



Monterey Regional Waste Management District

Service, Stewardship and Sustainability Since 1951

CESQG Tracking Sheet

Part 1 • Business Information

Appointment Date	Appointment Time	EPA ID Number (If applicable)
Phone Number	Fax Number	Haz. Mat Registration Number (If applicable)
Mailing Address		Name of Business
		Street Address (if different from mailing address)

Part 2 • Waste Description

Waste Type	Type of Hazard Label	Gal./can	Unit Price	Cost(\$)
Subtotal of Waste Cost				
Administrative Fee				
(Administrative Fee: \$25/Hour, Per Turn In)				
TOTAL				

*Administrative Fee: \$25/hour Per Turn In

MATERIALS FEES LIST					
No charge for auto batteries and used uncontaminated motor oil					
Acids/Bases	\$1.00/lb.	Fluorescent Tubes	\$ 0.20/ft.	Contaminated, Used Motor Oil or Gasoline	\$1.00/lb.
Aerosols	\$1.00/can	Fluorescent Bulbs	\$ 1.00/lb.	Oil Filters	\$1.00/ea.
Antifreeze	\$1.00/lb.	Gas Cylinders: Under 5 gal	\$20.00/ea.	Oxidizers	\$1.00/lb.
Asbestos (Non-friable Only)	\$1.00/lb.	Batteries:(Alkaline,NiCad/Lith)	\$ 1.00/lb.	Pesticides (Liquids/Solids)	\$1.00/lb.
Flammable Liquids	\$1.00/lb.	Oil Based Paint	\$ 1.00/lb.	Re-actives	\$5.00/lb.
Flammable Sludges	\$1.00/lb.	Mercury	\$ 3.00/lb.	Solvents	\$1.00/lb.
Flammable Solids					
				HHW Clean-up Service Fee (e.g. for illegally dumped material)	\$100.00/staff hr.

Part 3 • Certification

State and federal hazardous waste laws limit the use of household hazardous waste collection programs to households and those businesses that generate less than 100 kilograms (about 27 gallons or 220 lbs.) of hazardous waste per month and less than 1 kg of "extremely hazardous waste" per month.

My signature below certifies that I represent the business listed in Part 1 above and that this business generates less than 100 kg of hazardous waste per month and less than 1 kg of "extremely hazardous waste" per month.

My signature below also certifies that the wastes I am transferring to the CESQG Collection Program were generated within the District service area by the business listed above and that I have transferred these wastes to the MRWMD permanent Household Hazardous Waste Facility for proper management and/or disposal.

Signature	Name/Title/Date
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For staff use only:

License	Staff Initials	Check Number/Amount	<input type="checkbox"/> Cash Amount	<input type="checkbox"/> To Invoice
		() / \$	\$	\$