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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Certificate of Need Request review checklist  Solid Waste Program  Doc Type: Solid Waste Plan |

**Instructions:** This checklist is intended to be used as a guidance document for the review and completion of a *Certificate of Need Request.* While every attempt has been made to incorporate planning rule requirements as accurately as possible, the rule and applicable provisions of Minn. Stat. § 115A remains the final authority on plan contents and approval procedures. Please consult Minn. R. 9215.0890 - 9215.0950 for further reference. (All Minn. R. can be found on the Minnesota Legislature’s Office of the Revisor of Statutes website at <https://www.revisor.mn.gov/rules/9215/>.)

**Questions** can be directed to Heidi Ringhofer at [heidi.ringhofer@state.mn.us](mailto:heidi.ringhofer@state.mn.us).

The Certificate of Need (CON) application should include the following:

1. Brief overview and introduction of the current status of the facility permit, and CON including dates and capacity information.
2. Narrative of CON being requested with summary yards and tons along with a verified density per cubic yard.
3. Required tables of capacity requested. Sample tables are provided that specific details and numbers requested. *Develop tables to show what we want for each county’s five-year history and 10-year projections in tons and cubic yards with type of waste.*
4. Narrative of the alternatives analysis for each county included in the request. See #3 below for further detail.
5. Estimate of Errors for each county included in the request. See #4 below for further detail.
6. Attachments may include county estimate letters, goal volume tables, and other supporting documents.

## Contact information

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| Facility name: | |  | | | | | | | | | | | | | | |
| Permit number: | |  | | | | | | | | | | | | | | |
| Contact name: | | |  | | | | | | | | | | Contact telephone: | | |  |
| Contact email address: | | | | |  | | | | | | | | | | | |
| Consultant: |  | | | | | | | | | MPCA reviewer: | | | |  | | |
| Email: |  | | | | | | | | | Phone: | | | |  | | |
| Submittal information: | | | |  | |  |  |  |  | |  |  | | |  | |
|  | | | | *(mm/dd/yy)* | |  | *(mm/dd/yy)* |  | *(mm/dd/yy)* | |  | *(mm/dd/yy)* | | |  | |

CON request contents

Check the following codes to describe the completeness of your plan:

**C = Complete I = Incomplete M = Missing N/A = Not applicable**

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| **Timing** (Minn. R. [**9215.0890**](https://www.revisor.mn.gov/rules/9215.0890/), subp. 2) | **Yes** | **No** | **NA** | **MPCA Interpretation** | **Notes** |
| CON request submitted before permit application? |  |  |  | Request is received prior to the facility applying for additional permitted or design capacity |  |
| Environmental review required?  **If yes**, is it completed. ***If no****, a final CON approval cannot be made but preliminary approval can.* |  |  |  | Include information if the MPCA Environmental Review Team has been contacted, if a review is required and the status of the review, including date submitted. |  |

| **Content** (Minn. R. [**9215.0900**](https://www.revisor.mn.gov/rules/9215.0900/)) | | **C** | **I** | **M** | **N/A** | **MPCA Interpretation** | **Notes** |
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| 1. | Annual solid waste estimates (Minn. R. 9215.0900, subp. 2) |  |  |  |  |  |  |
|  | * Estimates of the amount and type of solid waste to be managed at the facility during its design life is included |  |  |  |  | These numbers should be included in the body of the document and tables provided as part of the request forms. |  |
| 2. | Origin of waste (Minn. R. 9215.0900, subp. 3) |  |  |  |  |  |  |
|  | * Origin of solid waste is identified |  |  |  |  | Provide in the narrative each county that delivers waste to your landfill. If the waste is from a transfer station the waste should be tracked back to the county origin. |  |
|  | * Type and amount of waste to be received annually from each county or district |  |  |  |  | Use the sample spreadsheets to complete this requirement. |  |
|  | * Information about quantities of solid waste is based on solid waste management or master plans * If solid waste management or master plans do not state waste will be managed at the facility, letter from county or district board indicating estimates of solid waste to be managed at the facility is included |  |  |  |  | If the facility is not listed in the SWMP or Master Plan, a letter from the County Board or qualified employee is required.  If the projected amounts are greater than the amounts listed in the Plan, a letter can be used to document the need or the facility can justify the need by demonstrating estimate errors in part 4. |  |
| 3 | Alternatives (Minn. R. 9215.0900, subp. 4) |  |  |  |  |  |  |
|  | * If the new capacity has not been included in a solid waste management or master plan, an analysis of alternatives to the new or expanded capacity must be included |  |  |  |  | Alternatives analysis must include an evaluation of availability of processing facilities and other landfills, current operations that show the facility is the prudent choice for land disposal, and programs described in the SWMP or Master Plan that are designed to reduce dependence of land disposal. |  |
| 4. | Estimate errors (Minn. R. 9215.0900, sub. 5) |  |  |  |  |  |  |
|  | * If the amount requested is greater than the amount identified in approved plans, a statement explaining the erroneous assumptions is included. |  |  |  |  | Include a narrative as to why the capacity for a specific county is in error in the plan or the applicant facility disagrees with the county estimates. |  |
|  | * The basis for calculating the amount needed is documented |  |  |  |  | MSW numbers cannot be estimates but based on actual waste generation trends or program changes. |  |

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| **Public informational meeting** (Minn. R. [**9215.0910**](https://www.revisor.mn.gov/rules/9215.0910/)**)** | | | | **Yes** | **N/A** | **MPCA Interpretation** |
| 1. | If the agency has determined that a public informational meeting would help to clarify and resolve issues, the public informational meeting has been held. | | |  |  |  |
|  | Date of meeting (mm/dd/yyyy): |  |  | | | |

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| **For MPCA use only.**  **Approval of *Certificate of Need*** (Minn. R. [**9215.0920**](https://www.revisor.mn.gov/rules/9215.0920/)) | | | | | | **Yes** | | **No** | **Comments** |
| 1. | The agency has determined that the additional disposal capacity is needed | | | | |  | |  |  |
|  | * Estimates are consistent with solid waste management or master plans or consistent with historical disposal data where the plans have been found to be in error | | | | |  | |  |  |
|  | * Air space calculations are reasonable and based on recent historical compaction rates | | | | |  | |  |  |
|  | * Method for determining compaction rate is explained and defensible | | | | |  | |  |  |
|  | * Capacity requested is not already granted to another facility | | | | |  | |  |  |
|  | * Calculations are accurate | | | | |  | |  |  |
|  | * *Certificate of Need Request* does not exceed design capacity for facility (Best Management Practices) | | | | |  | |  |  |
|  | Capacity requested: | |  | Comments: | |  | | | |
|  | Capacity certified: | |  | Comments: | |  | | | |
| **Final decision** (Minn. R. [**9215.0930**](https://www.revisor.mn.gov/rules/9215.0930/)) | | | | | | |  | | |
|  | | Date complete request received (mm/dd/yyyy): | | |  | |  | | |
|  | | Date complete letter sent (mm/dd/yyyy): | | |  | |  | | |
|  | | Date approval sent (mm/dd/yyyy): | | |  | |  | | |