



How is the waste collected in your vacuum traps/secondary filters managed?

- Recycled Off-Site     Hazardous waste disposal     Put in infectious waste (biohazard) bag  
 Put in Trash     Washed down sink     Other (specify): \_\_\_\_\_

Does this practice have a gas/liquid separator tank that discharges to the sewer?  No  Yes

Does any other wastewater treatment exist to capture amalgam?  No  Yes

If yes, please explain: \_\_\_\_\_

If waste amalgams are disposed through a licensed recycler contractor, mail-in service, or a licensed hazardous waste, please included the following information:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### Image Processing Information

1. Does your practice develop x-rays on site?  No  Yes (If checked no, proceed to the Sterilization Use section)
2. Does your practice only use digital imagery technology for x-rays? )  No  Yes (If yes, proceed to the Sterilization Use section)
3. How much x-ray fixer (in gallons) does your practice dispose of per month? \_\_\_\_\_

How is it disposed?  Recycled Off-Site     Hazardous waste disposal

Put in infectious waste (biohazard) bag     Put in Trash

Other (specify):  Washed down sink **after** silver recovery     Washed down sink **without** silver recovery

4. Is silver recovery/pretreatment practiced on-site?  No  Yes (If yes, what method is used?)

Metallic (Silver recovery canister)     Ion exchange     Electrolytic

Other (describe): (Include Make and Model number): If silver recovery is used, describe maintenance procedures and frequency: \_\_\_\_\_

\_\_\_\_\_

5. If fixer is taken off-site for recycling or disposal, please provide the following information of vendor:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Sterilization Use**

Does your practice use any of the following sterilization methods?  No  Yes (If yes, check all that apply):

- Steam/autoclave     Dry/heat oven     Chemical Sterilant (chemicalve solutions)

If using a chemical sterilant, does it contain glutaraldehyde or ortho-phthaldehyde (OPA)? Check with vendor or Material Safety Data Sheet (MSDS).  No  Yes

If using a chemical sterilant, how is it disposed?

- Recycled Off-Site     Hazardous waste disposal     Put in infectious waste (biohazard) bag  
 Put in Trash     Other (specify):     Washed down sink **after** neutralizing with glycine  
 Washed down sink **without** neutralizing with glycine

**Material Handling**

Are raw or waste liquids stored adjacent to floor drains or areas which might flow into the sanitary sewer?

- No  Yes (If yes, describe material and location.)

When a raw or waste liquid spill occurs at your facility how is the material cleaned up? Where is the resulting waste disposed?

Please describe how employees are trained in the proper disposal of photographic and amalgam waste, including the clean-up and handling of spilled raw or waste materials? \_\_\_\_\_

Your facility EPA generator number (If applicable):

**Provide a copy of a plot/plumbing plan in the format described in Attachment A. If no professional drawing exists, a hand-drawn copy is acceptable. A blueprint of the facility showing the required information may also be attached. This is **NOT** required for renewal applications unless specifically requested.**

**I solemnly affirm under the penalties of perjury, and to the best of my knowledge, information and belief, that the contents of this application are true, accurate and complete.**

Owner/Authorized Representative (**print**):

Title:

Signature:

Date:

If you have any questions while completing this form, please call El Dorado Irrigation District's Environmental Division at 530-295-6867.