

Name of Applicant:	Name of Facility:
Facility Mailing Address:	Facility Address:
City: State: Zip Code:	City: State: Zip Code:
Phone: Email:	Phone: Email:
Signature:	Date:

\*Please reference the appropriate section of WAC 173-350 for full requirements.

<input type="checkbox"/> <b>Location Requirements WAC 173-350-210(3)</b>	Location of documents in application	Complete (SCHD ONLY)
There are no specific location standards for recycling and material recovery facilities subject to this chapter; however recycling and material recovery facilities must meet the requirements provided under WAC 173-350-040	<b>Acknowledged</b> <input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> <b>Design Standards WAC 173-350-210(4)</b>	Location of documents in application	Complete (SCHD ONLY)
<b>Describe how the facility meets the regulatory requirements in the supporting documents. Indicate the location of all documents.</b>		
Recycling and material recovery facilities must be designed so that the facilities can be operated to meet the performance standards of WAC 173-350-040, and the following design standards:		
<ul style="list-style-type: none"> <li>Control public access, and prevent unauthorized vehicular traffic and illegal dumping of waste (4)(a)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Be sturdy and constructed of easily cleanable materials (4)(b)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Provide effective means to control rodents, insects, birds, and other vectors (4)(c)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Provide effective means to control litter including, but not limited to, orientation of the tipping floor in a manner that prevents prevailing winds from moving waste outside the collection area when other structures are not in place to prevent this (4)(d)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Provide a tip floor made of impervious material. The surface must be durable enough to withstand equipment (4)(e)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Cover the tipping floor to protect it from precipitation (4)(f)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Convey leachate from the tipping floor and any ancillary areas likely to collect leachate, such as wash down areas, to a surface impoundment, tank, or sanitary sewer, or use other methods approved by SCHD to prevent uncontrolled discharge (4)(g)</li> </ul>		<input type="checkbox"/>

<ul style="list-style-type: none"> <li>• Provide for stormwater runoff collection and discharge from a twenty-five-year storm (4)(h)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Provide pollution control measures to protect air quality (4)(i)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Provide all-weather surfaces for vehicular traffic (4)(j)</li> </ul>		<input type="checkbox"/>

<input type="checkbox"/> <b>Documentation Requirements WAC 173-350-210(5)</b> Describe how the facility meets the regulatory requirements in the supporting documents. Indicate the location of all documents.	Location of documents in application	Complete (SCHD ONLY)
Construction documents must be prepared by a professional engineer licensed in the state of Washington and must include: (5)(a)		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• An engineering report that presents the design basis and calculations for the engineered features of the facility</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Scale drawings of the facility including the location and size of waste handling areas, fixed equipment, buildings, stormwater management features where applicable, access roads, traffic patterns, and other constructed areas and buildings integral to facility operation</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Design specification for the engineered features of the facility</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• A construction quality assurance plan</li> </ul>		<input type="checkbox"/>
Structural changes to the facility need to be approved by SCHD. Construction documents need to be provided to SCHD upon completion (5)(b) <b>NA</b> <input type="checkbox"/>	<b>Acknowledged</b> <input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> <b>Operating Requirements WAC 173-350-210(6)</b> Describe how the facility meets the regulatory requirements in the supporting documents. Indicate the location of all documents.	Location of documents in application	Complete (SCHD ONLY)
The owner or operator of a recycling or material recovery facility must develop, keep, and follow a plan operation approved as part of the permitting process. The plan of operation must be available for inspection at the request of the jurisdictional health department. Changes in plan of operations must be approved by SCHD. Each plan of operation must include the following: (6)(a)		
<ul style="list-style-type: none"> <li>• A description of the types of waste materials to be handled at the facility (6)(a)(i)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• A description of the procedures used to ensure that dangerous waste and other unacceptable waste are not accepted at the facility (6)(a)(ii)</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• A description of how waste materials are to be handled on-site, including recycling or recovery, storage, maximum site capacity, method of adding or removing waste materials from the facility, and equipment used (6)(a)(iii)</li> </ul>		<input type="checkbox"/>
A description of how the owner or operator will ensure the facility is operated in a way to: (6)(a)(iv)		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Control litter, dust, and nuisance odors</li> </ul>		<input type="checkbox"/>

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<ul style="list-style-type: none"> <li>Control rodents, insects, and other vectors</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Provide attendant(s) on-site during hours of operation</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Provide a sign at the site entrance that identifies the facility and shows at a minimum the name of the site</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Immediately summon fire, police, or emergency service personnel in the event of an emergency</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Remove or otherwise manage leachate from containment structure(s) to prevent soil and/or groundwater contamination</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Remove waste materials from the tipping floor at a frequency approved by SCHED</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Ensure that handling of waste capable of attracting birds does not pose an aircraft safety hazard</li> </ul> NA <input type="checkbox"/>		<input type="checkbox"/>
A description of how operators will inspect and maintain the facility, including the inspection form operators will use. (6)(a)(v)		<input type="checkbox"/>
Provide a template log to track the weight or volume of wastes received and wastes leaving the facility (6)(a)(vi)		<input type="checkbox"/>
Safety and emergency plans (6)(a)(vii)		<input type="checkbox"/>
Other details to demonstrate that the facility will be operated in accordance with this subsection and as required by SCHED (6)(a)(viii)		<input type="checkbox"/>

<input type="checkbox"/> <b>Ground Water Monitoring Requirements WAC 173-350-210(7)</b>	Location of documents in application	Complete (SCHED ONLY)
There are no specific ground water monitoring requirements for recycling and material recovery facilities subject to this chapter; however, recycling and material recovery facilities must meet the requirements provided under WAC 173-350-040	<b>Acknowledged</b> <input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> <b>Closure Plan WAC 173-350-210(8)</b>	Location of documents in application	Complete (SCHED ONLY)
<b>Describe how the facility meets the regulatory requirements in the supporting documents. Indicate the location of all documents.</b>		
The owner or operator of a recycling or material recovery facility must develop, keep, and follow a closure plan that includes: (8)		
<ul style="list-style-type: none"> <li>Notification to the jurisdictional health department sixty days in advance of closure</li> </ul>	<b>Acknowledged</b> <input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Removal of all waste material to a facility that conforms with the applicable regulations for handling the waste</li> </ul>		<input type="checkbox"/>
<ul style="list-style-type: none"> <li>Methods of solid waste materials from the facility (8)(c)</li> </ul>		<input type="checkbox"/>

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<input type="checkbox"/> <b>Financial Assurance Requirements WAC 173-350-210(9)</b>	<b>Location of documents in application</b>	<b>Complete (SCHD ONLY)</b>
There are no specific financial assurance requirements for recycling and material recovery facilities subject to this chapter; however, recycling and material recovery facilities must meet the requirements provided under WAC 173-350-040	<b>Acknowledged</b> <input type="checkbox"/>	<input type="checkbox"/>

**Signature and Verification of Applicant**  
(Refer to WAC 173-351-730(7) for appropriate signing authority)

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments. Based on my inquiry of the individuals responsible for providing the information, I believe the information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

\_\_\_\_\_  
(Applicant's Signature – printed)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Date)

**Notary Public Verification**

State of \_\_\_\_\_

County of \_\_\_\_\_

Signed or attested before me on

by

(seal or stamp)

\_\_\_\_\_  
(Signature)

My appointment expires:

\_\_\_\_\_  
(Date)

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