MassDEP, Bureau of Air and Waste

# **HW Notification of On-Site Recycling**

#### **Instructions for Online Filing**





## HW Notification of On-Site Recycling

- How to create an account in ePLACE
- How to file an online application
- How to check your license status
- How to get help



## **Register for an Account**

- Create or Log-in to your account in eLicensing
- First time users click here
- Be sure to provide your full name, address, and contact information when setting up your account.





 Click here to start (if you don't already have a certification and this is the first time using this system)

Home	
Dashboard My Records My Account Advanced Search 🗸	
	4
Welcome LJCarlson	File an Online
You are now logged in to the Commonwealth's eLicensing and ePlace Portal.	Application
What would you like to do?	-
- File an Online Application	
- Renew a License, Permit or Certificate	
<ul> <li>Amend License, Permit or Certificate Information</li> </ul>	



- Read and accept the Terms and Conditions
- Click the checkbox and click "Continue"

online Applications and Record Authorization Form	
elcome to the Commonwealth of Massachusetts eLicensing and ePermitting portal.	
order to continue, you must review and accept the terms outlined as set forth	
elow. Click the "Continue" button in order to proceed with the online submission	
rocess.	
In order to perform licensing and permitting transactions online, you were required	~
to register for the eLicensing and ePermitting Portal. All registered users of the	
to register for the eLicensing and ePermitting Portal. All registered users of the eLicensing and ePermitting Portal are required to agree to the following:	
to register for the eLicensing and ePermitting Portal. All registered users of the eLicensing and ePermitting Portal are required to agree to the following: 1. Use of the Commonwealth of Massachusetts eLicensing and ePermitting Portal is	
<ul> <li>to register for the eLicensing and ePermitting Portal. All registered users of the eLicensing and ePermitting Portal are required to agree to the following:</li> <li>1. Use of the Commonwealth of Massachusetts eLicensing and ePermitting Portal is subject to federal and state laws, which may be amended from time to time,</li> </ul>	
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• Click on "Energy and Environmental Affairs" and "Apply for a DEP Authorization"

CLICK ON THE BELOW LINKS TO APPLY FOR AUTHORIZATIONS FROM DIFFERENT DEPARTMENTS:

ENERGY AND ENVIRONMENTAL AFFAIRS (DEP, MDAR, DCR)

APPLY FOR A DEP AUTHORIZATION
 APPLY FOR A MDAR AUTHORIZATION
 APPLY FOR A DCR AUTHORIZATION

LINK YOUR ACCOUNT

Continue »



- Click "Hazardous Waste" to see available applications
- Select "Notification of On-Site Recycling Activity and

Click "Continue"	The following are the Authorizations for the selected Department:
	Air Quality (AQ)
	Drinking Water (DW)
	Hazardous Waste (HW)
	O Notification of on-site recycling activity
	Solid Waste (SW)
	O SW48 - Third-Party Inspector Qualifications Statement Application
	Toxic Use Reduction (TUB)
	TU01 - General Practice Planner Application     TU02 - Limited Practice Planner Application
	Waste Water Management (WWM)
	Continue Application +
EEA ePLACE Portal	

# Identify your Facility

- Search for an existing facility by entering name or address and click on "Search".
- If not found, click on "Clear" and use different or fewer criteria
- If still not found, add as new facility by typing in the facility information as required (see red asterisk)

0	*State: (? MA *	• Zip:	0	
	ongitude			
() AQ ID:	0			
	() () () () () () () () () () () () () (	<ul> <li>*State: (? MA *</li> <li>Longitude</li> <li>(?) AQ ID: (?)</li> </ul>	<ul> <li>State: () *Zip:</li> <li>MA *</li> <li>Longitude</li> <li>() AQ ID: ()</li> </ul>	<ul> <li>? State: ? *Zip: ?</li> <li>MA ▼</li> <li>Longitude</li> <li>AQ ID: ?</li> </ul>



# Search Facility

- Based on what you have searched for, a list will be returned with all possible matches.
- In the example here the search was for a street named "Hampden"
- Click on the button to the left of the facility you are seeking and click "Select" or
- Click "Cancel and search again



Fac	on of the name, in the "Name" box and click on "Search". Your search will return a li ility(s)
Show	ring 1-12 of 12
	Facility Name   Address
0	HAMPDEN   625 MAIN ST HAMPDEN MA 01036
0	HAMPDEN AUTO BODY   224 MAIN ST HAMPDEN MA 01036
0	HAMPDEN COUNTRY CLUB   128 WILBRAHAM RD HAMPDEN MA 01036
0	HAMPDEN COUNTY JAIL   0 GEORGIA ST LUDLOW MA 01056
0	HAMPDEN COUNTY SHERIFFS DEPT CORRECTION   627 RANDALL RD LUDLOW MA 01056
0	HAMPDEN ENGINEERING CORP   99 SHAKER RD EAST LONGMEADOW MA 01028
0	HAMPDEN FENCE SUPPLY INC   80 INDUSTRIAL LN AGAWAM MA 01001
0	HAMPDEN GAS MART INC   562 WESTFIELD ST WEST SPRINGFIELD MA 01089
0	HAMPDEN HIGHWAY DEPARTMENT   589 MAIN ST HAMPDEN MA 01036
0	HAMPDEN PAPERS INC   100 WATER ST HOLYOKE MA 01040
0	HAMPDEN PONDS REALTY LLC   95 NEW BROADWAY WESTFIELD MA 01085
0	HAMPDEN TRADING INC   33 COMMERCIAL DR HAMPDEN MA 01036
<	
Se	lect Cancel

## Identify Facility Owner

- Click "Look Up" to find Facility Owners already registered with DEP
- Or add a new Owner

#### **Owner Information**

To add an owner, click the "Add New" button. You will have the option of using your login information, if applicable. You can also "Look Up" a previously entered contact, and select as the owner. If an owner is incorrect or has changed, you need to add the new/correct owner first, and then you can remove the incorrect/previous owner. Note that at least one owner is required to be entered.



## Look Up Owner

- Search for an existing Contact by a entering name and click on "Look Up"
- Select your contact from the list and click "Continue"
- If not found, click on "Clear" and try with fewer criteria
- If still not found, click "Cancel"



Look Up Contact			
Contact Type: (?)			
First Name:	Middle Name:	Last Name:	
Name Of Organization	: 0	Contact Person:	
Telephone #:			
XXX-XXX-XXXX			
E-mail:			
Look Up Clear	Cancel		

#### Save and Resume

- At some point in the process, you should click the "Save and Resume" button.
- When you do this, the system will send you an email with a PIN Number.
- Share this number (forward the email) with the Responsible Official who will be submitting the application under their signature. Instructions for how to activate this PIN are available on the EPLACE website.
- Once you click no "Save and Resume" the system will return you to a page with a list of "Your records"
- Click on the blue "Resume Application" link next to the application line item to continuing completing the application.



# Add a New Owner Record

- If there is no registered owner, click "Add New"
- Provide the information in the new window that opens
- If the person logged in is the facility owner, click the box "Use Login Information" and the rest will be filled in for you
- When done, click "Continue"

A red asterisk (\*) indicates that the information in that box is required



Please fill the below In	formation:		×
Use Login Information			
Individual/Organization:			
-Select-			
First Name:	Middle Name:	Last Name:	
Suffix:			
*Telephone #:	Ext #:		
100-000-0007			
*E-mail:			
P.O. Box / Address Line:		Ø	
Country:			
United States	•		
*City: +S	tate:	*Zip: 🕧	
	Select *		

### Step 2. On-Site Supervisor Information

- Click on the "Instructions" button to see the instructions for this form.
- Provide the name and contact information for the on-site Supervisor of the HW Recycling activity as well as the mailing address for the Facility.

Step 2: On-Site Supervisor Info>F	Page 1 of 1	
	Instructions	
Person On-Site Responsible for	Supervising Recycling Activity	*indicates a required field.
* First Name:	Middle Name:	
*Last Name:	*Telephone Number: ()	
On-site Supervisor's Email Address:		
Facility Mailing Address		
P.O. Box / Address Line:	City:	
State:	Zip: ()	
Country:		



## **Step 3. Application Information**

- Indicate what material you are recycling and how much you recycle.
- Click "Add a Row" to get started.
- Materials options include Waste Oil, Spent Photographic Fixer, Spent Solvents and "Other".
- If "Other" is selected you must describe the material in the box provided (up to 4000 characters)



Step 3:A	pplication Inform	ation > Page 1 of 2			*indicates a required field
Material Information					
MATERIAL	S AND ACTIVITY(S)				
Add a line for	each material with a unique	e HW code or a unique make/ model of equipm	ent.		
Showing 0-(	0 of 0				
	Recycled Material(s)	Projected amount recycled (per year)	Units	HW Codes	Additional description
No record	s found.				
Add a Dow	Edit Coloctod	Dalata Salactad			

## Step 3. Application Information (cont.)

- In the next table, select the recycling method.
- The recycled materials are listed for you.
- Click on the box to the left of the listed material
- Click "Edit Row" to get started

KAKE AN	D MODEL						
Δ!	ior each of the in	dicated rows, please cl	ick Edit from the Actio	ns drop-down me	enu, or check the box next t	to an indicated row	e, and click
	LOK Selected, to	enter the required into	ormation.				
_							_
howing	1-1 of 1						
towing	1-1 of 1 Recycled Material(s)	Equipment or Activity Type	Equipment Make/Model	Number of units	Fire Department Permit Number	Installation Date	



## Step 3. Application Information (cont.)

# • Equipment or Activity Type options:

- Waste Oil Burner,
- Boiler,
- Completely enclosed recycling systems, completely enclosed solvent still, stand alone silver recovery unit (enclosed),
- Used or reused as an ingredient in an industrial process without reclamation,
- Substitute for a commercial product,
- Substitute for feedstock in the original process without reclamation
- Complete the remaining boxes with information specific to that equipment or activity.

Recycled Material(s):	*Equipment or Activity Type:	Equipment Make/Model: 🕐
Waste Oil	Select	
Number of units:	Fire Department Permit Number:	Installation Date:



## Step 3. Application Information (cont.)

- Indicate how the recycled material is stored (accumulated)
- Click on the box for storage type. That will open up additional boxes to provide information on the amount stored on site.

Recyclable Accumulation Type	
Capacities will be entered in gallons	
Underground Tanks: Above Ground Tanks: Other Containers:	
Continue Application >	Save and resume later



### Step 4. Applicant and Contributors

The Applicant (responsible official), needs to identify their authority to be the signatory for this notification.

In the boxes provided:

- Type in the organization name,
- Pick the appropriate Organization type (source of Signatory Authority), and
- Select the appropriate title or position.

#### Signatory Authority





#### Step 4. Applicant and Contributors

- The Applicant Information box will show the name and address of the person currently logged into the application. This is the applicant. If the person filing out the form is NOT the "Responsible Official" or Signatory for the Facility, they are not the applicant, please log out and have the Responsible Official log in to complete the form.
- Click "Continue Application" if the correct person is shown as the applicant. Ignore the "Edit or View" link- this has been disabled.

o review or certify this application, click on the "Continue Application" button o review. After reviewing, you will need to click on the "Save and resume later"	a. For most applications, if you are not the applicant, you will only be a button, and have the applicant log-in to certify.
Applicant Information:	
Laurel J Carlson	
Boston, , 02108	
Telephone #: 617-348-4095 Email: Laurel.Carlson@state.ma.us	
dit or View	
Continue Application »	Save and resume later



#### Step 5. Review and Certification

- Review your notification
- Click "Edit Application" if you want to update or change any information you provided.
- Scroll to the bottom for the Certification language.

CHINA OF THE 14	Participant Contractor		Edit Ap	päration	ning in genan.	
Facility Inf	ormation					
RULLER BOX   1 DEP Facility ID DEP Region: 52 ISW ID: NV508 Facility Record Owner Infr	10 CHESTMUT ST NO 11/102 ASSESS E: 15-74C-02193 crimation	RTH ATTLEBOR	30(3H MA 02760			
Showing 1-1 o	1					
Rann	Organization Name	Contact Person	Telephone #	1-mil	Autom	
	Table 10x	Jane Doe	508-695-0001	someone@somewhere.com	Edd/Wese	
Person On	-Site Responsib	le for Supe	rvising Recyclin	ng Activity		
First Name: Jone			м	Niddle Name:		
Last Name: Dde On-stie Supervisor's Email Address: someone@somehwere.com			Te	Telephone Number: 5082220001		

**Review and Certification** 



### Step 5. Review and Certification

- Again, the applicant or Responsible Official must be logged in to complete the notification. Their name should be in the box of "Applicant Information"
- Read the certification statement
- Check the box agreeing to it
- Click "Continue"

#### Applicant Information

Laurel J Cartson Bosson, 02308 United States Est #: One Winter St 7th Roor

Telephone # 617-348-4095 E-mail:Laurel.Carlson/Estate maus

Leently under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and, that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including possible fines and imprisonment.

In addition, I understand that any material supplied with this application will not be considered confidential unless I have specifically requested that such material be kept confidential and the Department has made a determination of confidentiality in accordance with S10 CMR 3 D0.

I agree that I am the Applicant. If you are not the Applicant then click on 'Save and resume later' button Date Signed:

Continue Application »

Save and resume later



#### Step 6. Record Issuance

- After you've submitted the notification the screen indicates the application has been successfully completed.
- This is your record number!
- You will also receive an email indicating that your notification has been successfully submitted.





Notification of on-site recycling activity

## After Submittal

- The following Notifications will be sent you to via email:
  - Authorization PIN Allows you to share your application for any reason (but in most cases, you will probably not use this).
  - Confirmation of Application Submission. This notice will include you application or Record Number.
  - Proof of Record A printable copy of your application minus attachments. This will be sent approximately 5 minutes after submission.



#### Your Records in ePLACE

- Every application you prepare or submit will be saved in a file associated with your account in EEA ePLACE.
- From the "Your Records" screen you will be able to:
  - Resume Application If you clicked "Save and Resume" during the application process, you can resume here.
  - Edit If your application is not complete or requires a change after submission, you may be given the option to edit here. The Department needs to activate the Edit function.

In the future, if you change methods of on-site recycling or plan to recycle a different material, you must complete a new notification



## **Accessing Your Records**

•	Log in to EEA ePLACE Portal	Dashboard My Records My Account Advanced Search
•	Click "My Records"	Home
•	Click the "▶" in front of "DEP" on the next screen	Dashboard My Records My Account Advanced Search



## "My Records"

- View list of Applications/ Authorizations associated with your account.
- Status indicates current status
- Actions are also shown here.

identifying			And a stand stand standards			****	Automatical State
	Date.	Number	Recting type	Aouress	Expiration Date	Status	Action
	03/03/2017	17-WS10 000499-APP	W510 - Cross Connection Certification Application			On Hold	
	02/24/2017	17-W510- 000482-APP	WS10 - Cross Connection Certification Application			Approved	
•	02/24/2017	17-W510- 000483-APP	WS10 - Cross Connection Certification Application			Payment Pending	Pay Fees Due .
8	02/24/2017	17-WS10- 000401-APP	WS10 - Cross Connection Certification Application			Payment Pending	Pay Fees Due
۰	02/24/2017	W510-0032775	WS10 - Cross Connection Certification Authorization		02/24/2020	Active	Amendment
	02/23/2017	17TMP-001404	WS10 - Cross Connection Certification Application				Resume Application
	02/21/2017	17-WS10- 000411-APP	WS10 - Cross Connection Certification Application			Approved	
	02/21/2017	W510-0032770	WS10 - Cross Connection		02/21/2017	About to Expire	Renew Authorizatio



### To Get Help

- Questions about your ePLACE Account (account set up, password, find a form, make payment, My Records)
- <u>ePLACE\_helpdesk@state.ma.us</u>.
- or call (844) 733-7522 (7:30 am 5pm, M-F)
- Questions about the Program Requirements for this notification.
  - James Paterson at James.Paterson@state.ma.us

