department, their officials, employees and contractors harmless from any claim or liability arising directly or indirectly out of this permit application, and the information contained herein, and any permit issued pursuant thereto.

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

Date of Birth \_\_\_\_\_ (required for new applications only)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NON-INDUSTRIAL/COMMERCIAL WASTES:**

“**Residential septage**” means the contents of a septic tank, cesspool or other individual sewage treatment facility that receives domestic sewage wastes. It does not include contents of portable toilets.

“**Residential raw sewage or portable toilet waste**” means any untreated sanitary waste from residential sources or portable toilets.

**INDUSTRIAL/COMMERCIAL WASTES:**

“**Non-Residential raw sewage or sewage contaminated waste**” means any untreated sanitary waste from an industrial/commercial source.

“**Sewage sludge**” or “**Biosolids**” means the accumulated semi-solids or solids resulting from treatment of waste waters from publicly or privately owned or operated sewage treatment plants.

“**Water treatment plant residuals**” means the solids resulting from the treatment of raw water at municipal or private water treatment plants.

“**Grease trap waste (brown grease)**” means fats, oils, grease and food residues generated from a food establishment that are captured in a device meant to prevent these materials from entering the sewer or septic system.

“**Yellow grease**” means vegetable or animal-based oil generated from cooking or frying foods and is a solid at room temperature (68 degrees Fahrenheit). It may contain food particles and water.

“**Waste oil**” means used engine lubricating oil and any other oil, including but not limited to, fuel oil, motor oil, gear oil, cutting oil, transmission fluid, hydraulic fluid, dielectric fluid, oil storage tank residue, animal oil, and vegetable oil, which has been contaminated by physical or chemical impurities, through use or accident, and has not subsequently been re-refined.

“**Petroleum contaminated soil**” means soil impacted by gasoline, diesel and used oil, but tests below hazardous waste levels.

“**Waste tires**” means waste tires transported for a fee for the purpose of reuse, recycling, or disposal, except those tires collected and transported incidental to the collection and transportation of solid waste.

“**Friable asbestos-containing waste**” means any waste containing greater than one percent asbestos that can be crumbled, pulverized, or reduced to powder by hand pressure when dry; and any asbestos-containing waste that is collected in a pollution control device designed to remove asbestos.

“**Low-level radioactive waste**” or “**LLRW**” means radioactive material that is not high-level radioactive waste, transuranic waste, spent nuclear fuel, or the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its source material content; and any waste the United States Nuclear Regulatory Commission classifies as low-level radioactive waste.

“**Hazardous waste**” means solid waste that is a RCRA or NYS hazardous waste as defined in Part 371 of this Title.

“**Universal waste**” means any of the following hazardous wastes that are subject to the universal waste requirement of 40 CFR 273.2 through 273.5: batteries (§273.2); pesticides (§273.3); mercury-containing equipment (§273.4); and lamps (§273.5).

“**Industrial-commercial waste**” means a waste which originates at, is generated by, or occurs as a result of any industrial or commercial activity (e.g., including but not limited to pharmaceutical waste, rendering waste, waste from household hazardous waste collection events, treated medical waste).

“**Oil and Gas Well Drilling Cuttings**” means wastes from processes utilizing oil-based/polymer-based mud containing mineral oil lubricant.

“**Oil and Gas Well Completion or Production Wastes**” means flowback water, production brine, treatment residues, etc.

“**Regulated medical waste**” means waste generated in diagnosis, treatment or immunization of humans, or animals, in research pertaining thereto, or in production and testing of biologicals; provided, however, that regulated medical waste must not include hazardous waste and household medical waste.

“**Infectious substance**” or “**infectious waste**” means a Category A or B material known or reasonably expected to contain a pathogen (see 6 NYCRR 360.2(b)(146) for more details).

**PLEASE TAKE NOTICE** that transport of regulated waste not identified on your permit, in a vehicle not listed on your permit, and/or disposal of regulated waste at an unauthorized facility, or at an authorized facility not listed on your permit 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 of 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.

**SECTION D – RECEIVING FACILITY INFORMATION****PERMIT NO.** \_\_\_\_\_

*Please use the waste types found in Section C and type or print legibly the disposal facility name, address, phone number and permit or registration number. For permit renewals or modifications, list only the facilities you want added or deleted. Attach additional pages if necessary.*

Waste Type	Receiving Facility Name, Address, and Phone Number	Receiving Facility Permit/ Registration Number  Or  Beneficial Use Determination (BUD) No.	What should be done with this facility on the permit?
			<input type="checkbox"/> Add <input type="checkbox"/> Delete
			<input type="checkbox"/> Add <input type="checkbox"/> Delete
			<input type="checkbox"/> Add <input type="checkbox"/> Delete
			<input type="checkbox"/> Add <input type="checkbox"/> Delete
			<input type="checkbox"/> Add <input type="checkbox"/> Delete
			<input type="checkbox"/> Add <input type="checkbox"/> Delete

**\*\*BE SURE ALL WASTE TYPES APPEAR WHEN APPLICATION IS PRINTED BEFORE SUBMITTING.**

**SECTION E – VEHICLE INFORMATION**

**PERMIT NO.**

*Please type or print legibly the license plate number(s) of the vehicles proposed to be used to transport regulated waste and where registered. For permit renewals or modifications, list only the vehicles you want added or deleted and check the appropriate box. Attach additional pages if needed.*

License Plate #	State/Province	What should be done with this plate on the permit?	Used for Septage and/or Residential Raw Sewage or Portable Toilet Waste only?
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
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		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Note: Fees Required to be Paid Annually for each Transport Vehicle**

1. *Residential Septage and Residential Raw Sewage or Portable Toilet Waste* - \$250 for first vehicle; \$100 for each additional vehicle of same waste type.
2. *All Other Regulated Waste* - \$500 for first vehicle; \$200 for each additional vehicle of same waste type.
3. For questions concerning fees, please contact the Regulatory Fee Unit at 518-402-9343.

## SECTION F – INSURANCE

### 1. LIABILITY INSURANCE – HAZARDOUS AND MEDICAL WASTE ONLY

*Proof of insurance as identified below must be submitted with your application or renewal. Proof of insurance must be submitted in the form of a certificate of insurance, showing NYS Department of Environmental Conservation as the certificate holder.*

**Policy or bond limits shall be:**

1. \$1,000,000 for the transport of waste oil and/or hazardous wastes not requiring a Hazardous Waste Manifest.
2. \$5,000,000 for the transport of hazardous wastes requiring a Hazardous Waste Manifest or low-level radioactive wastes in any vehicle which exceeds 10,000 pounds maximum gross weight.
3. \$1,000,000 for the transport of hazardous waste or low-level radioactive waste which does not exceed 10,000 pounds maximum gross weight.
4. \$100,000 for the transport of regulated medical waste.
5. Policies of insurance surety bonds must remain in effect throughout the term of the permit.
6. Only policies which provide a 35-day notice of intent to cancel by the insurer to the Department fulfill the requirement.

### 2. NYS WORKERS' COMPENSATION INSURANCE – ALL TRANSPORTERS

*Proof of insurance as identified below must be submitted with your application or renewal. This proof of insurance must be submitted in the form of a certificated of insurance, showing NYS Department of Environmental Conservation as the certificate holder. For additional information contact the Workers' Compensation Board at (866)298-7830 or at [www.wcb.ny.gov](http://www.wcb.ny.gov)*

CE-200 Certificate of Attestation of Exemption; or

C-105.2 or NTSIF U-26.3 Certificate of Workers' Compensation Insurance; or

SI-12 or GSI-10.52 Certificate of Workers' Compensation Self Insurance