NON-FRIABLE ASBESTOS WASTE CHARACTERIZATION

Santa Maria Regional Landfill
2065 E. Main Street
Santa Maria, CA 93454
(805) 925-0951 ext. 7270
Landfill-RC@cityofsantamaria.org

Generating Site Address: _____

Generator	**Transporter**
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Contact: _____	Transporter Contact: _____
Telephone: _____	Telephone: _____

Non-Friable Asbestos Waste Information

Type of Asbestos Containing Material (check all that apply):

☐ Pipe Wrap ☐ Transite ☐ Floor Tile ☐ Roofing Materials ☐ Construction Materials
☐ Mastic ☐ Coating/Glaze ☐ Linoleum ☐ Joint Compound ☐ Fire Doors/Panels
☐ Caulk ☐ Cement ☐ Ceiling Tiles ☐ Insulation (describe): _____
☐ Other (describe): _____

Attached Information: ☐ Asbestos Survey ☐ Asbestos Lab Analysis ☐ Other: _____

Does the attached information include verification, signed and dated, from a State Certified Laboratory or a CAL/OSHA Certified Asbestos Consultant, indicating classification of the material as "**Non-Friable**"? ☐ Yes ☐ No

Non-Friable Asbestos Waste Packaging Information

Asbestos is adequately wetted? ☐ Yes ☐ No

Asbestos is sealed: ☐ Double layer of 6-mil plastic (BAGGED) ☐ Double layer of 6-mil plastic (WRAPPED)
☐ 12-mil plastic Equivalent (describe): _____

Label includes the following: ☐ Yes ☐ No

"Contains non-friable asbestos fibers" "Avoid creating into dust" "Breathing asbestos dust may cause serious health issues"

Non-Friable Asbestos Waste Shipping Information

Total Quantity: _____ Estimated # of loads: _____

Shipping Frequency: ☐ Once ☐ Weekly ☐ Monthly ☐ Other: _____

Delivery Vehicle Type: ☐ Roll-Off ☐ Dump Trailer ☐ Pick-Up Truck ☐ Other: _____

Generators Certification

I hereby CERTIFY that (1) all information submitted on this form is complete and accurate (2) all known or suspected hazards have been disclosed (3) all information and analytical results submitted are representative of the waste. I further CERTIFY that the above named materials are non-hazardous per Title 22, CCR, Division 4.5, Chapter 11, Article 3, Section 66261 et. al. and are properly classified, described, packaged, marked and labeled, and in proper condition for transport according to the applicable regulations of the Department of Transportation and the rules of Santa Barbara County.

PRINTED NAME OF AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	DATE

TO BE COMPLETED BY SOLID WASTE REGULATORY COMPLIANCE STAFF

Disposal Approved: ☐ Yes ☐ No (Reason): _____ Disposal Date: _____

Approved by: _____ _____ _____
Print Name Signature Date