



COLUMBIA SHUSWAP REGIONAL DISTRICT

PO Box 978, 555 Harbourfront Drive NE, Salmon Arm, BC V1E 4P1 | T: 250.832.8194 | TF: 1.888.248.2773 | www.csr.d.bc.ca

Soil Disposal Application

Please note the CSR D requires a minimum of three (3) business days notice (office hours M - F 9AM to 4PM) in order to make the necessary arrangements for the material to be disposed of at the landfill.

(In the event of an emergency, please contact 250.517.7271)

All documents submitted in relation to this Soil Disposal Application will be part of the public record and may be made available to the public through a Freedom of Information request.

For more information on the Ministry of Environment Hazardous Waste Regulation or Contaminated Sites Regulation contact:

Ministry of Environment
PO Box 9341, STN PROV GOVT
VICTORIA, BC V8W 9M1

T: 250.356.5044
E: hazwaste@victoria1.gov.bc.ca
W: www.env.gov.bc.ca/epd/hazwaste

Part 1: Source Information

SECTION A – SOURCE SITE CONTACT INFORMATION

To be completed by or for the owner of the source site from which the soil is to be relocated.

Applicant		
Last Name:	First Name:	
Company Name:		
Company Address:		
Telephone:	Fax:	Email:

SECTION B – SOURCE SITE LOCATION

Attach a map and/or sketch of appropriate scale, showing the boundaries of the site. Attach additional sheets as necessary to describe the site location(s). Provide one or more of the following:

- the complete physical address of property; or
- BC parcel identification number (PID) and associated legal descriptions; or
- Ministry of Environment Contaminated Site Identification Number.

Source Site		
Owner:		
Street Address:		
City:	Province:	Postal Code:
Highway:	Distance/Direction:	City:
PID Number and associated Legal Description (if available)		
PID:		Legal Description:
Ministry Of Environment Contaminated Site Identification Number:		
Ministry Of Environment Dangerous Goods Incident Report (DGIR) Number:		

Please forward completed application form to operations@csr.d.bc.ca or fax to 250.832.1083.

CSRD Soil Disposal Application

Section C – Material for Disposal

Attach supporting documentation:

Overview of Sampling Process Yes No

Analytical Lab Results Yes No

Highway Spill Contaminated Site

Other:

Current Location of Soil Stockpiled In-Situ

Describe the material proposed for disposal: (i.e. soil type, known contaminants, other debris in soil, etc.)

Identify Contaminants of Concern - Refer to Schedule A - Acceptance Matrix (Pg. 4)

Part 2: Soil Acceptance Agreement

SOURCE SITE OWNER / APPLICANT

The information I have provided is accurate. I know of no regulation, bylaw or other legal restriction which might prohibit the relocation of the soil to the indicated receiving site. Further, I will ensure that all permits, manifests and other regulatory and safety requirements that may apply are met. I understand that the Columbia Shuswap Regional District may reject soil for any reason at its discretion.

Signature of Source Site Owner / Applicant

Print Name

Date (MM/DD/YYYY)

QUALIFIED PROFESSIONAL

Based on an evaluation of test results and completion of Schedule 'A', I certify the material is acceptable for disposal.

Signature of Qualified Professional

Title

Print Name

Date (MM/DD/YYYY)

Please forward completed application form to operations@csrd.bc.ca or fax to 250.832.1083.

CSRD Soil Disposal Application

Part 3: Final Result Summary

Delivery Start Date (MM/DD/YYYY): _____

Estimated Delivery End Date (MM/DD/YYYY): _____

Payment Method: Cash/Debit/Credit Card (on delivery) On Account (complete the account details below)

Invoicing Account Name: _____ Account Number: _____

Contact Name: _____ Contact Number: _____

Vehicle Licence Plate(s) or Project Number for Account: _____ n/a

Subcontracted Hauler: _____ n/a

Hauling Method: _____ Material Details: _____

Estimated Tonnes/Volume of material: _____ Estimated Number of Loads: _____

Requested Landfill

Golden Landfill Salmon Arm Landfill Revelstoke Landfill Sicamous Landfill

Part 4: For CSRD Use Only

Project number:										
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Approved Rejected If rejected, reason: _____

Material Code:

Clean Soil - \$10/tonne Contaminated Soil - \$35/tonne

Refuse - \$80/tonne Controlled Waste - \$160/tonne

Receiving Landfill: Golden Landfill Salmon Arm Landfill Revelstoke Landfill Sicamous Landfill

Disposal Instructions: _____

Authorized By:

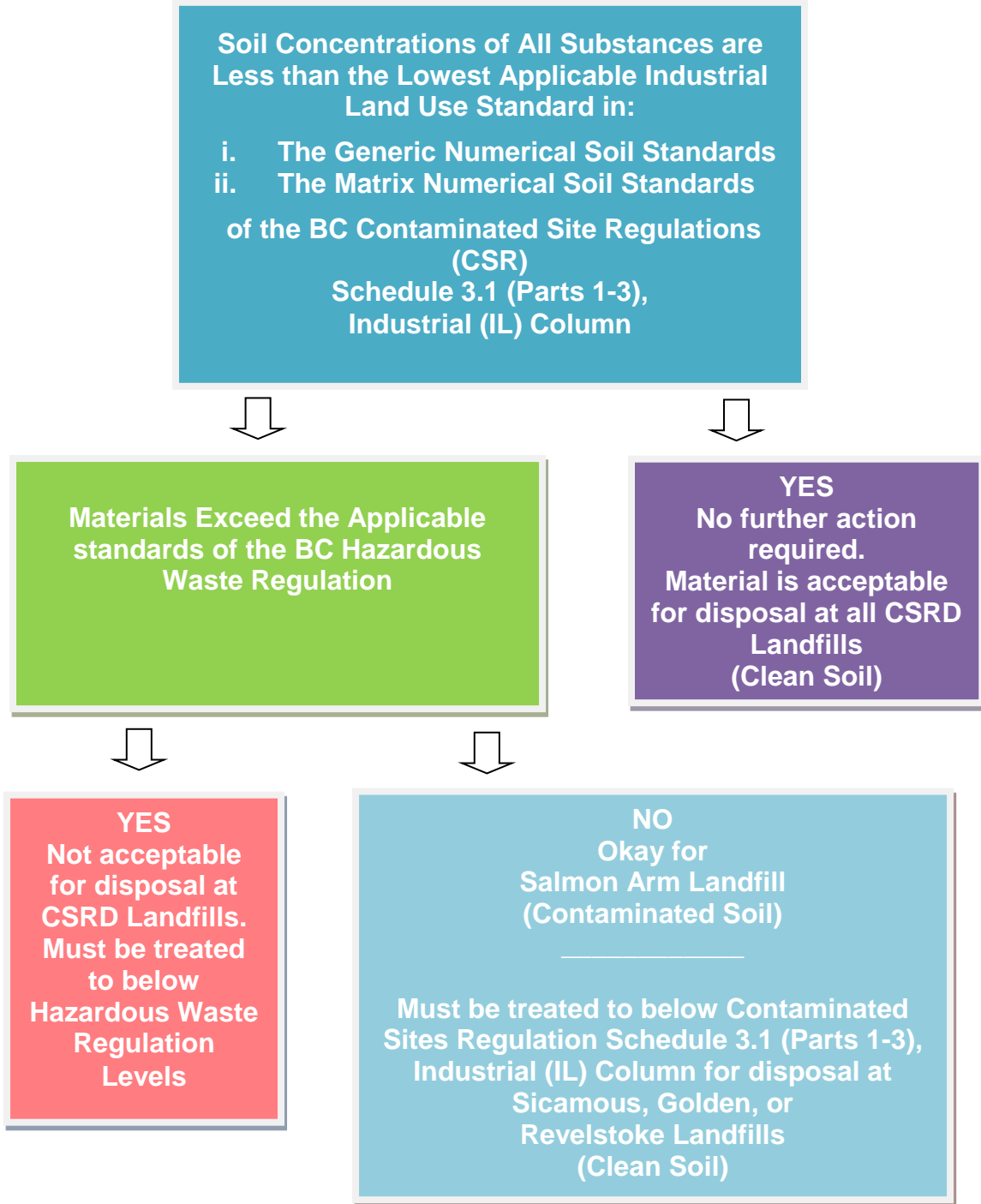
Name _____	Date _____
Signature _____	Telephone _____

Checklist	Date (MM/DD/YYYY)	Initials
Material Reviewed for Disposal	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Billing Account Active	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Project Number Set-Up	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Landfill Contractor Notified	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Scale Attendant Notified	<input type="checkbox"/> Yes <input type="checkbox"/> No	

The Columbia Shuswap Regional District will notify the applicant once the application has been reviewed and approved. In order to bring the soil to the landfill, a copy of this approved application (page 3 only) must be presented to the scale house when arriving on site.

Please forward completed application form to operations@csrd.bc.ca or fax to 250.832.1083.

Schedule A: Soil Acceptance Matrix



Clean Soil	\$10/tonne
Contaminated Soil	\$35/tonne
Refuse	\$80/tonne
Controlled Waste	\$160/tonne

- Clean/Contaminated Soil must be suitable for cover material
- Material not suitable for cover (Non-soil Material / Debris) will be charged based on handling and burial methods required