Yukon Environment

LAND TREATMENT FACILITY PERMIT ANNUAL REPORTING FORM

This form may be used to track information submitted to satisfy the annual reporting requirements of a **Land Treatment Facility Permit**. The same information can also be submitted without using this form. Whether or not you use this form, please submit the entire report at one time.

Annual LTF reports may be submitted in any of the following ways:

In person:	10 Burns Road, Whitehorse, YT
By mail:	Environmental Programs Branch, Box 2703 (V-8), Whitehorse, YT, Y1A 2C6
By fax:	(867) 393-6205
By e-mail:	cspermit@gov.yk.ca

Permittee: _____

Permit number: _____

Reporting year: _____

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1. Summary of soil volumes:

Status of soil	Volume of soil (m^3)
Total volume in the facility at the beginning of the reporting year:	
Added during the reporting year:	+
Removed during the reporting year:	–
Total volume in the facility at the end of the reporting year:	=

2. Summary of water volumes:

Status of water	Volume of water (L)
Total volume in the facility at the beginning of the reporting year:	
Added during the reporting year:	+
Removed during the reporting year:	–
Applied to soil during the reporting year:	–
Total volume in the facility at the end of the reporting year:	=
Discrepancies (estimated loss due to evaporation/infiltration):	

3. List all soil and water that was present in the facility at any point during the reporting year:

Year Accepted	Relocation Permit #	Volume (m^3)	Status Notes	Date(s) of Tillage/Turning	Samples Taken*	Date removed from LTF	Receiving Site Location and Land Use

** Samples taken during the reporting year: None, Initial, Interim, or Final.*

4. Were any of the stockpiles listed in the table above found to meet or exceed special waste criteria?

☐ No

☐ Yes, identify each special waste stockpile by relocation permit number, and indicate what was done with each stockpile (e.g. moved to special waste cell, removed from facility, no change from previous year, etc.)

Relocation Permit #	Action

5. Details on tillage/turning:

Equipment used: _____

Depths and areas tilled (only required if partial piles were tilled): _____

_____

_____

6. Were any nutrients added during the reporting year?

☐ No

☐ Yes, provide details, including nutrient types, dates, and quantities:

_____

_____

Documents attached:

7. A figure showing the entire facility, including the location within the facility of contaminated material from each source. (Note: the figure should show all major features of the facility, such as berms, ramps, and sumps, and should label each stockpile of contaminated material by relocation permit number)

☐ Attached

8. Laboratory reports for samples taken to characterize any soil or water accepted for treatment during the reporting year. (Note: sample results need not be attached if they have been submitted in support of a relocation permit)

☐ Attached

☐ Submitted under Relocation Permit(s)

☐ No materials accepted

9. Laboratory reports for any interim or confirmatory samples taken to assess remediation progress during the reporting year. (Note: sample results need not be attached if they have been submitted in support of a request to remove material from the facility)

☐ Attached

☐ Submitted with removal request(s)

☐ No samples taken

10. Laboratory reports for samples taken to characterize runoff from the facility during the reporting year.

☐ Attached

☐ No samples taken

11. For facilities with natural liners, laboratory reports for samples collected from the natural liner underneath each stockpile upon removal from the facility.

☐ Attached

12. Groundwater elevations for all wells at the facility.

☐ Attached

☐ No groundwater wells

13. Results of all groundwater analyses conducted.

☐ Attached

☐ No groundwater analyses conducted

14. Other attachments: _____

_____

_____

15. Sampling, monitoring, and work plan for the entire facility for the current calendar year (i.e. the year following the reporting year):

☐ Attached; or

☐ As described below:

_____

_____

_____

_____

_____

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_____

_____

16. Any other pertinent information regarding activities undertaken at the facility during the reporting year: _____

_____

_____

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_____

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_____

I, _____ [print name clearly], am the authorized representative of _____ [business person responsible for source or activity], and I certify that the information provided on this application form is correct and complete to the best of my knowledge.

_____	_____	_____
Signature of Applicant	Date	No. of attachments

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