



DANE COUNTY DEPARTMENT OF WASTE & RENEWABLES

ASBESTOS DISPOSAL REQUIREMENTS

To protect the health and safety of our workers, you will be required to comply with the following disposal criteria:

1. Completed Asbestos Disposal Permit must be brought to the landfill on anticipated date of disposal. Landfill Scale House (Michaelis.Christine@countyofdane.com) must be contacted at least 48 hours before delivering the asbestos waste. If the Landfill is not notified, the load will not be accepted.
2. Asbestos will only be accepted at the County's Rodefild Landfill, 7102 U.S. Highway 12 & 18, Madison, Wisconsin, between 7:00 A.M. and 1:00 P.M. on the first Wednesday of each month. (Asbestos will be accepted on the second Wednesday of each month, when the first Wednesday falls on a holiday).
3. Friable asbestos must be thoroughly wetted and wrapped in two impermeable, 6 mil, plastic bags or other approved containers. (Note: Two 3 mil bags, three 2 mil bags, or six 1 mil bags are not equivalent to one 6 mil bag).
4. Non-Friable asbestos does not require double-bagging. Non-friable asbestos is material which cannot be crumbled, pulverized, or reduced to a powder, when dry, by hand pressure (i.e. shingles, siding, and floor tile, are usually non-friable). Containers must be covered and sealed.
5. Category II non-friable asbestos ("transite" siding) must be wetted as necessary to control dust.
6. Asbestos shall be packaged in quantities that will facilitate hand unloading.
7. All open top vehicles must be tarped. Untarped loads will not be accepted.
8. Asbestos generated outside Dane County will not be accepted.
9. Asbestos delivered in metal or plastic drums will not be accepted.

The load of asbestos will be inspected at the scale house. If the load does not meet the above requirements, it will not be accepted for disposal.

If you have any questions related to asbestos disposal, please contact Robert Regan at (608) 516-3159.



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ASBESTOS DISPOSAL PERMIT

DATE OF DISPOSAL: _____ (PLEASE BRING COMPLETED PERMIT ON DATE OF DISPOSAL)

SOURCE OF ASBESTOS:

Home/business owner _____
Site Address: _____ Zip: _____
Mailing Address: _____ Zip: _____
Contact Person: _____
Mobile Phone: _____ Email: _____

REMOVAL CONTRACTOR: Check if same as above _____

Name: _____
Business Address: _____ Zip: _____
Contact Person: _____
Mobile Phone: _____ Email: _____

Signature: _____ Date: _____

ASBESTOS HAULER: Check if same as above _____

Name: _____
Business Address: _____ Zip: _____
Contact Person: _____
Mobile Phone: _____ Email: _____

Signature: _____ Driver's Printed Name: _____

MATERIAL DETAILS: Include volume of each type of material, follow instructions for disposal:

Table with 4 columns: MATERIAL TYPE, NUMBER OF BAGS, APPROXIMATE VOLUME (cubic yards), REQUIREMENTS FOR DELIVERY. Rows include Friable, Non-Friable, and Non Friable (Cat II) with specific disposal requirements.

TO BE COMPLETED BY DANE COUNTY

Landfill Scale Attendant:
Date of Disposal: _____ Transaction No: _____ Weight: _____
Copy Given to Asbestos Hauler: Yes ___ No: ___
Discrepancies: _____
Signature: _____ Printed Name: _____