

APPLICATION FOR SOLID WASTE OPERATOR LICENSE

To ensure testing eligibility, attach a check or money order and return prior to the examination date to:

**Arkansas Department of Environmental Quality
Solid Waste Licensing Program
5301 Northshore Drive
North Little Rock, AR 72118-5317**

STATE USE ONLY

Date Received: _____
SW Doc. ID# _____
Exam Date: _____
Score: _____
Invoice Number: _____
License Number: _____

Applicant Name: _____
(First) (Middle Initial) (Last)

Social Security#:

Employer:

Job Title:

Class Requested: (check all that apply)

Business Address:

1A 1B 1C

County:

2A 2B 2C

City/State/Zip:

3A 3B 3C

Business Phone:

Business Fax:

E-Mail:

PERSONAL INFORMATION

Home Address:

Home Phone:

City/State/Zip:

Cell Phone:

E-Mail:

Month and year of high school diploma or GED:

Do you have any college credits? **YES** **NO**

Number of credit hours:

Did you complete college? **YES** **NO**

Type of degree?

Are you currently licensed? **YES** **NO**

Enter License number:

How long and what class do you presently hold? Class:

Number of years?

How many years of solid waste experience do you have?

Course to be taken, name of course, location and date:

Previous Employment:

CERTIFICATION

To the best of my knowledge, I affirm the above information is true and correct.

Applicant Signature: _____ Date: _____

(May be signed electronically or printed and signed)

APPLICATION INSTRUCTIONS AND GUIDELINES

Completing the Application Form:

- * Provide all information requested.
- * Make sure the application is signed and dated.
- * Be sure to include your social security number, as required by state law.
- * Use your full legal name or first and last names with a middle initial.
- * Check all classification and level of license(s) for which you are applying.
- * Check all classification and level of license(s) for which you are applying.
- * Payment of Licensing Fees (Fee calculation below:)

- | | | |
|--|--|---|
| <input type="checkbox"/> <u>Category 1:</u>
Class 1 landfill
Transfer Station
Unsegregated MRF
MSW Incinerator
Composting Facility | <input type="checkbox"/> <u>Category 2:</u>
Class 3 Landfill
Class 4 Landfill | <input type="checkbox"/> <u>Category 3:</u>
Waste Tire
Processor |
|--|--|---|

Number of Categories Requested: _____ X \$50.00 = \$ _____ Total Fees.

Note: Initial fees are \$50.00 per classification of license requested. Example below:

- \$50.00 for a Class 1A only;
- \$100.00 if requested both a Class 1A and 2A; and
- \$150.00 if requesting all three – a Class 1A, 2A and 3A.

The Department will not bill you. Fees must accompany applications for requests to be considered administratively complete. To ensure testing eligibility, attach check or money order and return prior to the examination date to:

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For more information, contact: ADEQ Solid Waste Licensing Program (501) 682-0860 or 682-0997