



Fairbanks North Star Borough

Solid Waste Division

455 Sanduri Street • Fairbanks, Alaska 99701 • (907) 459-1482 FAX (907)459-1017

Email: solidwaste@fnsb.us

REQUEST TO USE SOLID WASTE FACILITIES

All requests for disposal of solid waste generated **outside** the FNSB must be coordinated **through** and expressed in **writing** to the Solid Waste Manager. All requests **exceeding** 25 tons per month must be **approved** by the Mayor; if longer than 60 days, **concurring** by the Assembly.

Please complete the Requestor's Information section and return this form to the above address by email, mail, or fax. The request is forwarded to the Mayor's Office for a decision.

Requests are **not** in effect until you receive confirmation from the Solid Waste Manager.

REQUESTOR'S INFORMATION

Name: _____ Phone: _____ Email/Fax: _____

Company: _____ City, State, Zip: _____

What types of material (s) and quantities in tons will be brought to the solid waste facility?

How will the materials be transported to the solid waste facility? Who will transport them? _____

When will the materials be brought to the solid waste facility and over what time period? _____

SOLID WASTE MANAGER USE ONLY - Recommendation to accept solid waste

The material meets the conditions of the Borough's ADEC Solid Waste Permit?	Yes	/	No
The solid waste can be safely and efficiently disposed at the solid waste facility?	Yes	/	No
The solid waste will not significantly impact the capacity of the solid waste facility?	Yes	/	No
There will be no harm to the borough or the borough solid waste facility?	Yes	/	No
Recommendation to accept solid waste?	Yes	/	No

Comment: _____

MAYOR'S OFFICE USE ONLY - REQUIRED IF WASTE EXCEEDS 25 TONS PER MONTH.

	Approve	Disapprove	Dates

Karl W. Kassel, Borough Mayor			

FNSB ASSEMBLY'S USE ONLY - REQUIRED IF DISPOSAL FOR LONGER THAN 60 DAYS.

	Approve	Disapprove	Dates

Presiding Officer			

INSTRUCTIONS TO WEIGH STATION ATTENDANT

Permission has been granted for the above project. Please enter data as follows:

Vehicle: _____	Reference: _____	Note 1: _____
Bill to: _____	Origin: _____	Note 2: _____
	Grid: _____	Material: _____

Copy given to Scalehouse.

Requestor Notified