



# DAKOTA COUNTY VERY SMALL QUANTITY GENERATOR (VSQG) PROGRAM APPLICATION

COMPLETE THE FOLLOWING APPLICATION. SAVE AND EMAIL TO: VSQG@CO.DAKOTA.MN.US; OR PRINT AND MAIL OR FAX TO: DAKOTA COUNTY ENVIRONMENTAL RESOURCES, VSQG PROGRAM, 14955 GALAXIE AVENUE, APPLE VALLEY, MN 55124 | FAX: 952-891-7588

CONTACT NAME	PHONE	EMAIL	
NAME OF ORGANIZATION	EPA ID#	FAX NUMBER	
MAILING ADDRESS	CITY	STATE	ZIP
ADDRESS WHERE WASTE IS LOCATED (IF DIFFERENT)	CITY	STATE	ZIP
TYPE OF BUSINESS			

ARE YOU CURRENTLY REGISTERED OR LICENSED AS A HAZARDOUS WASTE GENERATOR WITH DAKOTA COUNTY?  YES  NO

**WASTE INVENTORY**  
Please list all containers and waste that you plan to bring to the Recycling Zone below. If you are unsure of the contents of a container or there is no label, please list as much information as you can. Attach additional information if necessary.

WASTE NAME	# CONTAINERS	TOTAL (LB, GAL, EACH)
1. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
2. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
3. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
4. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
5. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
6. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
7. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
8. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
9. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
10. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
11. <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

**By signing this form, I understand and agree to abide by the following terms and conditions.** I certify that the organization identified above generates less than 220 lbs of hazardous waste per month and is classified as a Very Small Quantity Generator. I understand that 1. Dakota County reserves the right to charge additional fees if the waste delivered differs from the inventory submitted or additional analysis or repacking of the waste is required; 2. Dakota County may refuse to accept any wastes that are not pre-registered and approved; 3. Completion of this and other forms does not expressly imply that the wastes listed on the waste inventory will be accepted; 4. I am required to read and follow the transportation guidelines provided to me; and 5. I am responsible for the safe and legal transport of wastes to The Recycling Zone.

SIGNATURE	TITLE	DATE

WASTE NAME

# CONTAINERS

TOTAL (LB, GAL, EACH)

12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			