



**INERT WASTE FACILITY ANNUAL REPORT**  
 NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY  
 DIVISION OF WASTE MANAGEMENT  
 SFN 53326 (6-2019)

Telephone: 701.328.5166  
 Fax: 701.328.5200  
 Website: <https://deq.nd.gov/WM>

Please complete and sign.

**1. FACILITY INFORMATION**

Facility Name	Owner/Operator Name		Telephone Number
Facility Mailing Address	City	State	ZIP Code
Facility Location Address	City	State	ZIP Code
Email Address	Permit Number		

**2. CALENDAR PERIOD COVERED BY REPORT** (use January 1-December 31: reports are due on March 1)

From Month	To Month	Year
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**3. ANNUAL QUANTITY OF EACH WASTE CATEGORY RECEIVED** (use monthly total logs)

*Indicate if amount is in Tons(T), Cubic Yards(YDS), or Units(U)*

Month	Yard Waste <input type="checkbox"/> T <input type="checkbox"/> YDS	White Goods <input type="checkbox"/> T <input type="checkbox"/> U	Concrete/Asphalt <input type="checkbox"/> T <input type="checkbox"/> YDS	Burnable <input type="checkbox"/> T <input type="checkbox"/> YDS	Tires <input type="checkbox"/> T <input type="checkbox"/> YDS <input type="checkbox"/> U	Other <input type="checkbox"/> T <input type="checkbox"/> YDS <input type="checkbox"/> U
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
<b>TOTALS</b>						

**4. NONCOMPLIANCE**

Explain Any Occurrences of Noncompliance

**5. CONSTRUCTION OR CLOSURE**

Discuss Any Construction or Closure Activities

**6. NAME, DATE, AND SIGNATURE OF PREPARER:**

Signature	Date
Printed Name	

**OPTIONAL ANNUAL INFORMATION BELOW:**

**Amount** of Inert Waste Annually **Imported** from Out-of-State (indicate tons or cubic yards)

Inclusion of the following information may or may not be required by your permit, but reporting where possible is encouraged. The inclusion of this information helps the Department more accurately track current waste trends in the state. Occasionally, this information is requested by the public, survey groups and other state and federal agencies. Any information your facility can volunteer is greatly appreciated.

**1. WASTE FLOW**

<b>Amount</b> of Inert Waste Annually <b>Imported</b> from Out-of-State (indicate tons or cubic yards) <input type="checkbox"/> T <input type="checkbox"/> YDS
<b>Source</b> of Inert Waste Annually <b>Imported</b> (indicate state(s) waste was generated from)

**2. COMPOSTING (if applicable)**

Amount of Compostable Material <b>Added</b> to the Composting Unit (indicate tons or cubic yards) <span style="float:right"><input type="checkbox"/> Unknown</span> <input type="checkbox"/> T <input type="checkbox"/> YDS
Amount of Finished Compost Material <b>Removed</b> from Composting Unit (indicate tons or cubic yards) <span style="float:right"><input type="checkbox"/> Unknown</span> <input type="checkbox"/> T <input type="checkbox"/> YDS

**3. RECYCLING (if applicable)**

Only include amount that was **removed for recycling or reuse** from the corresponding unit at the facility.  
**Indicate if amount is in Tons(T), Cubic Yards(YDS), or Units(U)**

Material	Amount		Material	Amount	
Concrete/Asphalt		<input type="checkbox"/> T <input type="checkbox"/> YDS	Tires		<input type="checkbox"/> T <input type="checkbox"/> YDS <input type="checkbox"/> U
Wood Waste		<input type="checkbox"/> T <input type="checkbox"/> YDS	Electronics		<input type="checkbox"/> T <input type="checkbox"/> U
Trees/Branches		<input type="checkbox"/> T <input type="checkbox"/> YDS	Scrap Metal		<input type="checkbox"/> T <input type="checkbox"/> YDS
Other (see below)		<input type="checkbox"/> T <input type="checkbox"/> YDS <input type="checkbox"/> U			

List any other materials your facility has recycled over this annual report period and amounts (if possible)
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**4. LANDFILL CAPACITY**

Estimated Capacity of Total Cubic Yards Remaining for Permitted Disposal Area
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**5. OPERATIONS**

Average Tipping Fee For Inert Waste (\$/Ton)
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Send completed form to:  
**North Dakota Department of Environmental Quality**  
**Division of Waste Management**  
 918 E. Divide Ave., 3rd Fl.  
 Bismarck, ND 58501-1947