



WASTE MANAGEMENT & RADIATION CONTROL

Utah Department of Environmental Quality
Division of Waste Management & Radiation Control

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Used Oil Transporter Annual Report

For: January 1 – December 31, 2020

Annual Reports must be submitted by March 1st of the reporting year

I. General Used Oil Permit Information Section

Form with fields A through J: A. Company Name, B. Utah Used Oil Permit Number, C. Company Mailing Address, D. Permitted Facility's Physical Address, E. Contact Name and Title for Used Oil Permit, F. Federal EPA ID Number, G. Contact's Phone Number, H. Name of Person Completing Form, I. Contact's Fax Number, J. Contact's E-mail Address.

II. Certification Section

The Company owner or his/her designated representative must sign this form.

I certify under penalty of law this report and all attachments were prepared by me or under my direction or supervision. The information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware there are significant penalties, including the possibility of a fine and imprisonment for knowing violations, for submitting false information.

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>III. Used Oil Collections Section</b>			
Check <a href="http://www.rules.utah.gov/publicat/code/r315/r315-015.htm">http://www.rules.utah.gov/publicat/code/r315/r315-015.htm</a> for examples of materials that are considered used oil.			
			<b>Gallons</b>
<b>A.</b> Total used oil collected from any generator or facility <u>outside of Utah</u> and transported to any facility inside Utah.			
<b>B.</b> Total used oil collected from <u>any generator inside Utah</u> . Do not include used oil collected from other transporters, transfer facilities, or processors on this line.			
<b>C.</b> Total used oil collected from <u>transfer facilities, processors, or other transporters located in Utah</u> . List the total received from each facility or transporter on a separate line below (attach additional sheets if necessary).			
Name of Facility or Transporter	Address/Phone	Facility Type	Gallons
		<b>Total for C ►</b>	
<b>D. Total Volume of Used Oil Collected (add line A, B, and total for C)</b>			
<b>IV. Used Oil Deliveries Section</b>			
<b>A.</b> Total used oil delivered to transfer facilities, processors, businesses, burners, other transporters, etc. <u>located inside Utah</u> . (This includes used oil collected <u>inside and outside Utah</u> from <u>generators, transfer facilities, processors, or other transporters</u> .) List the total delivered to each facility on a separate line below (attach additional sheets if necessary).			
Name of Receiver	Address/Phone	Facility Type	Gallons
		<b>Total for A ►</b>	
<b>B.</b> Of the total used oil <u>collected in Utah</u> from generators, transfer facilities, processors, or other transporters (see III. Used Oil Collection Section totals for B and C), how much was delivered to transfer facilities, processors, businesses, burners, other transporters, etc. <u>located outside Utah</u> . List the total delivered to each facility on a separate line below (attach additional sheets if necessary).			
Name of Facility or Transporter	Address/Phone	Facility Type	Gallons
		<b>Total for B ►</b>	
<b>C. Total Volume of Used Oil Delivered (add total for A and B)</b>			
<b>V. Used Oil Collections and Deliveries Comparison Section</b>			
<b>A.</b> If <b>Used Oil Collections</b> total (III. <b>Used Oil Collections</b> line D) and <b>Used Oil Deliveries</b> total (IV. <b>Used Oil Deliveries</b> line C) are different, please provide explanation (attach additional sheets if needed).			

<b>VI. Used Oil Filter Handling Section</b>		
Volume Estimates: One 55-gallon drum of <b>crushed</b> used oil filters = approximately 400 used oil filters One 55-gallon drum of <b>uncrushed</b> used oil filters = approximately 250 used oil filters One ton of drained used oil filters = approximately 2,350 used oil filters		
	<b>Number In-State</b>	<b>Number Out-of-State</b>
<b>A.</b> Approximate number of used oil filters collected from generators or facilities <b>in Utah</b> .		
<b>B.</b> Approximate number of used oil filters collected from generators or facilities <b>outside of Utah and transported to a facility inside Utah</b> .		
<b>C.</b> Disposition of collected used oil filters		
1. Quantity transferred to another permitted used oil facility		
2. Quantity transferred directly to a waste-to-energy facility		
3. Quantity transferred directly to a metal foundry for recycling		
4. Quantity disposed at a landfill		
5. Other disposal method		
6. Total number of disposed used oil filters (sum of 1, 2, 3, 4 and 5)		
<b>D.</b> Provide the name(s) of the facility where filters were transferred, and describe how the filters were managed (for example crushed and recycled, shredded, etc.). Attach additional sheets if needed.		
<b>VII. General Liability Insurance Information Section</b>		
Submit a current <b>ACORD</b> form or equivalent (available from insurance broker) showing General Liability Coverage  <b>OR</b>  If you do not submit a current <b>ACORD</b> , the following information must be submitted.		
<b>A.</b> Name of Insurance Company on Policy	<b>B.</b> Name of Insurance Broker/Agent	
<b>C.</b> Physical Address of Insurance Company	<b>D.</b> Phone Number of Insurance Broker/Agent	
<b>E.</b> Coverage Types and Amounts		
<b>F.</b> Policy Number	<b>G.</b> Effective Date	
<b>H.</b> Policy Date	<b>I.</b> Expiration Date	
<b>VIII. Environmental Pollution Liability Insurance for Third-Party Damages Section</b>		
Note: the minimum required insurance coverage is \$1,000,000 per occurrence and \$2,000,000 annual aggregate.		
Submit the Used Oil Pollution Liability Endorsement Form 17.6 to document current Environmental Pollution Liability insurance coverage. Forms are available for download on the Division's website: <a href="https://deq.utah.gov/division-waste-management-radiation-control">https://deq.utah.gov/division-waste-management-radiation-control</a> <b>Note:</b> Endorsements may not be submitted electronically. An original signed ("wet signature") hard copy of the Endorsement must be mailed to the Division.		
<b>A.</b> Name of Insurance Company on Policy	<b>B.</b> Name of Insurance Broker/Agent	
<b>C.</b> Physical Address of Insurance Company	<b>D.</b> Phone Number of Insurance Broker/Agent	
<b>E.</b> Coverage Types and Amounts		
<b>F.</b> Policy Number	<b>G.</b> Effective Date	
<b>H.</b> Policy Date	<b>I.</b> Expiration Date	