Attachment D: Recycling and Disposal Facilities that Receive Materials of Concern

This form, including all required documentation, shall be completed for each Recycling and Disposal facility that recycles or disposes of Materials of Concern ("MOCs") as defined in RCSA section 22a-638-1(a). Note any facility that stores for more than 10 days whole CEDs or components of CEDs that are MOCs or contain MOCs, is also considered a "Recycling Facility" as defined.

For more details, see <u>Instructions for Completing the Application Form to Become a CER</u> [DEEP-E-WASTE-INST-002].

Note: The Applicant shall also disclose in Attachment C of the CER application all facilities that are used to recycle or dispose of MOCs that derive from CEDs or components of CEDs.

Part I: Facility Information

1. Name of Facility:						
	Location Address:					
	City/Town:	State:	Zip Code:			
	Business Phone:	ext.				
	Contact Person:	Title:				
	Email:					
2.	List all applicable facility permits, licenses or approvals (if any):					
	Please note for Recycling or Disposal Facilities located in C	onnecticut:				
	• If the Recycling or Disposal Facility accumulates 5,000 kg (11,000 lbs.) or more of universal wastes as defined in RCSA section 22a-449(c)-113, the facility must submit a completed EPA form entitled "RCRA Subtitle C Site Identification Form" (included in the Notification of Regulated Waste Activity Instructions and Forms EPA Form 8700-12, latest revision), to the Department's Waste Engineering and Enforcement Division. A copy of this form and instructions are available on the EPA website at www.epa.gov/osw/inforesources/data/form8700/forms.htm or by calling the Department's Waste Engineering and Enforcement Division at 860-424-3023.					
	 If the Recycling or Disposal Facility is a Large Quantity I <u>449(c)-113</u> and the facility disassembles used electronic disassembly of used electronics pursuant to <u>CGS Sec. 2</u> 	cs, it must obtain				
	 If the Recycling or Disposal Facility engages in one-day including CEDs, the facility may need to obtain a registre One-Day Collections of Certain Wastes and Household One-Day GP would not be needed, however, if the only 	ation under the <u>Hazardous Wa</u> s	General Permit to Perform ste ("One-Day GP"). Note: the			
3.	Is the facility managing CEDs as a Universal Waste?	es 🗌 No				
	For Recycling or Disposal Facilities located in Connecticut: i managing CEDs as a universal waste used electronics under Waste permit from the Department must be obtained.					
4.	Is the facility managing CEDs under ERCC BMP guidelines	? 🗌 Yes	□ No			

Part I: Facility Information (continued)

5.	5. List of plans/ programs:				
	Check the box by each of the required plans below indicating that the specified plan has been prepared and is in effect at the facility and available for on-site inspection. <i>Do not submit any of these plans with this form.</i>				
	A. Environmental Management System ("EMS") pursuant to RCSA section 22a-638-1(e)(4). plan shall describe the following, at a minimum:		Environmental Management System ("EMS") pursuant to RCSA section 22a-638-1(e)(4). The plan shall describe the following, at a minimum:		
			The facility's risk management objectives for environmental performance and outline ways to attain these objectives based on a continual improvement model; and		
			A system of regular re-evaluation of the plan's environmental health and safety objectives and monitoring of the progress toward achievement of these objectives.		
		B.	Environmental Health and Safety Measures ("EH&SM") pursuant to RCSA section 22a-638-1(e)(5). Plans shall include the following at a minimum:		
			Training Measures;		
			Air Emission Control Measures, if processing;		
			Written Hazardous Materials Identification and Management Plan;		
			Written Plan for Reporting and Responding to Pollutant Releases and Emergencies; and		
			Documentation of Annual Environmental Health & Safety Audits.		
		C.	Equivalent certifications or credentials for EMS and EH&SM plans (check all that apply):		
			☐ E-Stewards		
			□ R2		
			☐ ISO 14001		
			☐ ISO 18001		
	Note: In lieu of A, B or C above, the applicant may submit, on behalf of the facility, a request to the Department to recognize that a certification or credential granted by an independent entity meets the requirements of an EMS and/or an EH&SM. This request may be provided in the space below and/or attach any supporting documentation including such certification or credential.				

Part I: Facility Information (continued)

5.	5. List of plans/ programs (continued):			
		D.	Closure Plan including cost estimate for closure pursuant to RCSA section 22a-638-1(e)(7).	
			Note: In lieu of D. above, the applicant may submit, on behalf of the facility, a request to the Department to recognize other means to achieve compliance with a closure plan and cost estimate, including but not limited to, a government program that provides functionally equivalent protections. This request may be provided in the space below and/or attach any supporting documentation.	
		E.	Facility Security Program pursuant to RCSA section 22a-638-1(e)(3). The security program shall control access to the facility or the portion of the facility where CEDs or components of CEDs are present and may include, but need not be limited to, badges for employees, an alarm system, metal detectors, surveillance cameras, indoor and outdoor lighting, or perimeter fencing.	
		F . I	List other plans/programs that you have prepared and will be in effect at the facility which are applicable/relevant:	

Part II: Compliance History

If the answer to any of the questions below is **yes**, then Part III: Table of Enforcement Actions must also be completed.

A.	During the five years immediately preceding submission of this application, has the owner or operator of the facility been convicted in any jurisdiction, foreign or domestic, of a criminal violation of any environmental law?				
	☐ Yes ☐ No				
В. [B. During the five years immediately preceding submission of this application, has a civil penalty been imposed upon the owner or operator of the facility in any state, including Connecticut, in any federal judicial proceeding, or in any other country for any violation of an environmental law?				
	☐ Yes ☐ No				
C.	During the five years immediately preceding submission of this application, has a civil penalty exceeding five thousand dollars been imposed on the owner or operator of the facility in any state, including Connecticut, in any federal administrative proceeding, or in any other country for any violation of an environmental law?				
	☐ Yes ☐ No				
D.	During the five years immediately preceding submission of this application, has any state, including Connecticut, federal court, or court of another country issued any order or entered any judgment to the owner or operator of the facility concerning a violation of any environmental law?				
	☐ Yes ☐ No				
E.	During the five years immediately preceding submission of this application, has any state, including Connecticut, federal administrative agency, or governmental agency of another country issued any order to the owner or operator of the facility concerning a violation of any environmental law?				
	☐ Yes ☐ No				

Part III: Table of Enforcement Actions

If you have answered **yes** to any of the questions in Part II: Compliance History, you must complete the following table.

Type of Action:	Type of Action:	Type of Action:
Date Commenced:	Date Commenced:	Date Commenced:
Date Terminated:	Date Terminated:	Date Terminated:
Jurisdiction:	Jurisdiction:	Jurisdiction:
Case/Docket/Order Number:	Case/Docket/Order Number:	Case/Docket/Order Number:
Description of Violation(s):	Description of Violation(s):	Description of Violation(s):

☐ Check the box if additional sheets are attached

Part IV: Required Documentation

The Applicant will need to provide information on both types of liability coverage (Commercial General Liability **and** Pollution Legal Liability) and financial assurance or other guarantees applicable to the facility as required by sections RCSA 22a-638-1(e)(6)&(7). You should verify that any documentation required to be submitted with this application is enclosed. Clearly label the enclosures with the name(s) of the facility(ies) covered, types of coverage and the amount(s) covered by each document.

Proof of Insurance: The Applicant will need to enclose evidence of insurance coverage in the minimum amounts and types specified in A. **and** B. below pursuant to RCSA section 22a-638-1(e)(6). Note: evidence of insurance may be in the form of an updated copy of the insurance document or correspondence from the issuing institution indicating coverage amounts listed separately and dates of coverage (e.g., <u>ACORD</u> Certificate of Liability Insurance). Any insurance certificates or other documentation enclosed should clearly specify the minimum coverage amounts and types that are required.

If evidence of insurance is not offered to the facility or is otherwise unobtainable by the facility for either of the liability coverage types provided below, a written explanation is required to be entered into the appropriate space in lieu of enclosing insurance certificates or other documentation. Note: if no evidence of either coverage type is enclosed and no explanation is described in either space provided, this section of the Attachment D will be considered incomplete.

- A. Commercial General Liability [minimum for bodily injury, personal injury and property damage]:
 - \$1,000,000 combined single limit per occurrence, and
 - \$2,000,000 annual aggregate; or

If proof of insurance coverage for A. above is not offered or is unobtainable for this facility, then, in the space provided below, write **an explanation** of why insurance coverage is not obtainable:

B. Pollutant Releases, Accidents and Other Emergencies ("Pollution Legal Liability")

For facilities where whole CEDs are dismantled, shredded, crushed or otherwise processed:

- \$3,000,000 combined single limit per occurrence, and
- \$6,000,000 annual aggregate; or

For all other recycling or disposal facilities:

- \$1,000,000 combined single limit per occurrence, and
- \$2,000,000 annual aggregate; or

If proof of insurance coverage for B. above is either not offered or is unobtainable for this facility, then, in the space provided below, write *an explanation* of why insurance coverage is not obtainable:

Proof of Financial Assurance: The Applicant will need to enclose evidence of financial assurance instruments or other guarantees pursuant to RCSA section 22a-638-1(e)(7). The Applicant will need to check one of the two options provided below. Note: if both options are checked or neither option is checked, this section of the Attachment D will be considered incomplete. Also, if Option 2 is checked, but an explanation is missing or deemed insufficient, this section of the Attachment D will be considered incomplete.

☐ Option 1 - Evidence of Financial Assurance Instruments or other Guarantees: Under this option, the Applicant has enclosed evidence of financial assurance instruments in the amount and type indicated in RCSA section 22a-638-1(e)(7); or

☐ Option 2 - Explanation of Why Financial Assurance is Not Required: If financial assurance is not required by any applicable laws or regulations of the state or locality where the facility is located, or if financial assurance is not required by a permit issued by any governmental entity to the facility, then, in the space provided, write an explanation of why financial assurance is not required.