

**DAKOTA COUNTY ENVIRONMENTAL MANAGEMENT
14955 GALAXIE AVENUE - APPLE VALLEY, MN 55124**

2012 USE OF WASTE AS DAILY COVER REQUEST

Review (\$192) Rush Review (\$274)
 Renewal (\$113) Rush Renewal (\$151)
 Amendment (\$62) Rush Amendment (\$86)

COMPANY (GENERATOR) NAME _____
CONTACT PERSON _____
ADDRESS _____
CITY, STATE, ZIP _____
PHONE NUMBER _____ FAX _____
WASTE NAME _____
AMOUNT _____ (Yds/Tons/etc.) PER _____ (Day/Week/etc.)
DAKOTA COUNTY WASTE NUMBER _____ (Assigned by Dakota Co.)
LANDFILL _____
LANDFILL CONTACT _____

Does this waste have current Dakota County Codisposal approval? _____ (If no, please explain) _____

Does this waste have an odor? _____ (If yes, please describe) _____

Does this waste contain debris, sharps or other hazards? (If yes, please describe) _____

Does this waste have the potential to create dust? (If yes, please describe) _____

Does this waste pose a tracking problem? (If yes, please describe) _____

Is the waste soil or soil like? (If no, please explain) _____

I am requesting approval to stockpile this waste? (If yes, indicate where waste will be stockpiled and duration) _____

Landfill Certification

I certify that the information contained in this application is complete, and to the best of my knowledge, true and accurate. I certify that I am familiar with the requirement of Dakota County Ordinance No. 110, Solid Waste Management, and I certify that the proposed use as cover of this waste meets the requirements of Section 5.04 of the Ordinance. I agree to comply with said requirements and any conditions imposed by the Dakota County Environmental Management Department (Department) regarding the use of this waste as cover. I understand that this waste may not be stockpiled without Department approval and that only waste which is used as daily cover is exempt from the Dakota County host fee.

Signature

Title

Date