

Maine Department of Environmental Protection Division of Solid Materials AUTHORIZATION FORM FOR BENEFICIAL USE

Generator of Secondary Material	
Facility:	
Contact Name and Phone Number/email:	
Street, City, State and ZIP:	
Beneficial Use Location	
Facility:	
Contact Name and Phone Number/email:	
Street, City, State and ZIP:	
As the generator of the secondary material, I herek authorized the beneficial use of this secondary ma	by certify that the Department of Environmental Protection has aterial through:
beneficial use exemption for no more	e than 800 tons of construction fill per parcel; or
DEP Permit by Rule or License Number	
standing water; in a channeled drainage flow; in a may wash into any water of the state. If the Department issued a permit-by-rule or licens	Department, this secondary material may not be placed in protected natural resource; below the water table; or where it se authorizing the beneficial use of this secondary material, ant license \(\Boxed{\text{does}} \) does not include additional conditions for quired to meet.
Generator Representative (signature)	Title
Name (printed)	Date
comply with the terms of this form and, if applicable material. I understand that the secondary material	hereby certify that I have received this authorization and will ole, any relevant terms of the beneficial use license for this all must remain at the location specified above, and that I must neficial use occurs, or at my local office for a 3-year period. I ne Department upon request.
Beneficial User (signature)	Title
Name (printed)	 Date