

APPLICATION FOR A CERTIFICATE OF EXCEPTION

For Department Use Only



ALABAMA DEPARTMENT
OF PUBLIC HEALTH

County Health Dept.

Co. Health Dept. I.D. No.

Date Received

Date Permit Issued

To Be Completed and Signed by the Applicant

PLEASE PRINT OR TYPE

Name of Applicant: _____ Phone No. _____

Address: _____

Directions to Property: _____

No. Persons Living at Residence _____

Is house-to-house (curbside) pickup service available to you? Yes No

Is a roadside container available to you? Yes No

Select the option you wish to use.

OPTION 1.

I will store my garbage in a fly-tight container and transport my own garbage and rubbish in a manner approved by the health department. I will transport my solid waste containing garbage in such a manner as not to litter the highway or create a public health hazard, and only during the set hours when the transfer station, sanitary landfill or other approved site is open. I agree to furnish to the County Health Department receipts secured from the disposal facility operator as evidence of proper disposal when requested. I will transport my solid waste containing garbage to:

Sanitary Landfill (enter name and location) _____

Solid Waste Transfer Station (enter name and location) _____

Other (describe) _____

OPTION 2.

I will dispose of my own garbage and rubbish on my own property or the property of another at an approved site. I will store my garbage in a fly-tight container for not longer than one week and I will cover said garbage and rubbish with 6 inches or more of compacted earth each time the disposal site is used. I will allow representatives of the Health Department to make periodic inspections of my disposal site.

Note: If Option 2 is chosen, attach a copy of your composting permit issued by the Alabama Department of Environmental Management to compost or confirmation that no permit is needed.

Applicant's Signature _____ **Date** _____

To Be Completed By Engineer Or Land Surveyor If Option No. 2 Is Selected

In preparing the design for the applicant's proposed solid waste disposal site, I have taken into consideration those requirements as found in Chapter 420-3-5-.06 of the Rules for Solid Waste Collection and Disposal and have attached the following materials:

_____ **A statement describing the method to be used in the excavation and covering of the disposal site.**

_____ **Detailed sketch of the property to scale giving pertinent distances to those items impacting upon the site.**

_____ **Copy of legally executed easement with other property owner.**

_____ **Results of two soil borings and location of each.**

_____ **Dimensioned drawing of proposed disposal site.**

_____ **Design calculations.**

_____ **Soil Conservation Service map with site indicated and a description of soils encountered.**

Date _____, **20**_____ **Signed** _____
(Engineer or Land Surveyor)

(Registration No.)