

VANCOUVER LANDFILL CONCRETE & ASPHALT ASSESSMENT FORM



Transfer & Landfill Operations Branch
 City of Vancouver, Engineering Department
 507 W. Broadway, Vancouver, BC V5Z 0B4

FAX: 604.606.2712
 PHONE: 604.606.2700
 FORM #

Instructions:

Note: The City of Vancouver reserves the right not to accept any material.

1. Complete Section 1 of this form and return to the Vancouver Landfill (E-Mail: michael.skinner@vancouver.ca)
2. Landfill Staff will review the form and either: request additional information, approve the form (Section 2) and return by email, or not approve the form and inform the applicant of the decision and reason.

Section 1: Generator

Contact Name: _____

Company Name: _____

Phone: _____

Company Address: _____

Fax: _____

Generated at (Address): _____

Quantity: _____

City & Postal Code: _____

Total Loads: _____

Material Description: _____

Desired Loads per day: _____

Material Quality (defined in *Contaminated Sites Regulation*): UPL / RL- / RL+ / CL _____

Desired Haul Period (Start Date - End Date): _____

Haul Method: Truck / Truck & Pony / Truck & Transfer

Generator's Declaration: "I certify that the material is fully and accurately described above and is not a Hazardous Waste" as defined in the Hazardous Waste Regulations to the Waste Management Act (or any successor legislation). I certify that it does not contain asbestos or lead and that it is not contaminated with PCB's. I further certify that such material is not unacceptable waste, as defined on the City of Vancouver Unacceptable Materials list and that it will be packed in proper condition for transport. I certify that to the best of my knowledge the material is suitable for use at a sanitary landfill, and I acknowledge that I remain responsible for ensuring compliance with all laws and by-laws applicable to the transport and use of the subject material. I hereby agree to indemnify and save harmless the City of Vancouver, its officials, officers and employees, from all claims liability, penalties, fines, judgments, costs and expenses of every kind, including as may arise from any finding of negligence on the part of the City of Vancouver, its officials, officers and employees, which may result in the use of the subject material or from any failure to comply with all by-laws, statues and regulations relating to the material use in respect of which I represent that I am authorized to give the representations, assurances and indemnities set out above to the City of Vancouver."

Name (printed): _____

Title: _____

Signature: _____

Application Date: _____

Section 2: City of Vancouver (Completed by Landfill Staff)

Special handling at Landfill: Stockpile MT Code: 81 Busn Acct: _____

Conditions: NO ASBESTOS, NO METAL, SEE SPEC Shipments acceptable up to: _____

Approved (print): _____ Phone: _____

Signature: _____ Date: _____

Section 3: Hauling Details

To be completed and faxed to **604.606.2712** and e-mailed to michael.skinner@vancouver.ca a minimum of 1 full business day ahead of shipment to Landfill. Multiple haul dates may be listed if all hauling info remains the same. If hauling information changes, submit another fax and e-mail a minimum of 1 full business day ahead of shipment.

Hauling Date(s) and Times: _____

Hauling Company (as posted on haul trucks): _____

Address: _____ City & Postal Code: _____

Contact: _____ Phone: _____ Fax: _____

License Plate #s: _____

add pages if needed _____
