

BROOME COUNTY LANDFILL PERMIT APPLICATION
286 KNAPP RD., BINGHAMTON, NY 13905
(Print or type all information)

GENERAL INFORMATION

This application is for the use of the Broome County Landfill and consists of four parts:

- Part A: Applicant Information
- Part B: Applicant Vehicle Information
- Part C: Waste Identification
- Part D: Recycling Plan

All Parts need to be **COMPLETED IN FULL** in order to receive a permit.

Permits are for one year (July 1 - June 30). Fees are prorated on a per month basis for the remainder of the permit year. Permit applications will be used to verify license plate number, vehicle type, etc. before a permit is issued. Upon approval, a permit will be issued to the applicant from the Broome County Landfill.

New applicants are required to pay for each load at the time of disposal for a period of four (4) months. This four-month period begins with the first trip to the landfill. Regular use of the landfill will be required to establish a credit history. Once a satisfactory credit history has been established, tipping fees will be billed to the account.

Applicants renewing an existing or expired permit will be provided with a number sticker for any new or additional vehicles added to your permit.

Pro-rated Permit Fees:

| Month | Application Fee | Vehicle Fee |
|-----------|-----------------|-------------|
| July | \$ 55.00 | \$ 30.00 |
| August | \$ 50.42 | \$ 27.50 |
| September | \$ 45.84 | \$ 25.00 |
| October | \$ 41.26 | \$ 22.50 |
| November | \$ 36.68 | \$ 20.00 |
| December | \$ 32.10 | \$ 17.50 |
| January | \$ 27.52 | \$ 15.00 |
| February | \$ 22.94 | \$ 12.50 |
| March | \$ 18.36 | \$ 10.00 |
| April | \$ 13.78 | \$ 7.50 |
| May | \$ 9.20 | \$ 5.00 |
| June | \$ 4.62 | \$ 2.50 |

****RENEWALS ONLY****

DO NOT SEND A CHECK WITH YOUR APPLICATION

PERMITTING FEES WILL BE BILLED BASED ON THE APPLICATION INFORMATION

For any questions about completing these forms, please call (607) 763-4460.

Email completed application to BROOMECOUNTYLANDFILL@BROOMECOUNTYNY.GOV

Part A - APPLICANT INFORMATION. This part must be completed for all permits in order to use the Broome County Landfill for the disposal of municipal and/or commercial solid waste.

- 1.) Business Name - Name of business applying for the permit.
Previous Name - List all former names that had a BCLF permit at any time in the past.
 - 2.) Mailing Address - Mailing address of your company. If your mailing address is a PO Box, also list the street address. The telephone and fax number of your business.
 - 3.) Contact Person - Name, title, phone number with extension and e-mail address of the person who is to be contacted if there are questions regarding the application or any problems that may arise.
 - 4.) Accounts Payable Contact - Name, title, phone number and extension and e-mail address of the person who is to be contacted if there are questions regarding the billing account.
 - 5.) Legal Character of Business - Indicate the legal character of the applicant/business. Businesses are to provide a Federal Tax Number (or submit a copy of the Certificate of Incorporation) and skip to line 9.
- 6-8 ARE FOR "INDIVIDUAL" APPLICANTS ONLY**
- 6.) Enter the name of the person applying for the permit
 - 7.) Enter the applicant's date of birth.
 - 8.) Enter the applicant's home address and home/cell phone number.
 - 9.) The application must be signed by an officer of the firm (for a corporation), or by the owner (for other businesses and individuals).

PART B - VEHICLE INFORMATION.

All Applicants/Renewals - List all vehicles that will be using the landfill. Indicate your vehicle number if applicable (see #7 below).

- 1.) Landfill number - Leave this blank.
- 2.) License number - Plate number of vehicle.
- 3.) State - Indicate state issuing license plate.
- 4.) Vehicle type - Front loader, rear packer, rolloff truck, side loader, dump, etc.
- 5.) Make - Indicate manufacturer of the vehicle (Mack, International, Chevy, Ford, etc.)
- 6.) Color - Indicate the color of the vehicle.
- 7.) Your vehicle number - Indicate your company/municipality's vehicle number.

PART C - WASTE IDENTIFICATION. All permit applications must identify all types of material or waste for which you are requesting to be permitted for disposal.

PART D - RECYCLING PLAN. All permit applications must include a completed Recycling Plan in order for the application to be deemed complete. In the event the recycling plan is missing information, landfill staff will provide written notification to the applicant within 15 days of receipt. The applicant will be given a 60-day grace period from the date of application to bring the plan into compliance. If the applicant is not in compliance within that 60-day period, their landfill permit will be suspended and access to the landfill will be denied until such time as the applicant is in compliance with the guidelines as set forth. Failure to comply with these guidelines within 120 days of suspension will result in the revocation of your landfill permit.

Email completed application to BROOMECOUNTYLANDFILL@BROOMECOUNTYNY.GOV

BROOME COUNTY LANDFILL PERMIT APPLICATION

| TO BE COMPLETED BY BCLF | REVISED 04/25 | FOR OFFICIAL USE ONLY |
|-------------------------|------------------------|-----------------------|
| Application Fee: _____ | BCLF Permit #: _____ | |
| Vehicle Fee: _____ | Date Issued: _____ | |
| Invoiced Amount: _____ | Expiration Date: _____ | 6/30/2026 |

Annual permit period: July 1 through June 30

Questions: (607) 763-4460

Email completed application to broomecountylandfill@broomecountyny.gov

PART A - APPLICANT INFORMATION

1. Business/Individual name: _____
Previous name(s): _____
2. Mailing Address: _____
(Mailing address) _____

(If PO Box is used, a street address is also required) _____

(City) _____ (State) _____ (Zip) _____
(Telephone/Cell #) _____
3. Contact Person: _____
(Name) _____ (Title) _____ (Phone # / Ext) _____
E-Mail Address: _____
4. Accounts Payable Contact: _____
E-Mail Address: _____
5. Legal Character of Business: (Check one)

☐ Corporation - Federal Tax No.: _____
☐ Government: _____
☐ Partnership - Federal Tax No.: _____
☐ Other - Explain: _____

***** 6 - 8 are for Individual Applicants Only - All others skip to item 9.**

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- Home phone/Cell phone: _____

By signing this application, the permittee shall indemnify and hold harmless Broome County and any of its officers, agents and employs from all claims, demands, causes of action and judgements arising out of injuries to persons and/or property of whatever kind or nature as a result of the fault of negligence of the permittee, its employees or agents in the premittee's use of a County owned and/or operated sanitary landfill. The permittee shall indemnify and hold harmless Broome County and any of its officers, agents and employees from al claims, demand, causes of action, costs and judgments as a result of the disposal of materials prohibited by Chapter 317 of the Broome County Charter and Code by the permittee, its employees or agents in the permittee's use of a County owned and/or operated sanitary landfill.

I understand that if the completed permit application and/or fees are inaccurate, it will be returned and use of the Broome County Landfill will be suspended until the permit and/or fees are submitted correctly. The permittee agrees to pay all reasonable collection fees including attorney fees and to notify the Division of Solid Waste Management immediately of any changes in management, address, etc.

By my signature, I agree to be personally liable for all fees incurred as a result of this permit. If a corporation or government entity, the permittee is acquainted with the facts and circumstances therein; that the permittee has read the foregoing and knows the contents thereof that the same is true to the permittee's own knowledge.

| | |
|----------------------|----------------------------------|
| _____ (Signature) | _____ (Printed or typed name) |
| _____ (Title) | _____ (Date) |

PART B - VEHICLE INFORMATION ****ALL APPLICANTS****

All Applicants: List below all of your trucks that will be using the landfill.

[illegible]

PART C- WASTE IDENTIFICATION *ALL APPLICANTS*

Please identify all types of material or waste you are requesting to be permitted for disposal:

| | | |
|--|--|--|
| <input type="checkbox"/> Municipal Solid Waste (MSW) | <input type="checkbox"/> Construction/Demolition | <input type="checkbox"/> Industrial Waste |
| <input type="checkbox"/> Stabilized Sludge | <input type="checkbox"/> Grit & Bar Screen | <input type="checkbox"/> Contaminated Soli |
| <input type="checkbox"/> Friable Asbestos | <input type="checkbox"/> Non-Friable Asbestos | <input type="checkbox"/> Yard Waste |

Other: _____

PART D - RECYCLING PLAN *ALL APPLICANTS*

The following materials will not be accepted co-mingled with other trash. Each category must be kept separate.

| | Do you Collect: Click the Appropriate Answer | Est. Quantity? Tons per Year | Method of Management List Facility taken to |
|--|--|---------------------------------|--|
| <u>Leaves & Yardwaste:</u> | | | |
| Residential: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| Commercial: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| <u>Tires:</u> | | | |
| Residential: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| Commercial: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| <u>Large Appliances & White Goods (Metals):</u> | | | |
| Residential: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| Commercial: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| <u>Paper:</u> | | | |
| Office Paper/Mixed Paper, Corrugated Cardboard & Newspaper | | | |
| Residential: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| Commercial: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| <u>Containers:</u> | | | |
| Recyclable Plastic, Metal Cans & Glass Containers | | | |
| Residential: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| Commercial: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| <u>Batteries (Wet & Dry Cell):</u> | | | |
| Residential: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |
| Commercial: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ | _____ |

EMAIL COMPLETED APPLICATION TO: BROOMECOUNTYLANDFILL@BROOMECOUNTYN.Y.GOV