

# Used Oil Transporter/ Transfer Facility Annual Report for Calendar Year 20\_\_\_\_ Reports due by March 15

Check all that apply:   Transporter  Transfer Facility						
Facility Name:						
Facility Registration#.:		EPA ID#:				
Facility Physical Address:	Street:					
(Physical address not P 0. Box or Route#)	City:	5	State:	Zip Code:		
	County:					
Facility Mailing Address:	Street:					
	City:	(	State:	Zip Code:		
Facility Phone Number:		Facility Fax Number:				
Facility Contact Person:		Title:				
(Person to be contacted regarding waste activities)	Phone Number:					
	Email Address:					
I hereby certify (or declare) that all information submitted in this annual report is true and accurate to the best of my knowledge.						
Signature:		Date:				
Print Name:						
Title:						
Phone Number:						
Email Address:						
Submit to SCDHEC Land & Waste Management -Compliance & Enforcement 2600 Bull St Columbia, SC 29201						



## Used Oil Transporter/ Transfer Facility Annual Report for Calendar Year 20\_\_\_\_

Facility Name:	Facility ID#:		County:	
Source of Used Oil Transported	Address	Date Received	Quantity Received	Destination of End Use
		Total:		

Please make extra copies for additional entries - If submitting multiple sheets, please provide a Grand Total of the "Quantity Received" during the reporting year.

### Instructions for Completing DHEC 1317 South Carolina Used Oil Transporter/ Transfer Facilities Annual Report for the Fiscal Year

PURPOSE: All Used Oil Transporter/ Transfer Facilities are to use this form to report all activities during the last fiscal year (July 1st – June 30<sup>th</sup>). The hard-copy report must be received by the Division of Compliance and Enforcement prior to March 15<sup>th</sup>. Emails and faxes will not be accepted.

This is a 2 page form. Both pages should be addressed even if it is just to fill out the top, with the Year, the Facility's name, ID# and the County in which it is located. To move from page to page while using Excel on the computer - please click on the tabs found at the bottom left corner of the screen labeled "Information" and "Page 2".

When printing this entire form:

- Click on print
- Then under "Print What",
  - click on "Entire Workbook"
- Click on "OK"

ITEM BY ITEM INSTRUCTIONS - Print or type -

#### Page 1

- 1. Enter the year covered by this report.
- 2. Enter the complete name of the Facility submitting the annual report.
- 3. Enter the facility's permit number. (Please make sure to use the correct number for the facility. Some entities have more than one permit number, i.e. Class 2 landfill and Composting)
- 4. Enter the facility's EPA Identification Number.
- 5. Enter the facility's mailing address.
- 6. Enter the county where the facility is located.
- 7. Enter the facility's phone number.
- 8. Enter the facility's fax number.
- 9. Enter the facility's manager's name, phone number and email address.
- 10. Sign and date the form.
- 11. Enter the name, title, phone number and email address of the signee.

#### Page 2

- 1. At the top of the form Fill in the Year, the Facility's name, ID# and the County in which it is located.
- 2. Enter the name of the facility/source where used oil was picked up for transport.
- 3. Enter the Address where the used oil was picked up.
- 4. Enter the date the used oil was picked up.
- 5. Enter the amount of used oil (in gallons) that was picked up from this location.
- 6. Enter the destination or end use of the used oil picked up from this location.
- 7. Repeat for each location that used oil was transported from.
- 8. The Total blank will automatically populate. If filling out by hand, total up the quantity received column and enter the amount in the total blank.

Please make extra copies of page 2 for additional entries - If submitting multiple sheets; please provide a Grand Total of the "Quantity Receive" during the reporting year.

#### OFFICE MECHANICS AND FILING:

The report will be received by the Division of Compliance and Enforcement. Once received, it will be entered into the electronic document system. The information contained in this report may be subjected to public review through the Freedom of Information (FOI) Office. The retention schedule for this form is 14650.

Please mail the signed form to the address below: (**Emails and faxes will not be accepted.**)
SCDHEC – BLWM
Attn: Solid Waste Annual Reports
Division of Compliance and Enforcement
2600 Bull Street
Columbia, SC 29201

For questions, please contact Brandon Carter at phone 803-898-0546 or <a href="mailto:carterbm@dhec.sc.gov">carterbm@dhec.sc.gov</a>.