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**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**Attention:** Solid Waste Permits Section

Office of Land Quality

100 N. Senate Ave., MC 65-45, IGCN 1101

Indianapolis, IN 46204-2251

Telephone number: (317) 232-3111

**MOBILE HOME SALVAGING FACILITY REGISTRATION APPLICATION**

State Form 55307 (6-13)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

*INSTRUCTIO*

*INSTRUCTIONS: A facility that dismantles, demanufactures, stores, recycles, or processes salvaged or discarded mobile homes needs either a solid waste processing facility permit or a mobile home salvaging registration. To apply for or renew a mobile home salvaging registration, please send three (3) completed copies of this form to the above address. You can review the regulations referenced in this permit at* [*www.in.gov/legislative/ic\_iac*](http://www.in.gov/legislative/ic_iac)*. Questions? Please contact us at the above telephone number.*

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| This application is for a: [ ]  New Registration [ ]  Renewal (*due at least sixty (60) days before the expiration date of your current registration*)  |

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| Section A. Owner Information  |
| Name |
| Mailing Address: Street | Apt. Number | P.O. Box | Town/City |
| State | ZIP Code | Telephone Number *(with area code)* |
| Section B. Operator Information |
| Name |
| Mailing Address: Street | Apt. Number | P.O. Box | Town/City |
| State | ZIP Code | Telephone Number *(with area code)* |
| Section C. Landowner Information |
| Name |
| Mailing Address: Street | Apt. Number | P.O. Box | Town/City |
| State | ZIP Code | Telephone Number (*with area code*) |
| **Section D. Facility Information** |
| Name | Registration number (*if renewal*) |
| Mailing Address: Street | Apt. Number | P.O. Box | Town/City | ZIP Code |
| Location Address: Street/County Road | County | Town/City |
| Type of Facility |
| Contact Name |
| Telephone Number (*with area code*) | Email address |
| Do you agree to receive communications through email? [ ]  Yes [ ]  No |
| List other IDEM permits, registrations, or approvals issued for the facility. Include number issued for each permit, registration, or approval:      |
| The date the facility became operational or will be operational:      |

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| **Section E. Design and Operation Checklist** ***Please provide documentation and/or plans in the order given below for each item, and note if present or applicable*** |
| **Information** | **Present? (Y,N or N/A)** | **Location in Submittal** |
| 1. Estimates for each of the following:
 |  |  |
| * 1. The number of mobile homes/structures to be delivered to the facility each business day
 |       |       |
| * 1. The maximum number of mobile homes/structures that can be stored on-site
 |       |       |
| * 1. The maximum number of mobile homes/structures that can be processed in one month
 |       |       |
| * 1. Probable duration (*in days*) of mobile home/structure storage at the facility
 |       |       |
| 1. Description of type(s) of mobile homes/structures that will be delivered to the facility.
 |       |       |
| 1. Plot plan that includes the following:
 |       |       |
| * 1. Scale (*including a bar scale*)
 |       |       |
| * 1. Elevations correlating with USGS mean sea level data
 |       |       |
| * 1. North arrow
 |       |       |
| * 1. Map legend
 |       |       |
| * 1. Facility boundary
 |       |       |
| * 1. Roads
 |       |       |
| * 1. Drainage ways
 |       |       |
| * 1. Identification of where the mobile homes, structures, parts and residues will be stored or processed, such as:
 |       |       |
| * + 1. Building(s) (*including floor plans*)
 |       |       |
| * + 1. Containers
 |       |       |
| * + 1. Vehicles
 |       |       |
| * + 1. Tanks
 |       |       |
| * + 1. Any other proposed storage location subject to IDEM approval
 |       |       |
| 1. Description of incoming waste testing and screening procedures to ensure that the facility is only processing solid waste streams that are acceptable for salvaging at this registered facility.
 |       |       |
| 1. Description of the areas where mobile homes, structures or parts will be stored or processed, demonstrating that storage structures comply with 329 IAC 11.6-5-1(a), including:
 |       |       |
| * 1. A description of the construction materials
 |       |       |
| * 1. Cross-sectional drawing of the design details
 |       |       |
| * 1. Items a and b above should include information demonstrating the following:
 |  |  |
| * + 1. Processing and storage areas are constructed of surface or pad materials (such as concrete or asphalt) that will control any waste liquids generated, such as spills or leachate. Include details on the following:
 |       |       |
| * + - 1. Type of materials
 |       |       |
| * + - 1. Thickness of materials
 |       |       |
| * + - 1. Characteristics of materials, including:
 |       |       |
| * + - * 1. Chemically resistant to the waste managed and processed
 |       |       |
| * + - * 1. Sufficiently durable and free of cracks to withstand movement of personnel, waste, and handling equipment
 |       |       |
|  **Note:** If you process only uncontaminated wood or plastic, you will not need to construct a pad to register. Please note this in your application. |  |  |
| * + 1. Mobile homes, structures, parts, and residues are stored in a manner that does not threaten or potentially threaten human health and protects the environment. Examples: weather tight building with impervious floors, enclosed containers and vehicles, tanks, and similar protective storage. Please include details on the following:
 |       |       |
| * + - 1. Dimensions of storage areas
 |       |       |
| * + - 1. Dimensions of processing areas
 |       |       |

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| 1. Detailed description of the procedures used for storage, handling, processing, treatment, and final disposition of the mobile homes or structures, demonstrating that the facility will be in compliance with 329 IAC 11.6-6-1, including:
 |       |       |
| * 1. Procedures for controlling fire hazards
 |       |       |
| * 1. Telephone or other communication system available at the site
 |       |       |
| * 1. Access control to the facility
 |       |       |
| * 1. Facility sign
 |       |       |
| * 1. Proper handling of gas tanks and refrigerants
 |       |       |
| * 1. Procedures for controlling the following:
 |       |       |
| * + 1. Dust
 |       |       |
| * + 1. Odors
 |       |       |
| * + 1. Wastewater
 |       |       |
| * + 1. Vectors
 |       |       |
| * + 1. Litter
 |       |       |
| * + 1. Leachate
 |       |       |
| * 1. Monitoring procedures for incoming waste
 |       |       |
| * 1. Procedures for disposing residues and other solid wastes
 |       |       |
| * 1. If you will store, handle, or process liquid wastes, procedures for overflow control and spill cleaning procedures.
 |       |       |
| 1. Contingency plan that includes the following documents and information:
 |       |       |
| * 1. Outline of the method(s) of waste disposal to be used if the facility is unable to operate or process
 |       |       |
| * 1. Maximum amount of mobile homes, structures, parts, and residues at the facility at any one time
 |       |       |
| * 1. Emergency response plan for controlling:
 |       |       |
| * + 1. Fire
 |       |       |
| * + 1. Explosion
 |       |       |
| * + 1. Spills
 |       |       |
| * + 1. Contamination
 |       |       |
| * 1. If required, a spill prevention control plan for oil storage under Section 311(j)(1)(C) of the Clean Water Act. This plan is required if your facility meets all the following criteria (*see* [*http://www.epa.gov/R5Super/oil/spcc.html*](http://www.epa.gov/R5Super/oil/spcc.html) *for more information*):
* it must be non-transportation-related;
* it must have an aggregate aboveground storage capacity greater than 1,320 gallons or a completely buried storage capacity greater than 42,000 gallons; and
* there must be a reasonable expectation of a discharge into or upon navigable waters of the United States or adjoining shorelines.
 |       |       |
| * 1. A floor plan and plot plan of the facility that includes the information required by items 3 of Section E above
 |       |       |
| * 1. A USGS map that identifies the facility location and any access roads
 |       |       |
| * 1. Telephone numbers for the fire department responsible for responding to a fire or emergency at the facility
 |       |       |
| 1. Description of any residue, leachate, or wastewater resulting from the processing or storing of mobile homes, structures, or parts. Applicable surface water controls under 327 IAC 15-6 must be specified.
 |       |       |

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| 1. Description of cleanup procedures for the following areas:
 |       |       |
| * 1. Storage
 |       |       |
| * 1. Waste processing
 |       |       |
| * 1. Loading
 |       |       |
| * 1. Unloading
 |       |       |
|  **Note:** The facility must be cleaned regularly to prevent a nuisance or public hazard. Include procedures to minimize dispersal of waste off-site.  |  |  |
| 1. Documentation showing the owner or operator has established financial assurance as specified at 329 IAC 11.6-9-1.
 |       |       |
| **Section F. Signatures and Certification Statement** |
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including a fine or imprisonment for a knowing violation. I further certify that I am authorized to submit this information. |
| Facility Owner/Operator Name *(Typed or Printed)*      | Facility Owner/Operator Signature  | Date signed *(month, day, year)*      |