



INSTRUCTIONS FOR PREPARING THE  
RCRA C SITE IDENTIFICATION FORM;  
Notification of Hazardous Waste Activity  
NHDES Waste Management Division-RIMS



PO Box 95, Concord, NH 03302-0095

[\(603\) 271-2921](tel:6032712921) or [hazwastereporting@des.nh.gov](mailto:hazwastereporting@des.nh.gov)

[www.des.nh.gov](http://www.des.nh.gov)

**What is the purpose of this form?**

This form is used to notify the New Hampshire Department of Environmental Services (NHDES) of hazardous waste activities taking place at sites located within New Hampshire. This form is designed to help hazardous waste generators meet both the federal and state hazardous waste notification requirements, and the federal biennial report requirements (if applicable). This form is also used to update any information previously supplied to NHDES.

**Who must fill out this form?**

The New Hampshire Hazardous Waste Rules (Env-Hw 100-1300) require this information to be submitted by anyone that: generates hazardous waste; transports hazardous waste; operates a treatment/storage/disposal/transfer facility of hazardous waste; or imports/exports hazardous waste. These activities include sites that: manage 5,000 kg (11,000 lb) or more of combined universal waste onsite at any one time; manage or burn used oil; and healthcare facilities and reverse distributors who manage hazardous waste pharmaceuticals. Generators of used oil destined for recycling do not need to notify NHDES if this is the only hazardous waste activity at the site.

An EPA identification number must be obtained before beginning hazardous waste generator activities. If you need an EPA identification number immediately, you can call NHDES to obtain a preliminary identification number that is valid for 30 days. This 30-day period should be sufficient to complete this form and return it to NHDES. Please call [\(603\) 271-2921](tel:6032712921) from 8 AM to 4 PM, Monday through Friday to request a preliminary number.

**Where can I get help filling out this form?**

In addition to these instructions, further guidance on filling out this form can be obtained by:

- [Visiting our website](#); or
- Calling [\(603\) 271-2921](tel:6032712921) from 8 AM to 4 PM, Monday through Friday.

**Where do I send this form once completed?**

Please forward this form and any related correspondence to:

NH Department of Environmental Services  
Waste Management Division-RIMS  
PO Box 95  
Concord NH 03302-0095

Or scan and email to: [hazwastereporting@des.nh.gov](mailto:hazwastereporting@des.nh.gov)

**After I submit this form, will I hear back from you?**

After your information has been entered into our database, you will receive a confirmation letter. If you do not receive a confirmation letter within 30 days of submitting your form, please call [\(603\) 271-2921](tel:6032712921).

To begin, please place your EPA identification number for your site in the box at the top of each page of the Notification Form. If your site has never been assigned a number, leave the box blank.

Item 1	<p>Check the correct box to indicate the reason for submittal.</p> <p><b>Initial Notification:</b> Place an “X” in this box if this is the first time a notification form has been submitted for this location. A change in ownership is considered an “initial notification.” Generators submitting an initial notification must pay a non-refundable fee of \$150 to obtain their EPA ID number. (Political Subdivisions of the State of New Hampshire are exempt.) Make checks for \$150 out to “Treasurer, State of New Hampshire.” Visa and MasterCard are also accepted. Please call <a href="tel:603-271-2921">603-271-2921</a> to pay by credit card.</p> <p><b>Subsequent Notification:</b> Place an “X” in this box if this form is to change information that was previously supplied. Please provide the reason for change on the line given (for example, “change of activities”). There is no fee for subsequent notification.</p>
Item 2	<p><b>Site Name:</b> Provide the legal company name of your site as it will appear on your manifests. If the company is doing business under another name (d/b/a), include this information on this line.</p>
Item 3	<p><b>Site Location Information:</b> Provide the complete location address (number, street, town and county) of the site. This must be a physical address and <b>not</b> a post office box or rural route number. Also, the town name must be a valid New Hampshire town, not a township. <b>Note:</b> Because EPA Identification Numbers are site-specific, a new number must be requested if a company changes its location.</p>
Item 4	<p><b>Site Land Type:</b> Place an “X” in the box that best describes the land type of your site. If you have a land type not listed, please check the “other” box and write the land type in the space provided.</p>
Item 5	<p><b>North American Industry Classification System (NAICS) Code(s):</b></p> <p><b>Box A:</b> Provide the North American Industry Classification System (NAICS) code that best describes the primary products or services provided at your site.</p> <p><b>Box B –D:</b> List other NAICS codes that describe the primary products and services provided at your site. <i>Completing Boxes B-D is optional.</i></p> <p>You can obtain NAICS codes from the following sources.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> NAICS website at <a href="http://www.naics.com">http://www.naics.com</a></li> <li><input type="checkbox"/> Income Tax Form 1120 series</li> <li><input type="checkbox"/> Some libraries</li> <li><input type="checkbox"/> NHDES (603-271-2921)</li> </ul>
Item 6	<p><b>Site Contact Person:</b> Enter the name, title, telephone number, extension and email (if available) of the person who should be contacted regarding this site’s hazardous waste activities. <b>DO NOT</b> list the name of your facility’s hazardous waste transporter or consultant.</p>
Item 7	<p><b>Site Mailing Address:</b> Please enter the site mailing address. If the mailing address and the location of the site (Item 3) are the same, print “Same” in the box for Item 7. This is the address NHDES will use to send quarterly reports and correspondence to the contact person. Townships are valid for the mailing address.</p>
Item 8 (a + b)	<p><b>Legal Owner and/or Operator of the Site:</b></p> <p><b>Owner:</b> <i>The person who owns the site or part of the site. This includes the property owner. This may be an individual, company or business name.</i></p> <p><b>Operator:</b> <i>The person responsible for the overall operation of the site. This is the legal entity that controls the site operation rather than the plant or site manager. This is usually a company or business name, not an individual.</i></p> <p>For all owners (a.) and operators (b.) of this site, please provide the following information. (Room is provided for one owner/operator; please list additional owners/operators in the comments section or attach additional sheets.)</p> <ul style="list-style-type: none"> <li>• Legal Name.</li> <li>• Date Became an Owner/Operator (mm/dd/yyyy).</li> <li>• Complete mailing address.</li> <li>• Phone number.</li> </ul> <p>Owner Type: Place an “X” in the box that best describes the owner type. If you have an owner/operator type not listed, please write the appropriate owner/operator type in the space provided.</p>

Item 9	<b>Type of Regulated Waste Activity:</b>
Item 9 A	<p><b>Hazardous Waste Activities:</b> Place an “X” in the appropriate box(es) to indicate which hazardous waste activities are conducted <b>at this site</b>. [Both the state and the federal categories are listed together to indicate the generator’s status in each system. New Hampshire fully regulates generators of 100 kg or more per month whereas EPA’s full regulation is for generators of 1,000 kg or more per month.] For Item 1, choose only one of the four generator categories, then indicate all other generator activities that apply. For boxes 2-4, please check all that apply. (Note: Waste numbers for acute hazardous wastes are listed in Tables 4.1 and 4.5 in Env-Hw 402 of the Hazardous Waste Rules.)</p>
Item 9 A	<p><b>1</b></p> <p><b>NH Full Quantity Generator (FQG); Federal Large Quantity Generator (LQG)</b> Choose this box if your site meets ANY of the following criteria:</p> <ul style="list-style-type: none"> <li>• Generates in any calendar month 1,000 kg (2,200 lb) or more of non-acute hazardous waste.</li> <li>• Generates in any calendar month or accumulates at any time 1 kg (2.2 lb) or more of acute hazardous waste.</li> <li>• Generates in any calendar month, or accumulates at any time, 100 kg (220 lb) or more of spill cleanup material contaminated with acute hazardous waste.</li> </ul> <p><b>NH Full Quantity Generator (FQG); Federal Small Quantity Generator (SQG)</b> Choose this box if your site meets ALL of the following criteria:</p> <ul style="list-style-type: none"> <li>• Generates in each and every calendar month equal to or greater than 100 kg and less than 1,000 kg (220 lb to 2,200 lb) of non-acute hazardous waste.</li> <li>• Generates in each and every calendar month, and accumulates at all times, less than 1 kg (2.2 lb) of acute hazardous waste.</li> <li>• Generates in each and every calendar month, and accumulates at all times, less than 100 kg (220 lb) of spill cleanup material contaminated with acute hazardous waste.</li> </ul> <p><b>NH Small Quantity Generator (NHSQG); Federal Very Small Quantity Generator (VSQG)</b> Choose this box if your site meets ALL of the following criteria:</p> <ul style="list-style-type: none"> <li>• Generates in each and every calendar month less than 100 kg (220 lb) of non-acute hazardous waste.</li> <li>• Generates in each and every calendar month, and accumulates at all times, less than 1 kg (2.2 lb) of acute hazardous waste.</li> <li>• Generates in each and every calendar month, and accumulates at all times, less than 100 kg (220 lb) of spill cleanup material contaminated with acute hazardous waste.</li> </ul> <p><b>Not a Generator of Hazardous Waste</b> Choose this box if hazardous waste is not presently generated at your site. Note that temporary generation and the generation of mixed waste are covered next. If you generate used oil “for recycle only” and need to use your EPA ID number on a manifest, check this box.</p> <p><b>Other regulated activities:</b> Place an “X” in the boxes of all that apply.</p> <p><b>*Precious Metal Recovery:</b> Precious metals, such as silver from photo processing, are recovered onsite.</p> <p><b>*Temporary Generator:</b> A spill or another unintended incident has resulted in a one-time need to manifest hazardous waste offsite. Temporary Generator numbers are valid for 30 days. There is no notification fee for one-time events. If you need a number for more than 30 days or wastes are generated on a regular basis, you must obtain a permanent ID number.</p> <p><b>*Household Hazardous Waste Collector:</b> Household hazardous waste is collected at this site.</p> <p><b>*Importer of Hazardous Waste from a Foreign Country:</b> You import hazardous waste from another country into the United States. Refer to 40 CFR 262 Subpart H for additional information.</p> <p><b>*Mixed Waste Generator:</b> You are a generator of mixed waste (waste that is both hazardous and radioactive). “Mixed waste” is waste that contains both hazardous waste and source, special nuclear, or by-product material subject to the Atomic Energy Act (AEA), RCRA Section 1004(41), 42 U.S.C. 6903 (63 FR 17414; April 9, 1998).</p> <p><b>*Recognized Trader:</b> If you are a recognized trader as defined in Env-Hw 501.03, indicate whether you are an importer, an exporter, or both.</p>

		<p><b>*Importer/Exporter of Spent Lead-Acid Batteries:</b> Indicate whether you are an importer, an exporter, or both.</p> <p><b>*FQG Consolidation of NHSQG Waste:</b> If you are an FQG and you wish to consolidate hazardous waste from a NHSQG under the same control, place an "X" in this box and complete the Addendum on page 4 of the form. See additional instructions below.</p>
Item 9 A	2	<p><b>Transporter of Hazardous Waste: Do not check this box if your facility plans to hire another company to transport hazardous wastes from the site.</b></p> <p>a. <b>Transporter:</b> New Hampshire requires all companies that transport federal and state listed or characteristic hazardous wastes (including used oil) in and through the state to register with NHDES prior to such transportation. A registration form and the applicable New Hampshire Hazardous Waste Rules can be obtained by calling <a href="tel:6032713203">(603) 271-3203</a>.</p> <p>b. <b>Operate a transfer facility:</b> You are a hazardous waste transfer facility, at your site, if you hold manifested hazardous waste at your site for a period of ten (10) days or less <b>while the waste is in transit</b>. A hazardous waste permit is required for this activity. Call our RCRA Permitting Engineer at <a href="tel:6032715328">(603) 271-5328</a> for more details.</p>
Item 9 A	3	<p><b>Treat, Store, or Dispose of Hazardous Waste (i.e., TSDF): Do not check this box if your facility plans to hire another company to dispose of the wastes from the site.</b> If you treat, store, or dispose of regulated hazardous waste <i>at this location</i>, place an "X" in this box. (Burning hazardous wastes in boilers and industrial furnaces and storing hazardous wastes before recycling them fall into this category as well.) A hazardous waste permit is required for this activity. Call our RCRA Permitting Engineer at <a href="tel:6032715328">(603) 271-5328</a> for more details.</p>
Item 9 A	4	<p><b>Recycle Hazardous Waste:</b> If you recycle regulated hazardous wastes at your site, place an "X" in this box. State regulations for owners or operators of sites that recycle hazardous wastes are found in Env-Hw 800. A hazardous waste permit may be required for this activity. Contact our RCRA Permitting Engineer at <a href="tel:6032715328">(603) 271-5328</a> for more details.</p>
Item 9 B		<p><b>Universal Waste Activities</b> – Only complete items in this section if your site has more than 5,000 kg. (11,000 lb) of universal waste onsite at any one time. In New Hampshire, the following wastes are universal waste: batteries, certain pesticides, mercury-containing devices, fluorescent lamps, antifreeze, cathode ray tubes (CRTs) and aerosol cans. Universal wastes should <b>not</b> be counted toward generator size (box 9.A.1.).</p>
Item 9 B	1	<p><b>Total quantity of all Universal Waste onsite at any time:</b></p> <p>a. If you accumulate (through generation or collection) greater than 20,000 kg (44,000 lb) total combined universal wastes, place an "X" in this box. This is a <i>Very Large Quantity Handler</i> (VLQH) of universal waste.</p> <p>b. If you accumulate greater than 5,000 kg but less than 20,000 kg (11,000 lb to 44,000 lb) total combined universal waste, place an "X" in this box. This is a <i>Large Quantity Handler</i> (LQH) of universal waste.</p> <p><i>Note: It is not necessary to check any box if you accumulate less than 5,000 kg.</i></p>
Item 9 B	2	<p><b>Indicate the types of Universal Waste generated or accumulated at your site.</b> Place an "X" in the appropriate box(es) to indicate what universal wastes are at your site; indicate which are generated and which are accumulated.</p>
Item 9 B	3	<p><b>Destination Facility for Universal Waste:</b> Place an "X" in this box if you treat, dispose of or recycle any amount of universal wastes onsite. A hazardous waste permit is required if you treat or dispose of universal wastes; a permit may be required if you recycle universal wastes. Call our RCRA Permitting Engineering at <a href="tel:6032715328">(603) 271-5328</a> for more details.</p>
Item 9 B	4	<p><b>Lamp handler intentionally crushing or dismantling lamps:</b> Place an "X" in this box if any amount of fluorescent lamps are crushed or dismantled at your site. A hazardous waste permit is required for this activity. Call our RCRA Permitting Engineer at <a href="tel:6032715328">(603) 271-5328</a> for more details.</p>

Item 9 C		<b>Used Oil Activities</b> - Only complete items in this section if you manage Used Oil.
Item 9 C	1	<p><b>Used Oil Transporter:</b></p> <p>a. <b>Transporter:</b> If you transport used oil from one facility to another, place an "X" in this box. If you transport only used oil that you generate, this may not apply. Call 1-(888)-Take-Oil if you have questions.</p> <p>b. <b>Transfer Facility:</b> If you own or operate a transportation-related facility, including loading docks, parking areas, storage areas and other areas where shipments of used oil are held for more than 24 hours and less than 35 days during the normal course of transportation, place an "X" in this box.</p>
Item 9 C	2	<p><b>Used Oil Processor and/or Re-refiner:</b> If you engage in the act of used oil processing, as defined in 40 CFR 279.50(a), or store used oil for greater than 35 days, place an "X" in the appropriate box. This does not include generators processing used oil generated onsite for onsite use.</p>
Item 9 C	3	<p><b>Used Oil Burner:</b></p> <p>a. <b>Off-Specification:</b> If you burn onsite used oil that does not meet the analytical standards of specification used oil, but satisfies the rebuttable presumption defined in 40 CFR 279.10(b)(1)(ii), place an "X" in this box.</p> <p>b. <b>Specification:</b> If you burn used oil that: meets the analytical standards for specification used oil; is generated by "Do-It-Yourselfers"; or is automotive oil generated onsite, place an "X" in this box.</p>
Item 9 C	4	<p><b>Used Oil Fuel Marketer:</b> For each of the below activities, please indicate whether the activity is for Specification Used Oil (Spec) or Off-Specification Used Oil (Off-Spec).</p> <p>a. <b>Marketer who directs shipment of used oil to a used oil burner:</b> If you ship used oil from your facility to a used oil burner, place an "X" in this box. This does not include transporters who have not taken ownership of the used oil being transported or shipments to processors/re-refiners who only burn some used oil fuel for purposes of processing.</p> <p>b. <b>Marketer who collects and blends or processes used oil collected:</b> If you receive used oil from generators and produce, process, or blend used oil fuel from the used oils received, including sending blended or processed used oil to brokers or other intermediaries, place an "X" in this box.</p> <p>c. <b>Marketer who collects and distributes used oil collected:</b> If you distribute but do not process or blend used oil, place an "X" in this box. This includes transporters who take possession of the used oil they collect.</p>
Item 9 D		<b>Pharmaceutical Activities</b> - Only complete items in this section if you manage HW pharmaceuticals.
Item 9 D	1	<p><b>Operating under Env-Hw 1300 for management of hazardous waste pharmaceuticals:</b> Env-Hw 1300 requires all reverse distributors and healthcare facilities managing hazardous waste pharmaceuticals (except healthcare facilities that are NHSQGs for all of their hazardous waste, including hazardous waste pharmaceuticals) to notify of their pharmaceutical activities. If a healthcare facility that is a NHSQG when counting all of its hazardous waste chooses to operate under Env-Hw 1300, it also must notify using this form. A healthcare facility that is co-located within a larger facility that is not a healthcare facility (e.g., a clinic at a military base, school, or manufacturer) must notify that it is operating as a healthcare facility under Env-Hw 1300, unless the entire site is a NHSQG.</p> <p>a. <b>Healthcare facility:</b> If you are a health care facility, place an "X" in this box.</p> <p>b. <b>Reverse distributor:</b> If you are a reverse distributor of hazardous waste pharmaceuticals, place an "X" in this box.</p>
Item 9 D	2	<p><b>Withdrawing from operating under Env-Hw 1300 for management of hazardous waste pharmaceuticals:</b></p> <p>A health care facility that operated under Env-Hw 1300 but is no longer subject to Env-Hw 1300 because it is a NHSQG for all of its hazardous waste, including hazardous waste pharmaceuticals, may withdraw from managing its hazardous waste pharmaceuticals under Env-Hw 1300. The healthcare facility must then manage hazardous waste pharmaceuticals under Env-Hw 500.</p>

Item 10	<p><b>Description of Hazardous Wastes:</b> A health care facility operating under Env-Hw 1300 must enter the word “pharmaceuticals” but is not required to enter specific waste names, waste numbers, or quantity generated. All other generators must list the appropriate waste name (e.g., waste petroleum naphtha, lead dust, alkaline solutions), the EPA and/or State waste numbers (as listed in Env-Hw 400 of the Hazardous Waste Rules), and the estimated <b>monthly</b> volume (in gallons) or weight (in pounds) of each hazardous waste that will be generated. Include all numbers that apply to each waste. Report the waste numbers in the following order (an example of each is provided):</p> <ol style="list-style-type: none"> <li>1. EPA listed waste (e.g., F021).</li> <li>2. EPA characteristic waste (e.g., D001).</li> <li>3. NH listed wastes (e.g., NH01).</li> <li>4. Waste regulated by another State (e.g., MA99).</li> </ol> <p>If you are unsure of wastes or waste numbers, contact your hazardous waste transporter or the NHDES hazardous waste helpline at (866) HAZWAST (toll-free in New Hampshire only) or <a href="tel:6032712942">(603) 271-2942</a>.</p>
Item 11	<p><b>Certification Programs:</b> All hazardous waste generators are required to be in a certification program.</p> <p><b>A. FQG Certification:</b> Each generator that generates more than 220 pounds of hazardous waste in one month is required to have, on staff at the facility where the hazardous waste is generated, a Hazardous Waste Coordinator certified by NHDES. Enter the certificate number and the name of the primary coordinator at this site. Each FQG site must have only one designated primary coordinator that will be the first person NHDES inspectors will ask for when they arrive for an inspection. Any other certified coordinators at the same site will be secondary coordinators. If the primary coordinator leaves the company, the generator shall notify NHDES of the new primary coordinator.</p> <p><b>B. NHSQG Self-Certification:</b> NHSQGs are required to review their hazardous waste management procedures, conduct a self-inspection of their facility and certify compliance to NHDES every three years. If you have not yet self-certified, please contact the NHSQG Self-Certification Program at <a href="tel:6032716425">(603) 271-6425</a>.</p>
Item 12	<p><b>Comments:</b> Please use the space in section 12 to provide any additional information. Attach additional sheets if necessary.</p>
Item 13	<p><b>Form Certification:</b> This certification must be signed by owner(s), operator(s), or other authorized representative(s) of the site. An “authorized representative” is a person responsible for the overall operation of the site (i.e., a plant manager or superintendent, or a person of equal responsibility).</p>
<p><b>Addendum – FQG Consolidation of NHSQG Hazardous Waste</b></p> <p>Only complete the addendum if you are an FQG who wishes to consolidate hazardous waste from a NHSQG under the same control. For each NHSQG, provide the requested information. Notification must be provided to NHDES 30 days prior to receipt of the first shipment. See Env-Hw 501.02(c) and Env-Hw 509.02(l) for additional requirements.</p>	
Item 1	<p><b>EPA ID Number:</b> Please provide the EPA Identification Number for the NHSQG whose waste you are consolidating.</p>
Item 2	<p><b>NHSQG Site Name:</b> Provide the legal company name of the NHSQG site. If the company is doing business under another name (d/b/a), include this information on this line.</p>
Items 3-6	<p><b>NHSQG Site Location:</b> Provide the complete location address (number, street, town and county) of the NHSQG site. This must be a physical address and not a post office box or rural route number. Also, the town name must be a valid New Hampshire town, not a township.</p>
Items 7-9	<p><b>NHSQG Contact Information:</b> Enter the telephone number, name of the individual who should be contacted for information about the NHSQG, and their email address (if available).</p>