Clean Harbors Environmental Services, Inc.
761 Middle Street
Bristol, CT 06010
Attn: Krista Gloden
Email: Gloden.Krista@cleanharbors.com
Phone: (860)583-8917 ext. 315
Fax: (860)583-6612

Company/Municipality: _________________________________________
Contact: ______________________________________________________ (Print)
Address: ______________________________________________________

Phone: (____) ___________     Fax: (____) ______________________
EPA ID Number (if applicable): __________________

List below the hazardous waste that you would like to bring to the hazardous waste collection center located at the Regional Water Authority on 90 Sargent Drive, New Haven, Connecticut. The collection center is serviced by Clean Harbors Environmental Services. This facility is open on Saturday mornings only; CESQG appointments will be scheduled from 7:00 am until 8:30 am. The member communities are: Bethany, Branford, East Haven, Fairfield, Guilford, Hamden, Madison, Meriden, Milford, New Haven, North Branford, North Haven, Orange, Wallingford, West Haven, and Woodbridge.

NOTE: Delivery of CESQG waste requires an appointment and will only be accepted at the appointed date and time which will be on Saturday mornings only. Refer to the Disposal Information Sheet for Municipal and Commercial Hazardous Waste for complete instructions for delivery.

**Description of Waste**

<table>
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<tr>
<th>Material</th>
<th>Quantity</th>
<th>Container Size</th>
<th>Hazard Class (If Known)</th>
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(If additional lines are needed, please attach separate sheet.)
Small Business Conditionally Exempt Small Quantity Generator (CESQG) Description and Certification Form

Certification

I certify that during any of the previous three (3) months that: I have not generated more than two hundred twenty (220) pounds total of hazardous waste; I am not currently storing more than two thousand two hundred and twenty (2220) pounds of hazardous waste; and that I meet the definition of a Conditionally Exempt Small Quantity Generator (CESQG) as defined in Regional Water Authority’s Permit to Operate 09301251-PCO.

Signature: ______________________________      Print Name: ______________________________
Business Name: ____________________________  Title: ______________________________
Date: __________________

Mail or fax (860) 583-6612 this form to Clean Harbors, 761 Middle Street, Bristol, CT 06010. You may call Phone: (860)583-8917 ext. 315 if you have any questions. After Clean Harbors determines if this is acceptable waste, this form will be returned (faxed) to you with the fee you will be charged and your appointment date and time filled in below. **This form and a check made out to "Clean Harbors Inc." for this amount below must be given to the Clean Harbors Representative when the waste is delivered to the New Haven facility** located at the Regional Water Authority, 90 Sargent Drive, New Haven.

Do Not Write Below This Line

<table>
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<tr>
<th>Cost of Disposal:</th>
<th>$_______________</th>
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<tbody>
<tr>
<td>Administration Fee:</td>
<td>$ 25.00</td>
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<tr>
<td>Site Visit Fee – If applicable:</td>
<td>$_______________</td>
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**TOTAL CHARGE:**  $_______________

* A check for this amount made out to "Clean Harbors, Inc." must accompany delivery.

Appointment Date and Time: __________________________

**NOTE:** Completed forms, with Customer Signature, accepting price and appointment MUST be faxed to Clean Harbors prior to your appointment to confirm delivery.

Customer Signature: ____________________________________________

HazWaste Central Contact Information:
John McGuire, HazWaste Coordinator
Regional Water Authority
90 Sargent Drive
New Haven, CT. 06511
jmcguire@rwater.com
203-401-2712