



# County of Yolo

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DIRECTOR

## DEPARTMENT OF PLANNING DIVISION OF INTEGRATED WASTE MANAGEMENT

44090 County Road 28H, Woodland, CA 95776  
(530) 666-8852 Fax (530) 666-8853 [www.yolocounty.org](http://www.yolocounty.org)

### CRITERIA FOR SOIL/WASTE ACCEPTANCE YOLO COUNTY CENTRAL LANDFILL (YCCL)

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Soils from commercial or industrial haulers may be accepted at the Yolo County Central Landfill (YCCL) only if the soil is determined to be non-contaminated per YCCL limits and criteria. Potential customers are to complete the Waste Acceptability Application. For help with completing this form, call the YCCL scale house at 530-666-8726.

If there is a chance that potential contaminants (gasoline, oil, grease, diesel, heavy metals, etc.) may be present in the soil, a Waste Evaluation may be required (see page two). Additionally, if the soil haul involves a large amount of soil (greater than 500 cubic yards), a Waste Evaluation may be required regardless.

#### PLEASE NOTE:

- If the soil has been accepted, when it can be accepted will still need to be determined. Conditions such as weather, road accessibility, soil placement, or other issues at the landfill may impact soil acceptability at any given time. Prior to arrival at the landfill, it is required to check with the scale house as to WHEN hauling may begin.
- Also, if the soil requires special handling (example: the soil is too wet) special handling fees may be charged in addition to any disposal fees that are applicable.

#### Soil Approval Procedures

1. Complete the Waste Acceptability Application. Make sure to include specific details about the following:
  - What type of project or activity is being conducted that requires the soil to be disposed?
  - Potential contaminants – what type of business used to take place at the location from which the soil came or at the location where the soil is presently being stored?
  - How much soil is to be disposed? In general, if more than one commercial truckload is to be disposed (~20 cubic yards), approval must be determined prior to arrival at YCCL.
  - If a permit was required for this project, include the name of the permit, the name of the agency that issued the permit, and the date issued. Also include the agency phone number and a contact name if available.
  - Once the Waste Acceptability Application is complete, fax it to YCCL at 530-666-8853 or email to [john.borrego@yolocounty.org](mailto:john.borrego@yolocounty.org), [mary.jones@yolocounty.org](mailto:mary.jones@yolocounty.org) and/or [jeff.kieffer@yolocounty.org](mailto:jeff.kieffer@yolocounty.org) for review.
2. YCCL staff will review the completed application and inform the customer if the soil has been approved (or not approved) for disposal at YCCL.
3. It is the customer's responsibility to contact the YCCL scale house (530-666-8726 or -8796) to coordinate hauling/disposal and billing specifics such as:
  - When hauling may begin
  - Access roads to be used, traffic control issues, etc.
  - Disposal and special handling fees
  - Any other disposal requirements as needed

## Waste Evaluations

Waste evaluations may be necessary to determine if certain soils can be accepted for disposal at YCCL. Examples include soil that is known to contain (or is suspected to contain) contaminants such as oil, grease, gasoline, diesel or solvents. In these cases, a waste evaluation is required. Call the Yolo County Division of Integrated Waste Management (DIWM) office at 530-666-8858 if there are questions regarding the following procedures:

1. Call the Water Quality Specialist at 530-666-8858 or via email at [john.borrego@yolocounty.org](mailto:john.borrego@yolocounty.org), [mary.jones@yolocounty.org](mailto:mary.jones@yolocounty.org) and/or [jeff.kieffer@yolocounty.org](mailto:jeff.kieffer@yolocounty.org) to find out the number of samples needed and analytical requirements for this project.<sup>1</sup> In general, a 4:1 composite sample per every 100 cubic yards is required. These samples should be collected at various depths. For large projects, other frequencies will likely be acceptable as long as a representative number of samples are collected to adequately characterize the soil.<sup>2</sup>
2. A staff person may come to the project site to look at the soil to be disposed and to meet with the project manager or a phone interview with the project manager may be conducted.
3. Complete the attached Analytical Data Evaluation Form, making sure to do the following:
  - Collect the correct number of samples at various depths to be representative of the soil to be disposed.
  - Include a location map that notes where the samples were collected and the depths collected as applicable.
  - Provide environmental agency information in order to verify the project information. Please complete this section as completely as possible to expedite the waste review process.
4. Submit a completed Analytical Data Evaluation Application, analytical data, and sampling location map to:

Yolo County Central Landfill  
Water Quality Specialist  
44090 County Road 28H  
Woodland, CA 95776  
Attn: Mary Jones or email  
[mary.jones@yolocounty.org](mailto:mary.jones@yolocounty.org)

*For help with completing the application, call 530-666-8858.*

Staff will review the completed application, compare the analytical data to YCCL limits, validate the environmental agency information, and inform the customer if the soil has been approved (or not approved) for disposal at YCCL.

5. It is the customer's responsibility to contact the YCCL scale house at 530-666-8726 or 666-8796 to coordinate hauling/disposal and billing specifics as previously noted.

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1. If analytical data is already available, the DIWM will review it to provide a preliminary evaluation of the likelihood that the soil may be approved for use at YCCL. However, additional testing may be required.

2. Yolo County reserves the right to be present when the samples are collected.

**WASTE ACCEPTABILITY APPLICATION, Side 2**  
**ANALYTICAL DATA EVALUATION**

Submit this completed form with required 1) sampling location map, and 2) analytical results.  
If you have questions completing this form, please call 530-666-8858.

Submit to: **Yolo County Central Landfill**  
**Water Quality Specialist**  
**44090 County Road 28H**  
**Woodland, CA 95776**  
**Attn: Mary Jones or email**  
**Mary.jones@yolocounty.org**

Your Name: \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Today's Date: \_\_\_\_\_

**SAMPLING INFORMATION**

- Submit a LOCATION MAP showing where samples were collected.
- Show sample location(s) in relation to tanks, stockpiles, property lines, etc.

Name of the sampler: \_\_\_\_\_ Title: \_\_\_\_\_

Number of samples collected: \_\_\_\_\_ per \_\_\_\_\_ cubic yard.

Typically, a 4:1 composite sample per every 100 cubic yards is required.

Date of sample collection: \_\_\_\_\_ Date of analyses: \_\_\_\_\_ (less than one year old)

- Attach the analytical results including laboratory quality assurance/quality control report.  
(Lab must be certified by the California Department of Health Services)

**ENVIRONMENTAL AGENCY CONTACT INFORMATION**

Name of the agency (County Health, Regional Water Quality Control Board, etc.) that provided project oversight:

\_\_\_\_\_  
Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone # \_\_\_\_\_

**\*\*\* Note – Approval of this material applies ONLY to acceptance at the Yolo County Central Landfill in Woodland, CA**

**\*\*\*TO BE COMPLETED BY AUTHORIZED COUNTY PERSONNEL\*\*\***

**NOTES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RECEIPT OF APPLICATION & ATTACHMENTS**

YES  NO  Attachments and analytical data submitted as required?

**ANALYTICAL RESULTS REVIEW**

YES  NO  Analytical data within YCCL acceptable limits?

If no, what was above the limits? \_\_\_\_\_

- I have reviewed Side 1 of this application for billing information and any special hauling and/or disposal requirements.

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Profile No. \_\_\_\_\_

Expiration Date \_\_\_\_\_

# WASTE ACCEPTABILITY APPLICATION, YOLO COUNTY CENTRAL LANDFILL

**Instructions:** Complete this form and attach analytical and FAX to (530) 666-8853 or email to [john.borrego@yolocounty.org](mailto:john.borrego@yolocounty.org) or [mary.jones@yolocounty.org](mailto:mary.jones@yolocounty.org) or [jeff.kieffer@yolocounty.org](mailto:jeff.kieffer@yolocounty.org) Questions, please contact 530-666-8726

### WASTE INFORMATION

Waste Type (Circle one) 1) CLEAN SOIL 2) CONTAMINATED SOIL 3) OTHER (specify): \_\_\_\_\_

Approx. amount: \_\_\_\_\_ (cubic yards or tons (circle))

What project/activity generated this waste? \_\_\_\_\_

Site Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Anticipated First Day of Haul: \_\_\_\_\_ Anticipated last day of haul: \_\_\_\_\_

YES  NO  **Known or suspected contaminants?** If yes, provide analytical, (analytical data application may be required)

YES  NO  **Known special handling needs?** If yes, specify \_\_\_\_\_ (additional fees may apply)

YES  NO  **Is material wet?** Must be less than 50% moisture and no free liquid to be solid waste, otherwise see liquid waste application

YES  NO  **Analytical data and/or MSDS provided?** Analytical data must be from California State Certified Laboratory

YES  NO  **Was a permit issued for the project?** Permit # and issuing agency: \_\_\_\_\_

### TRANSPORTER INFORMATION

Company Name & Address: \_\_\_\_\_

Driver's/Dispatcher Name: \_\_\_\_\_ Phone # (office, mobile, pager): \_\_\_\_\_

Vehicle capacity  1) Semi-end dump,  2) bottom dump,  3) Roll-off or end dump,  Other: \_\_\_\_\_

### WASTE GENERATOR INFORMATION

Company Name and Address: \_\_\_\_\_

Project Manager Name \_\_\_\_\_ Phone # (office, mobile, pager): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of business (note if it is a residence): \_\_\_\_\_

Payment Method (Circle one): Cash  Check  Credit Card  Landfill Account No.: \_\_\_\_\_

### CERTIFICATION

The Waste Generator certifies that this application and any attached information are true and accurate and representative of the subject waste. Waste Generator certifies that he/she has disclosed all relevant information on known or suspected contaminants and understands that there may be additional fees should contaminants be discovered that were not disclosed by Generator. Generator certifies that this waste does not constitute a Hazardous Waste as defined by State of California under Section 66261.3 of Title 22, Division 4.5, Chapter 11, Article 1 of the California Code of Regulations (22 C.C.R. 66261.3). If this application is completed on behalf of Generator, Applicant certifies that he/she has the full authority to bind Generator to these terms and conditions. Applicant agrees to be jointly and severally liable with Generator for all information and representations provided herein.

Print: \_\_\_\_\_ Signature: \_\_\_\_\_

(Generator or Authorized Representative)

Title: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\* TO BE COMPLETED BY AUTHORIZED COUNTY PERSONNEL \*\*\*

WASTE APPROVED? YES  NO  Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Account #: \_\_\_\_\_ Material: \_\_\_\_\_ Origin: \_\_\_\_\_ Grid: \_\_\_\_\_

FEES: Disposal \$ \_\_\_\_\_ Special Handling \$ \_\_\_\_\_

Special Instructions (handling, fees, hauler, etc.,) \_\_\_\_\_