

Specialty Lines

UNDERWRITERS

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Public Entity Application Landfill/Dump/Refuse Site/Incinerator Questionnaire D

Please complete a separate questionnaire for each site.

Pollution Exclusion Applies.

Legal Name of Public Entity: _____ Effective Date: _____

1. Type of facility: Landfill Dump Transfer station
2. Advise if the site is: owned by the Public Entity, or operated by the Public Entity.
3. Has the site been designated as either a hazardous waste or superfund site by the EPA?..... Yes No
4. a. Describe the site as specifically as possible: _____

- b. What is immediately adjacent to landfill site? _____
- c. What is nearest body of water? _____ How far away from site? _____
- d. What is nearest building? _____ How far away from site? _____
5. a. Total number of acres: _____
- b. Number of acres in use: _____
- c. Number of years operated: _____
- d. What is remaining useful life? _____
- e. Is the landfill licensed or certified? Yes No
If "yes," by what agency? _____
6. Security provisions:
 - a. Fenced? Yes No
Height? _____
 - b. Attendant? Yes No
Hours? _____
 - c. Locked? Yes No
Describe lock policy: _____
7. Describe waste accepted:
 - a. Type (residential, commercial, etc.): _____
 - b. Form (solid, liquid, sludge, etc.): _____
 - c. Hazardous waste? Yes No
If "yes," explain: _____

8. Any record of violation or citations outstanding?..... Yes No
 If "yes," explain: _____
9. How are leachate and methane exposures evaluated and controlled? _____

10. Number of inactive landfills: _____ Locations: _____ No. of acres: _____
11. Are monitoring wells installed? Yes No
 If "yes," describe any protection surrounding: _____

12. a. Describe closure plans for landfill: _____ (Cite time frame)
 b. Were EPA guidelines followed? Yes No
13. If transfer station:
- a. Are dumpsters used? Yes No
- b. Is there an open pit? Yes No
- c. Is entity responsible for transportation to landfill? Yes No
 If "no," is it contracted? (Provide certificate of insurance.)..... Yes No