

**MOHAVE COUNTY DEVELOPMENT SERVICES  
ENVIRONMENTAL QUALITY**

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**SUSPECT WASTE DISPOSAL MANIFEST**

Please complete this form in its entirety and present to the Landfill Operator. Note: Waste tires shall only be received at the Cerbat or Mohave Valley Landfill. Please abide by the instructions of disposal site personnel.

**REQUIRED INFORMATION**

|                                   |       |                        |                      |                   |
|-----------------------------------|-------|------------------------|----------------------|-------------------|
| Generator of Waste (Company Name) |       |                        | Address of Generator |                   |
| City                              | State | Zip                    | Telephone            | FAX               |
| Landfill Name                     |       | Origin of Waste        |                      | Quantity of Waste |
| Vehicle Make                      |       | Vehicle License Number |                      | State             |
| Driver License Number             |       | State                  |                      | Expiration Date   |

**REQUIRED SIGNATURE**

I CERTIFY THAT THE WASTE TO BE DISPOSED OF IS REPRESENTATIVE OF THE MATERIAL TESTED AND APPROVED FOR DISPOSAL AND IS: 1) NOT CLASSIFIED AS HAZARDOUS WASTE, AND 2) IS ACCEPTABLE FOR DISPOSAL IN MOHAVE COUNTY'S PERMITTED SOLID WASTE FACILITIES, BOTH IN ACCORDANCE WITH THE REQUIREMENTS OF 40 CFR, PART 260 ET SEQ. AND AAC R 18-8-260 ET SEQ.

|                                   |       |      |
|-----------------------------------|-------|------|
| Owner or Representative Signature | Title | Date |
|-----------------------------------|-------|------|

**DETERMINATION AND CERTIFICATION**

Prior to acceptance of Suspect Waste for disposal at a Mohave County Solid Waste Facility, the following determinations and certifications must be obtained and the required test results submitted.

Applicable testing shall be determined by a qualified Engineer, registered in the State of Arizona, who is knowledgeable and proficient in this type of work. Testing shall be performed in accordance with the requirements of 40 CFR, Part 260 et seq. and AAC R 18-8-260 et seq. by a certified testing laboratory registered to do business in the State of Arizona. In addition, the material to be disposed of must pass Test Method Number 9095, Paint Filter Liquids Test, for further qualification as solid waste.

|  |
|--|
| <b>Description of waste to be tested:</b>  |
|  |
| <b>Quantity of waste to be disposed of:</b>  |
|  |
| <b>Source of waste (provide a process description and MSDSs for all material used in the process producing the waste):</b> |
|  |
|  |
|  |



**Is the Waste Generator classified by the EPA/ADEQ as one of the following?**

Conditionally Exempt Small Quantity Hazardous Waste Generator: ☐ Yes ☐ No

Large Quantity or Non-Exempt Small Quantity Hazardous Waste Generator: ☐ Yes ☐ No

**Applicable tests required and their associated test methods as determined by the Engineer of Record: (attach results)**

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### CERTIFICATION

I CERTIFY THAT THE WASTE TO BE DISPOSED OF IS REPRESENTATIVE OF THE MATERIAL TESTED AND APPROVED FOR DISPOSAL AND IS: 1) NOT CLASSIFIED AS HAZARDOUS WASTE, AND 2) IS ACCEPTABLE FOR DISPOSAL IN MOHAVE COUNTY'S PERMITTED SOLID WASTE FACILITIES, BOTH IN ACCORDANCE WITH THE REQUIREMENTS OF 40 CFR, PART 260 ET SEQ. AND AAC R 18-8-260 ET SEQ.

|                     |           |       |  |      |
|---------------------|-----------|-------|--|------|
| Engineer of Record  |           | Title |  | SEAL |
| Registration Number | Telephone | FAX   |  |      |
| Address             |           |       |  |      |
| City                | State     | Zip   |  |      |
| Signature           |           | Date  |  |      |

### ENVIRONMENTAL QUALITY AND WASTE DISPOSAL USE ONLY

**THIS SECTION TO BE COMPLETED BY LANDFILL OPERATOR.** A COPY OF THIS DOCUMENT WILL BE PROVIDED TO THE WASTE GENERATOR WITHIN 30 DAYS OF RECEIPT.

|   |             |                       |
|---|-------------|-----------------------|
| QUANTITY OF WASTE DISPOSED  | FEE CHARGED | TOTAL NUMBER OF LOADS |
| CERTIFIED BY LANDFILL OPERATOR  |             | Date                  |
| <b>REVIEWED AND APPROVED FOR DISPOSAL</b>                                     |             |                       |
|   | Date        | Expiration Date       |
| Luke Brazdys, Environmental Engineering Manager                               |             |                       |
| NOTE: TESTING DATA REMAINS VALID FOR ONE YEAR FROM THE DATE OF THIS APPROVAL. |             |                       |