



Grand Ronde Pesticide Collection Event Application Form April 11, 2025

Please mail or e-mail application to ACT enviro Services by **April 01, 2025**.

ACT enviro
13600 SE Ambler Rd
Clackamas, OR 97015
Attn: Scott Abbs

Phone: 971-279-6780
Email: Sabbs@actenviro.com

This is an anonymous pesticide waste collection event for farmers, nurseries, forest landowners, and other commercial and institutional pesticide users located in Polk and Yamhill Counties and on the Grand Ronde Reservation. The collection is scheduled for: **Friday, April 11, 2025, at Confederated Tribes of Grand Ronde Procurement Building V, 9635 Grand Ronde Rd, Grand Ronde, OR 97347.**

This event is sponsored by the Department of Environmental Quality and hosted by the Confederated Tribes of Grand Ronde.

Prior to bringing waste to the Pesticide Collection Event, you must complete this application and return it to ACT enviro by **April 01, 2025**. Please be certain your pesticide survey information is accurate. Please note the following:

- a) Any pesticides not included on this survey will not be eligible for disposal on the day of collection.
- b) This collection is for unused, outdated, or unwanted **pesticides (and clean empty pesticide containers) only**. Fertilizer, solvents, or other non-pesticidal materials will **NOT** be accepted at this event.
- c) Quantities greater than 1,000 lbs. must receive prior approval from ACT enviro (971-279-6780).

There is no charge for disposal of any pesticides or empty containers. This event is first come, first served – register early! If you have questions or concerns about the event logistics, contact Scott Abbs at 971-279-6780.

Event Location: Grand Ronde, OR **Event Date:** April 11, 2025

1. Generator Information – ALL INFORMATION PROVIDED BELOW IS FOR INTERNAL USE ONLY AT ACT ENVIRO TO ENSURE SAFE AND EFFECTIVE COLLECTION AND IS CONFIDENTIAL. THIS INFORMATION WILL NOT BE PROVIDED TO ANY GOVERNMENT AGENCIES OR THIRD PARTIES.

_____	(____) _____	(____) _____
Contact Person (First Name Only)	Telephone Number	Fax Number

Email Address (if preferred as contact method)

ID # _____



Other means of contacting you:

Address

City

State

ZIP Code

WE MUST HAVE A WAY TO CONTACT YOU BEFORE THE EVENT. YOU WILL BE NOTIFIED OF A SCHEDULED TIME FOR YOU TO REPORT TO THE COLLECTION SITE AND YOUR CONFIDENTIAL IDENTIFICATION NUMBER.

2. Inventory of wastes you want to dispose of at this collection event

Please complete the waste inventory sheet on the following page to list the wastes you will bring to the collection event. Make additional copies of the inventory sheet if needed. Return the completed inventory sheet(s) with this application. Instructions for completing the waste inventory sheet are provided below. Only wastes that have been pre-registered and approved by ACT enviro will be accepted at the collection event. **Radioactive materials, explosives, infectious medical wastes, certain poisons, very reactive wastes, and unknown wastes are not accepted at these events. There is no quantity limit for collection of waste pesticides. Please provide adequate containment (e.g., place inside larger container) for leaking or degraded containers prior to transporting pesticide waste to the event.**

If you have trouble identifying the active ingredients in the pesticides you wish to dispose of please contact Kathryn Rifenburg at the Oregon Department of Agriculture at [971-600-5073](tel:971-600-5073) for technical assistance.

Instructions for Completing Waste Inventory Sheet (see example sheet)

1. **Source:** Please indicate whether the pesticides you are disposing of come from an active farm/orchard, a commercial applicator, nursery, or other operation.
2. **Item Number:** Number each item (or category group of items) you want to dispose of at the collection event. Each item should have an individual number on its container as reference. The container number should correspond to the completed inventory sheet(s) submitted to ACT enviro.
3. **Waste Description:** Describe, in as much detail as possible, wastes (including empty containers) that you want to dispose of at the collection event. The description should include the chemical and trade name, how you use the material, physical state (i.e., liquid, solid, sludge, gas), chemical characteristics (e.g., flammable/ignitable), and chemical constituents and percentages from the label or material safety data sheet (MSDS). For pesticides (e.g., herbicides, fungicides, rodenticides, etc.), please include the EPA registration number if available, trade name and percent concentration. When listing waste quantities, be accurate as possible. **DO NOT** include wastes you do not want to dispose of at the collection event, nor containers of unknown waste substances. Please avoid mixing your wastes together.
4. **EPA Number:** For pesticides (e.g., herbicides, fungicides, rodenticides, etc.), please include the EPA registration number if available, trade name and percent concentration.
5. **Quantity:** List the quantity of waste you want to dispose of at the collection event. As a rule, list liquids in gallons and solids and sludges in pounds.
6. **Triple or Pressure Rinsed Pesticide Containers:** If you have clean (triple or pressure rinsed according to ANSI/ASABE S596 FEB2006) pesticide containers for disposal at the event, please include the number and

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type of containers (i.e., jugs, buckets, plastic drums, or IBC Totes). Refer to Row 8 in the example waste inventory sheet.

Once **ACT enviro** has received and reviewed your application, you will receive a letter and/or telephone call acknowledging acceptance of your application. The acknowledgment letter and/or call will provide you with the total estimated cost for disposal of your waste, an appointment time for bringing in your waste, and any changes to the collection event site.

TRANSPORT TIPS

No safety precautions and protective measures can be suggested that totally eliminate risks. However, here are some suggestions that may assist you in minimizing exposure as you work with waste pesticides.

**IF YOU HAVE A SPILL:
CALL 1-866-348-2800**

FOR EMERGENCY ASSISTANCE HANDLING WASTE MATERIAL:

1. Inspect containers. If, upon inspection, you have reason to suspect that the container will tear or rupture when moved, do not attempt to move or load the container for transport. Come to the collection site without it and we will provide assistance.
2. Wear the protective clothing and protective equipment (goggles, gloves, respirator, etc.) described on product labels when handling pesticides.
3. At a minimum, wear a long-sleeved shirt buttoned at the wrist, a pair of chemical-resistant gloves, preferably a chemically resistant apron, rubber boots, goggles and a hat.
4. Have spill control materials available. For example, a 10-pound bag of commercially available safety absorbent, a shovel and a container for spilled material collected with the absorbent and contaminated soil may be useful in control and cleanup of a spill involving a small amount of material. Bring any spilled materials with you to the collection site for disposal.

FOR TRANSPORTING WASTE MATERIALS:

1. Inspect all pesticides to see that they are securely packaged. Only transport containers that are securely closed.
2. Line the storage area of the transport vehicle with plastic sheeting to contain any spillage that might occur and therefore simplify cleanup and decontamination.
3. Assure all labels are securely attached. This is important for disposal of these materials.
4. Arrange containers in your vehicle so that they are braced to prevent shifting which may result in container damage and/or leakage.
5. All containers should be kept dry during transport. Loads in open vehicles such as pick-up trucks should be covered in the event of rainfall.
6. Do not transport pesticide waste in a manner that will allow fumes from those wastes to enter the passenger compartment of the transportation vehicle.

DRIVE CAREFULLY. You are responsible for any spillage, damage, subsequent cleanup and restoration that might occur while you are transporting the wastes, whether the accident is your fault or other's. The State and its contractor are not responsible for any spillage that occurs before the contractor at the collection site accepts the waste.

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Waste Inventory Sheet for Collection Event (copy and use additional sheets if needed)

Source: (Check appropriate box)

☐ Farm /Orchard ☐ Commercial Applicator ☐ Nursery ☐ Other: _____

Item #	Waste Description	EPA ID or USDA Numbers	Product Type (check one)	Formulation Type (check one)	Number of Containers	Container Size	Estimated quantity Liquid in gallons Solid in pounds
1			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			
2			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			
3			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			
4			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			
5			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			
6			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			
7			<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other			



EXAMPLE SHEET

Waste Inventory Sheet for Collection Event (copy and use additional sheets if needed)

Source: (Check appropriate box)

☐ Farm /Orchard ☒ Commercial Applicator ☐ Nursery ☐ Other: _____

Item #	Waste Description	EPA ID or USDA Numbers	Product Type (check one)	Formulation Type (check one)	Number of Containers	Container Size	Estimated quantity <small>Liquid in gallons Solid in pounds</small>
1	Example Captan 50W 48.9% n-Trichloromethylthio-4-cyclohexene-1, 2dicarboximide	1971323 5	<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input checked="" type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Other	3	2.5 gal	7.5 gal
2	Example Diazinon o-o-diethyl O-(2-isopropyl 6-methyl-4pyrimidinyl) phosphoothioate	51036-108-5705	<input checked="" type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other	1	50 lbs full	50 lbs
3	Example Toxephene 40 WP	476-2133	<input checked="" type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Other	2	30 lbs bags, ¾ full	45 lbs left
4	Example Cutrine Plus	895910	<input type="checkbox"/> Insecticide <input checked="" type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Other	<input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Other	5	2x55 gal 3x30 gal	170 gal
5	Example Aerosol Cans		<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input checked="" type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Other	12	Liter	12 liters
6	Example Malathion		<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input checked="" type="checkbox"/> Other	<input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Other	8	2.5 gal	20 gal
7	Example Triple or Pressure Rinsed Pesticide Containers	N/A	<input type="checkbox"/> Insecticide <input type="checkbox"/> Herbicide <input type="checkbox"/> Miticide <input type="checkbox"/> Fungicide <input checked="" type="checkbox"/> Other	<input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Other	15	Jugs	15

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