

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD
SAN DIEGO REGION
 9174 Sky Park Court, Suite 100
 San Diego, California 92123-4340



TEMPORARY WASTE PILE CERTIFICATION

[SECTION A]

I. TEMPORARY WASTE PILE GENERATOR INFORMATION

Generator Name:			
Generator Contact and Title:			
Generator Mailing Address:			
City:	County:	State:	Zip:
Telephone:	Fax:	Email:	

II. WASTE INFORMATION

Local Oversight Program Case No.:		San Diego Water Board File No.:					
Waste Type:		<input type="checkbox"/> Gasoline	<input type="checkbox"/> Diesel	<input type="checkbox"/> Other Petroleum Hydrocarbons			
(check all that apply)		<input type="checkbox"/> Other Impacted Dredged Spoils	<input type="checkbox"/> Other:				
Contaminant Concentrations <i>(Used additional pages as needed):</i>							
Mean	Mean+80%CI	Mean	Mean+80%CI	Mean	Mean+80%CI	Mean	Mean+80%CI
Mean	Mean+80%CI	Mean	Mean+80%CI	Mean	Mean+80%CI	Mean	Mean+80%CI
Mean	Mean+80%CI	Mean	Mean+80%CI	Mean	Mean+80%CI	Mean	Mean+80%CI
Waste Pile Quantity (yd ³):							
Description of Containment Method:							

III. TEMPORARY WASTE PILE SITE INFORMATION

Site Property Owner Name:			
Site Address:			
City:	County:	State:	Zip:
Telephone:	Fax:	Email:	
Assessor Parcel Number(s):		Hydrologic Area/Subarea:	

IV. PROPERTY OWNER ACKNOWLEDGMENT

I hereby acknowledge receipt of the waste soil described in section II and that I have reviewed any associated reports. By signing this form I acknowledge that the Generator of this waste has certified that all 8.II.D waiver conditions have been met.

Signature (Owner or Authorized Representative)	Date
Print Name	Title

V. GENERATOR CERTIFICATION

I hereby certify that the information provided regarding soil characterization is a complete and accurate representation of the subject soil, and that the soil is not hazardous waste as defined by California Code of Regulations Title 22 and by the U.S. Environmental Protection Agency (Code of Federal Regulations Title 40), and that all 8.II.D waiver conditions have been met.

Generator Signature	Date
Print Name	Title

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**TEMPORARY WASTE PILE CERTIFICATION
[SECTION B]**

I. FINAL WASTE DISPOSAL INFORMATION

Final Disposition of Waste:			
<input type="checkbox"/> Off-site/Landfill Disposal	<input type="checkbox"/> On-site Reuse/Disposal		
<input type="checkbox"/> Off-site Reuse/Disposal	<input type="checkbox"/> Other:		
Property Owner/Discharger Name:			
Property Owner/Discharger Contact and Title:			
Property Owner/Discharger Mailing Address:			
City:	County:	State:	Zip:
Telephone:	Fax:	Email:	
Assessor Parcel Number(s):		Hydrologic Area/Subarea:	
Date(s) Waste Disposed:			
Quantity of Waste Disposed: (in cubic yards for each disposal date)			
Disposal Location(s): (for each disposal date)			

II. FINAL DISPOSAL CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature (Owner or Authorized Representative)

Date

Print Name

Title