



Request to add a Waste Facility to DEP Production Reporting Application

Waste Facility Type (Check only one)*		
<input type="checkbox"/> Brine or Industrial Waste Treatment Plant	<input type="checkbox"/> Injection Disposal Well	<input type="checkbox"/> Landfill
<input type="checkbox"/> Municipal Sewage Treatment Plant	<input type="checkbox"/> Road Spreading (only fields marked with * need to be completed)	
Waste Facility Name		
Permit Number (The permit that authorizes the facility to process or dispose of waste.)		Waste Facility Phone Number
Waste Facility Address (Must be the physical address of the facility.)		
Address Line 1		
Address Line 2		
City	State*	ZIP*
County*	Municipality*	
Requestor's Name*	Requestor's Telephone Number*	

Instructions

This form may be submitted to the Department by any of the following methods:

1. Email Completed Form to: RA-ep-BOGMOGRE@pa.gov
2. Fax Completed Form to: 717-772-2291
3. Mail Completed Form to:

Department of Environmental Protection
Office of Oil and Gas Management
PO Box 8765
Harrisburg, PA 17105-8765