DEBRIS MANAGEMENT CERTIFICATION FORM

This certification form and supporting documents are required to receive Iowa Department of Natural Resources disaster debris disposal approval.

It is the applicant's responsibility to comply with all other applicable federal, state, or local statutes, rules, regulations, ordinances, and orders.

Applicant: _____ County: _____

Primary Contact Person: _____ Phone: _____

Address: _____

City: _____ Zip Code: _____ Fax: _____

Email: _____

Debris Disposition: ** MUST SELECT ONE OR MORE** (Fill in appropriate location information below).

- ☐ Chipping/Grinding Vegetation for Reuse (mulch or other beneficial use)
- ☐ Chipping/Grinding Structural Material for Landfill disposal
- ☐ Staging/Stockpiling (Temporary only, must include final disposition)
- ☐ Landfill (enter permit number & name below)
- ☐ Burning of disaster debris (during disaster proclamation)
- ☐ Burning of tree and tree trimmings (outside of disaster proclamation time frame)
- ☐ Burning Structural Wood (requires Air Quality and Field Office confirmation/approval)
- ☐ Temporary Transfer Station/Construction & Demolition Recovery Site/Material Recycling Site
- ☐ Other (attach detailed explanation for review): _____

- ☐ ASH from all burn types
  - ☐ -Landfill (enter permit number & name below)
  - ☐ -Land application/incorporation (requires DNR approval)
  - ☐ -Reuse (may require DNR approval- Final Disposition) _____

LANDFILL

Permit #: _____ Landfill Name: _____

Landfill Address/Location: _____ Phone: _____

1. TYPE OF DEBRIS DISPOSAL ACTIVITY: _____

   Address/Location: _____ GPS (decimal degrees): _____

2. TYPE OF DEBRIS DISPOSAL ACTIVITY: _____

   Address/Location: _____ GPS (decimal degrees): _____

3. TYPE OF DEBRIS DISPOSAL ACTIVITY: _____

   Address/Location: _____ GPS (decimal degrees): _____

For additional sites, use the back of this sheet and provide required information.

On behalf of the applicant, I certify that the above requirements have been met.

_____ Signature and Title

_____ Date