



Ohio Environmental
Protection Agency
Division of Materials & Waste Management

Solid Waste Transfer Facility Daily Log of Operations {as required by OAC Rule 3745-555-615}

Yearly Cover Sheet (Form 1)

This daily log cover sheet should be completed at the beginning of each license year and should be kept on file at the beginning of the daily log file for that year. Attach amendments to this form as necessary.

Annual Log for Year: _____ Phone #: _____

Name of Facility: _____

Mailing Address: _____
(Street) (City) (State) (Zip)

Location of Facility: _____
(Street) (City) (State) (Zip)

Owner of Facility: _____ Licensee Name: _____

Name of Site Manager: _____

This form should be retained on file for inspection by the local health department, Ohio EPA, or an authorized representative. Failure to provide accurate daily operations information may be considered a violation of Ohio Revised Code § 2921.13:TRF Log -Form 1



**Solid Waste Transfer Facility
Daily Log of Operations - Form 2A
INCOMING MATERIALS LOG**
{Log Required by OAC Rule 3745-555-615}

Facility: _____

Date: _____

Unique Vehicle ID #	Waste Type: A, CD, MSW, IMW, EW, U	Amount of Waste (Tons)			Waste Origin			Name of Hauling Company
		Within District	Out of District	Out of State	City or County	State	Generator	

* Waste Types: A = Asbestos; CD = Construction and Demolition Debris; MSW = Municipal Solid Waste; IMW = Industrial or Manufacturing Waste; EW = Excluded Waste, specify (i.e. nontoxic fly ash, nontoxic foundry sand); U = Unauthorized Waste (indicate refusal)

	Within District	Out of District	Out of State	Totals
Total Amount of Waste for This Sheet:	(a)	(b)	(c)	(a+b+c)
Cumulative Total from Previous Sheet (Same Day):	(d)	(e)	(f)	(d+e+f)
Cumulative Total Waste for This Day:	(g)	(h)	(i)	(g+h+i)

FORM - 2A

This form should be retained on file for inspection by the local health department, Ohio EPA, or daily operations information may be considered a violation of Ohio Revised Code § 2921.13.

Signature of Person Completing Form

Print Name of Person Completing Form

This is page ___ of ___ for this date.



**Solid Waste Transfer Facility
Daily Log of Operations - Form 2B
OUTGOING MATERIALS LOG**

{Log Required by OAC Rule 3745-555-615}

Facility: _____

Date: _____

Unique Vehicle ID #	Name of Hauling Company	Solid Waste Amount (tons or yd ³)	Recycled Material Type AL, CB, GS, ML, PL, PR, O	Recycled Material Amount (tons or yd ³)	Unauthorized / Segregated Wastes (tons or yd ³)		Load Destination (Facility)
					Description	Amount	

* Recyclable Types: AL = Aluminum, CB = Cardboard, GS = Glass, ML = Metal, PL = Plastic, PR = Paper, O = Other (specify)

	Solid Waste	Recycled Materials	Total Materials
Total Amount of Waste for This Sheet:	(a)	(b)	(a)+(b)
Cumulative Total from Previous Sheet (Same Day):	(c)	(d)	(c)+(d)
Cumulative Total Waste for This Day:	(e)	(f)	(e)+(f)

FORM - 2B

This form should be retained on file for inspection by the local health department, Ohio EPA, or an authorized representative. Failure to provide accurate daily operations information may be considered a violation of Ohio Revised Code § 2921.13.

Signature of Person Completing Form

Print Name of Person Completing Form

This is page ____ of ____ for this date.



**Solid Waste Transfer Facility
Daily Log of Operations - Form 2C
INCOMING MATERIALS FROM
AN OHIO TRANSFER FACILITY**
{Log Required by OAC Rule 3745-555-615}

Facility: _____

Date: _____

Unique Vehicle ID #	Waste Type: A, CD, MSW, IMW, EW, U, SSR	Amount of Waste (Tons)		Name of Transfer Facility	City or County
		Within District	Out of District		

* Waste Types: A = Asbestos; CD = Construction and Demolition Debris; MSW = Municipal Solid Waste; IMW = Industrial or Manufacturing Waste; EW = Excluded Waste, specify (i.e. nontoxic fly ash, nontoxic foundry sand); U = Unauthorized Waste (indicate refusal); SSR = Source Separated Recyclables

	Within District	Out of District	Totals
Total Amount of Waste for This Sheet:	(a)	(b)	(a+b)
Cumulative Total from Previous Sheet (Same Day):	(c)	(d)	(c+d)
Cumulative Total Waste for This Day:	(e)	(f)	(e+f)

FORM – 2C

This form should be retained on file for inspection by the local health department, Ohio EPA, or an authorized representative. Failure to provide accurate daily operations information may be considered a violation of Ohio Revised Code § 2921.13.

Signature of Person Completing Form

Print Name of Person Completing Form

This is page ___ of ___ for this date.



**Solid Waste Transfer Facility
Daily Log of Operations - Form 2D
INCOMING RECYCLED MATERIALS LOG**
{Log Required by OAC Rule 3745-555-615}

Facility: _____

Date: _____

Unique Vehicle ID #	Name of Hauling Company	City or County	State	Source Separated Recyclables Y or N	Recyclables Type (if known)	Amount of Recyclables (Tons or Yd ³)

* Material Types: AL = Aluminum, CB = Cardboard, GS = Glass, ML = Metal, PL = Plastic, PR = Paper, O = Mixed Recyclables or Other (specify)

	Material Types Tons or Yd ³							Total Materials Tons or Yd ³
	A	C	G	M	PL	PR	O	
Total from This Sheet (Same Day):								
Cumulative Total from Previous Sheet (Same Day):								
Cumulative Total Waste for This Day:								

FORM – 2D

This form should be retained on file for inspection by the local health department, Ohio EPA, or an authorized representative. Failure to provide accurate daily operations information may be considered a violation of Ohio Revised Code § 2921.13.

Signature of Person Completing Form

Print Name of Person Completing Form

This is page ____ of ____ for this date.



**Solid Waste Transfer Facility Inspection Checklist
Daily Log of Operations Form 3**

Facility Name: _____ ID#: _____ Date: _____ County: _____
 Operator Name: _____ Today's Operating Hours: Open _____ am/pm Close _____ am/pm
 Weather conditions: _____

Place an (X) on the line next to all aspects of facility operations which have been inspected today.

3745-555-10 License

- (A) Valid license

3745-555-615 Log of Operations

- (B)(6) Damage or failure of an engineered component

3745-555-610 Facility Operation

- (A) Operated in compliance with approved plans and/or any terms/conditions
- (B) Copy of approved plans, including contingency plan, available
- (C)(1) Contingency plans for:
 - (a) Unauthorized wastes
 - (b) Burning or dusty material
 - (c) Fire, explosion, and spills
 - (d) Equipment failure
 - (e) Operations can't be conducted in compliance
 - (f) Storage and disposal of leachate
 - (g) Disposal facility unavailable
- (F) At least one operator on site
- (G) Control noise, dust, and odors
- (H) Control scattered litter
- (I) Control vectors
- (J) Maintain waste handling floor
- (K) Clean waste handling floor
- (L) Leachate management/disposal
- (M) Adequate fire control
- (N) Maintain integrity of engineered components

3745-555-650 Waste handling

- (A) Adequate operable equipment
- (B) Facility not altered or modified
- (C) Use scales to determine gate receipts
- (D) Storage and handling on waste handling floor
- (E) Waste handling in smallest area
- (F) Transfer waste as soon as practicable
- (G) Shall not accept:
 - (1) Hazardous waste
 - (2) NESHAP regulated asbestos
 - (3) Wastes containing liquids
 - (4) PCB waste
 - (5) Low level radioactive waste
 - (6) TENORM
 - (7) Untreated infectious waste
 - (8) Whole or shredded scrap tires, unless sent to ST facility
 - (9) Lead-acid batteries, unless recycled
 - (10) Source-separated yard waste, unless sent to composting facility or landfill, as allowed
- (H) Refused loads
- (I) Unauthorized material found at facility managed properly
- (J) Note refused and removed material in log of operations
- (K) Segregate excepted material under (G) from other solid waste

3745-555-620 Access

- (A) Maintain access roads
- (B) Limit access
- (C) Post instructions at entrance/handling areas
- (D) Prevent activities interfering with operations/scavenging

Corrective Actions Taken and Other Comments:

 Print Name of Inspector Completing Form

 Inspector's Signature

 Date



Ohio Environmental
Protection Agency
Division of Materials and Waste Management

Instructions for Completing the Solid Waste Transfer Facility Daily Log of Operations

Form 1 - Cover Sheet

Complete Form 1 at the beginning of each license year, as this information will usually not change on a daily basis. If the information changes (i.e. name of the facility) attach an amendment to Form 1 with the corrections and the date the revisions occurred.

Form 2A - Daily Log of Operations (Incoming Materials Log)

Form 2A is the actual record of waste received for transfer to a disposal facility on a daily basis. One line of information must be provided for each load of waste received. Make additional copies of Form 2A as needed. Complete facility name and date at the beginning of each day.

Column 1 - Unique vehicle/trailer ID #: This number should be a unique number that can identify each vehicle/trailer and is clearly marked on the vehicle/trailer. This could include license plate number, trailer number, rail car number, rolloff box number, etc.

Column 2 - Waste Type: Record the type of waste received for each load in this column. Codes and descriptions for waste types are as follows:

A - Asbestos - is NESHAP regulated asbestos waste.

CD - Construction and Demolition Debris - is waste material resulting from the alteration, construction, destruction, rehabilitation, or repair of any physical structure built by humans, and includes particles and dust created during demolition activities, as defined in ORC Section 3714.01(C).

NOTE: Only C&DD that meets the definition of OAC Rule 3745-400-11(F) may be classified as C&DD. Material that is not readily identifiable as C&DD must be logged as MSW.

MSW - Municipal Solid Waste - includes all "solid waste" as defined in OAC 3745-27-01 except Industrial and Residual Solid Wastes.

NOTE: Only C&DD that meets the definition of OAC Rule 3745-400-11(F) may be classified as C&DD. Material that is not readily identifiable as C&DD must be logged as MSW.

IMW - Industrial or Manufacturing Waste - As defined in OAC 3745-30-01(B). Formerly known as residual solid waste (RSW) and industrial solid waste (ISW).

EW - Excluded Waste - includes, but is not limited to, nontoxic fly ash and bottom ash, spent nontoxic foundry sand, and earth or materials from mining. Specify the type of waste received on the form.

U- Unauthorized Wastes - includes untreated infectious waste from large generators of infectious waste, waste oils, hazardous wastes, NESHAP regulated asbestos, yard waste, lead acid batteries, waste tires, bulk containerized liquids, PCB waste, radioactive waste, TENORM, and any other materials not authorized for disposal at a solid waste facility unless the material is managed in accordance with a specific exception pursuant to OAC Chapter 3745-555. All loads delivered to the facility that are refused due to the presence of Unauthorized Wastes should be logged on the form with a notation that the load was refused.

Column 3 - Amount of Waste: Each load of waste received at the facility for disposal must be weighed and recorded in tons. Column 3 is divided into "Within District", "Out of District", and "Out of State" sections for recording the amount of waste in a particular load for each division. When the facility closes for the day, or when all rows on a sheet have been completely filled, total the amount of waste from all entries and place the figures in the "Total Amount of Waste for This Sheet" spaces at the bottom of the page. If only one sheet was used for a day, or for the first sheet in a day requiring multiple sheets, copy the "Total Amount of Waste for This Sheet" entries to the "Cumulative Total Waste for This Day" row at the bottom of the page. For subsequent sheets, copy the "Cumulative Total Waste for This Day" entry from the preceding page to the "Cumulative Total from Previous Sheet" row at the bottom of the page. The "Cumulative Total Waste for This Day" for that page is the sum of the "Total Amount of Waste for This Sheet" and "Cumulative Total from Previous Sheet" sections. As each sheet is completed for a given day, indicate the page number of the sheet in the space provided (note: you will not be able to indicate the total number of sheets used until the end of the day).

Column 4 - Waste Origin: Enter the name of the city or county and state where the load of waste was received by the hauling company. Enter the name of the generator of the waste.

Column 5 - Name of Hauling Company: For each load, record the name of each company which brings wastes to the facility for disposal. The operator may use a code to designate specific companies on this form provided the local health department, Ohio EPA, or an authorized representative can be supplied with records to determine the actual company name of each hauler.

Signature: At the conclusion of each day, the person completing the form shall sign in the space provided at the bottom right of the final daily log sheet used. Print the name of the person completing the form in the space provided.

Form 2B - Daily Log of Operations (Outgoing Materials Log)

Form 2B is a record of the outgoing solid waste and recycled material being transferred from the facility on a daily basis. It is also a daily record of the amount of unauthorized waste and segregated waste being transferred to an appropriate disposal facility or recycling facility. One line of information must be completed for each load of outgoing materials. Make additional copies of Form 2B as needed.

Complete facility name and date at the beginning of each day.

Column 1 - Unique vehicle/trailer ID #: This number should be a unique number that can identify each vehicle/trailer and is clearly marked on the vehicle/trailer. This could include license plate number, trailer number, rail car number, rolloff box number, etc.

Column 2 - Name of Hauling Company: Enter the name of the hauling company. The operator may use a code to designate specific companies on this form provided the local health department, Ohio EPA, or an authorized representative can be supplied with records to determine the actual company name of each hauler.

Column 3 - Solid Waste Amount: Enter the amount (weight or volume) of each outgoing load of solid waste in tons or cubic yards. Circle the appropriate unit at the top of the column. When the facility closes for the day, or when all rows on a sheet have been completely filled, total the amount of waste from all entries and place the figures in the "Total Amount of Waste for This Sheet" spaces at the bottom of the page. If only one sheet was used for a day, or for the first sheet in a day requiring multiple sheets, copy the "Total Amount of Waste for This Sheet" entries to the "Cumulative Total Waste for This Day" row at the bottom of the page. For subsequent sheets, copy the "Cumulative Total Waste for This Day" entry from the preceding page to the "Cumulative Total from Previous Sheet" row at the bottom of the page.

The "Cumulative Total Waste for This Day" for that page is the sum of the "Total Amount of Waste for This Sheet" and "Cumulative Total from Previous Sheet" sections. As each sheet is completed for a given day, indicate the page number of the sheet in the space provided (note: you will not be able to indicate the total number of sheets used until the end of the day).

Column 4 – Recycled Material Type: Record the type of recyclables outgoing for each load in this column. Codes and descriptions for waste types are as follows:

AL – Aluminum, **CB** – Cardboard, **GS** – Glass, **ML** – Metal, **PL** – Plastics, **PR** – Paper, **O** – Other (not stated here).

Column 5 - Recycled Material Amount: Enter the amount (weight or volume) of each outgoing load of material to be recycled in tons or cubic yards. Circle the appropriate unit at the top of the column. When the facility closes for the day, or when all rows on a sheet have been completely filled, total the amount of waste from all entries and place the figures in the "Total Amount of Waste for This Sheet" spaces at the bottom of the page. If only one sheet was used for a day or for the first sheet in a day requiring multiple sheets, copy the "Total Amount of Waste for This Sheet" entries to the "Cumulative Total Waste for This Day" row at the bottom of the page. For subsequent sheets, copy the "Cumulative Total Waste for This Day" entry from the preceding page to the "Cumulative Total from Previous Sheet" row at the bottom of the page. The "Cumulative Total Waste for This Day" for that page is the sum of the "Total Amount of Waste for This Sheet" and "Cumulative Total from Previous Sheet" sections. As each sheet is completed for a given day, indicate the page number of the sheet in the space provided (note: you will not be able to indicate the total number of sheets used until the end of the day).

Column 6 - Unauthorized and Segregated Wastes: In the first sub-column, please identify the type of unauthorized waste (i.e. hazardous waste, asbestos, waste oil, infectious waste or waste containing liquids) or segregated waste (i.e. lead-acid batteries, scrap tires, shredded tires, or uncontaminated yard waste). In the second sub-column, enter the amount of unauthorized waste and/or the amount of segregated waste leaving the facility. Enter the amount (weight or volume) of each outgoing load in tons or cubic yards. Circle the appropriate unit at the top of the column.

Column 7 - Load Destination (Facility): Enter the destination (name and location of the facility) of each load of outgoing solid waste, recycled material, unauthorized waste, or segregated waste.

Signature: At the conclusion of each day, the person completing the form shall sign in the space provided at the bottom right of the final daily log sheet used. Print the name of the person completing the form in the space provided.

Form 2C - Daily Log of Operations (Incoming Materials from An Ohio Transfer Facility Log)

Please note: Do not complete this form if the waste is coming from a transfer facility outside of the State of Ohio or is coming from a transfer facility excluded from regulation as a transfer facility in the State of Ohio. Instead these loads should be recorded on Form 2A.

Form 2C is the record of waste received from another licensed transfer facility, located in the State of Ohio, for transfer to a disposal facility on a daily basis. These types of waste loads would have already had the fees paid by the first transfer facility the waste was accepted. No further fees should be collected on these waste loads. One line of information must be provided for each load of waste received. Make additional copies of Form 2C as needed. Complete facility name, date, and day of week at the beginning of each day.

Column 1 - Unique vehicle/trailer ID #: This number should be a unique number that can identify each vehicle/trailer and is clearly marked on the vehicle/trailer. This could include license plate number, trailer number, rail car number, rolloff box number, etc.

Column 2 – Waste Type: Record the type of waste received for each load in this column. Codes and descriptions for waste types are as follows:

A- Asbestos - is NESHAP regulated asbestos waste.

CD- Construction and Demolition Debris - is waste material resulting from the alteration, construction, destruction, rehabilitation, or repair of any physical structure built by humans, and includes particles and dust created during demolition activities, as defined in ORC Section 3714.01(C).

NOTE: Only C&DD that meets the definition of OAC Rule 3745-400-11(F) may be classified as C&DD. Material that is not readily identifiable as C&DD must be logged as MSW.

MSW- Municipal Solid Waste - includes all "solid waste" as defined in OAC 3745-27-01 except Industrial and Residual Solid Wastes.

NOTE: Only C&DD that meets the definition of OAC Rule 3745-400-11(F) may be classified as C&DD. Material that is not readily identifiable as C&DD must be logged as MSW.

IMW– Industrial or Manufacturing Waste - As defined in OAC 3745-30-01(B). Formerly known as residual solid waste (RSW) and industrial solid waste (ISW).

EW- Excluded Waste - includes, but is not limited to, nontoxic fly ash and bottom ash, spent nontoxic foundry sand, and earth or materials from mining. Specify the type of waste received on the form.

U- Unauthorized Wastes - includes untreated infectious waste from large generators of infectious waste, waste oils, hazardous wastes, NESHAP regulated asbestos, yard waste, lead acid batteries, waste tires, bulk containerized liquids, PCB waste, radioactive waste, TENORM, and any other materials not authorized for disposal at a solid waste facility unless the material is managed in accordance with a specific exception pursuant to OAC Chapter 3745-555. All loads delivered to the facility that are refused due to the presence of Unauthorized Wastes should be logged on the form with a notation that the load was refused.

SSR– Source Separated Recyclables – Materials that have been separated from trash at either the point of generation or the point of collection for the purpose of recycling the materials. SSR includes, but is not limited to, aluminum, cardboard, glass, metal, plastics, and paper.

Column 3 - Amount of Waste: Each load of waste received at the facility for disposal must be weighted and recorded in tons. Column 3 is divided into "Within District" and "Out of District" sections for recording the amount of waste in a particular load for each division. When the facility closes for the day, or when all rows on a sheet have been completely filled, total the amount of waste from all entries and place the figures in the "Total Amount of Waste for This Sheet" spaces at the bottom of the page. If only one sheet was used for a day, or for the first sheet in a day requiring multiple sheets, copy the "Total Amount of Waste for This Sheet" entries to the "Cumulative Total Waste for This Day" row at the bottom of the page. For subsequent sheets, copy the "Cumulative Total Waste for This Day" entry from the preceding page to the "Cumulative Total from Previous Sheet" row at the bottom of the page. The "Cumulative Total Waste for This Day" for that page is the sum of

the "Total Amount of Waste for This Sheet" and "Cumulative Total from Previous Sheet" sections. As each sheet is completed for a given day, indicate the page number of the sheet in the space provided (note: you will not be able to indicate the total number of sheets used until the end of the day).

Column 4 - Name of Transfer Facility: For each load, record the name of the Ohio transfer facility where the waste was transferred prior to arriving at the facility for disposal.

Column 5 – Location of the Transfer Facility: Enter the name of the city and county of the transfer facility where the load of waste was transferred prior to arriving at the facility for disposal.

Signature: At the conclusion of each day, the person completing the form shall sign in the space provided at the bottom right of the final daily log sheet used. Print the name of the person completing the form in the space provided.

Form 2D - Daily Log of Operations (Incoming Recycled Materials Log)

Form 2D is the record of waste received for recycling on a daily basis. One line of information must be provided for each recycled material type received. Make additional copies of Form 2D as needed.

Complete facility name and date at the beginning of each day.

Column 1 - Unique vehicle/trailer ID #: This number should be a unique number that can identify each vehicle/trailer and is clearly marked on the vehicle/trailer. This could include license plate number, trailer number, rail car number, rolloff box number, etc.

Column 2 - Name of Hauling Company: For each load, record the name of each company which brings wastes to the facility for disposal. The operator may use a code to designate specific companies on this form provided the local health department, Ohio EPA, or an authorized representative can be supplied with records to determine the actual company name of each hauler.

Column 3 and 4 – Material Origin: For each load, record the name of each company which brings recycled materials to the facility. The operator may use a code to designate specific companies on this form provided the local health department, Ohio EPA, or an authorized representative can be supplied with records to determine the actual company name of each hauler. Also, enter the name of the city or county and state where the load of recycled materials was received by the hauling company. In cases where the recycled materials were received from a transfer station, specify the name and location of the transfer station.

Column 5 – Source Separated Recyclables: Indicate if the recycled materials were Source Separated Recyclables, using Y = YES, Sources Separated Recyclables or N = NO, Not Source Separated Recyclables. Source Separated Recyclables are recyclable materials separated at the point of generation and are not mixed with any other waste type and consisting of only one recyclable type. However, the load may be a mix of recyclable types. If the recycled materials were not accepted as Source Separated Recyclables due to the presence of solid waste, then the material must be recorded on form 2A above.

Column 6 – Recyclable Type: Record the type of recycled materials received for each load in this column. Please record each material type on a separate line. Codes and descriptions for material types are as follows:

AL– Aluminum, **CB**– Cardboard, **GS**– Glass, **ML**– Metal, **PL**– Plastics, **PR**– Paper, **O**– Mixed Recyclables or Other (not stated here).

Column 7 - Amount of Recycled Materials: Each load of recycled materials received at the facility must be measured and the totals for each type of recycled material must be recorded. Please indicate if the measurement was in Tons or Cubic Yards. When the facility closes for the day, or when all rows on a sheet have been completely filled, total the amount of recycled materials from all entries and place the figures in the "Total

Amount of Material for This Sheet" spaces at the bottom of the page. Also indicate the total amount for each type of recycled materials received for the page. If only one sheet was used for a day, or for the first sheet in a day requiring multiple sheets, copy the "Total Amount of Materials for This Sheet" entries to the "Cumulative Total Waste for This Day" row at the bottom of the page. For subsequent sheets, copy the "Cumulative Total Waste for This Day" entry from the preceding page to the "Cumulative Total from Previous Sheet" row at the bottom of the page. The "Cumulative Total Waste for This Day" for that page is the sum of the "Total Amount of Waste for This Sheet" and "Cumulative Total from Previous Sheet" sections. As each sheet is completed for a given day, indicate the page number of the sheet in the space provided (note: you will not be able to indicate the total number of sheets used until the end of the day).

Signature: At the conclusion of each day, the person completing the form shall sign in the space provided at the bottom right of the final daily log sheet used. Print the name of the person completing the form in the space provided.

Form 3 - Transfer Facility Daily Inspection Checklist

Form 3 is a general operational checklist to determine if the facility was inspected for compliance with OAC Rules 3745-555 and 3745-501. Complete this form, sign, and date at the close of business each day.