



Solid Waste Transfer Report

Due January 31st of each year

Mail to:

Department of Environmental Quality
 Materials Management
 700 NE Multnomah St., Suite #600
 Portland, OR 97232

This is the DEQ-approved form for reporting solid waste received at permitted transfer facilities. Do NOT include source separated materials that are recycled or used for other beneficial purposes on this form.

Indicate whether the waste is measured in cubic yards or tons, by circling either Yards or Tons at the top of each column.

Please note that Private Vehicles are self-haul customers such as individuals, contractors, or businesses.

If you have any questions concerning the use of this form, please call the Department at 503-229-5409 or email: sw.feereporting@deq.state.or.us

Facility Name: _____ **SW Permit No.:** _____ **Calendar Year** _____

	----- Incoming Waste -----			----- Outgoing Waste -----		
	Franchised and Licensed Waste Haulers		Private Vehicles (See definition above)	Amount Shipped Off Site		
	Compacted	Uncompacted (Loose Drop Box)			To Facility 1	To Facility 2
Month	Yards / Tons Circle One	Yards / Tons Circle One	Yards / Tons Circle One	Yards / Tons Circle One	Yards / Tons Circle One	Yards / Tons Circle One
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
Total						

I certify that I am familiar with the information contained in this report and that to the best of my knowledge such information is true, complete, and accurate.

 Name (print)

Disposal sites where waste is shipped:

Facility 1 _____

 Signature Date

Facility 2 _____

Facility 3 _____

 Telephone (include area code)

 Email address