SOLID WASTE INFORMATION AND ASSESSMENT PROGRAM REPORTING TABLE - FORM DEQ 50-25

1	Facility Name						
2	Permit Number	3 Date Submitted to DEQ			4 Annual Reporting Period		
5	Preparer's First Name		Middle Initial	Last Name		6 Telephone	
7	Preparer's E-mail Address						
8	Has there been a change to the Annual Fee Billing Contact, Address or Telephone Number? □Yes □ N o						
	Contact First Name	Last Name			Contact Phone		
	Address		E-Mail				
	City State				Zip Code		
9A	Remaining Permitted Capacity	Cubi	c Yards		apacity is reported in tons, please note this below in Facility Comments.		
9B	Expected Remaining Permitted Life	Year	s	DEQ will apply conversion factors based on the type of waste in order to calculate the volume and the number of years of permitted capacity available in the state.			
10	Does facility have active scales? □ Yes or □ No Note: facilities with no active scales must enter the total amount landfilled in cubic yards.			landfilled in cubic	Total amount landfilled in cubic yards for all jurisdictions		
11	Originating Jurisdiction 11A Statement of Econ				onomic Benefits submitted? □ Yes or □ No		
12	Facilities landfilling VA incineration ash Use the supplemental form to provide the facility from which ash was received and the amount.						

Waste amounts measured in : □ Tons or □ Cubic Yards

Waste Type		Total Amount of Waste Received (a)	Mined Materials (b)	On-site Management of Waste					Sent Off-site to be: (i)		Stored On-site		
				Landfilled (c)	Recycled (d)	Composted (e)	Incinerated (f)	Mulched (g)	Other (h)	Recycled	Treated, Stored, Disposed	Beginning of Reporting Period	End of Reporting Period
13	Municipal Solid Waste												
14	Construction/ Demolition/Debris												
15	Industrial Waste												
16	Regulated Medical Waste												
17	Vegetative/Yard Waste												
18	Incineration Ash												
19	Sludge												
20	Tires												
21	White Goods												
22	Friable Asbestos												
23	Petroleum Contaminated Soil												
24	Other Wastes (specify)												
25	Total			-									

Facility Comments

SUPPLEMENTAL SOLID WASTE INFORMATION AND ASSESSMENT PROGRAM REPORTING TABLE - FORM DEQ 50-25

Only those facilities that landfill Virginia incineration ash provide this information.

Permit Number	Annual Reporting Period				
Facilities landfilling VA incineration ash:	VA ash amount measured in				
Received from Permit No., Facility Name	□ Tons	□ Cubic Yards			
Facility Comme	ents				
Facilities should use the same units of measure (Cubic Yards or Tons) for Rows 12 - 24.					
Facilities that do not landfill VA incineration ash do not complete this supplemental form. See the instructions for completing Form DEQ 50-25.		Revised 11/26/2012			