



Certification of Compliance with Environmental Best Management Practices for Dental Office Wastes

Any Vermont Dental office which can certify to the following (as signified by checking all the boxes below) will be considered to be in compliance with Vermont hazardous waste and wastewater discharge requirements. Certifications are due July 1 of every other year starting July 1, 2003.

- This office is familiar with and follows the Environmental Best Management Practices Guidelines for Dental Offices prepared by the Vermont Dept. of Environmental Conservation; including the following:
- An initial Notification of Hazardous Waste Activity Form has been filed with the Vermont DEC (and any necessary revisions to the information provided in the initial filing).
- Scrap amalgam waste is minimized through use of single use amalgam capsules.
- Amalgam waste (from extracted teeth and broken or unusable amalgam capsules) is disposed through a recycler or through a certified hazardous waste transporter or hazardous waste collection program.
- Chairside traps are inspected daily and cleaned as necessary.
- Waste amalgam from chairside traps is collected for proper recycling or disposal and is not disposed of in the trash or down the drain.
- Vacuum pump filters are changed monthly or in accordance with the manufacturer's specifications and amalgam particles are properly recycled or disposed as a hazardous waste.

- Sink traps have been recently cleaned and any amalgam-bearing wastes and sludges removed for proper recycling or disposal as a hazardous waste.
- Used photographic fixer is not poured down the drain. It is either properly recycled or disposed off-site as a hazardous waste or it is passed through a silver recovery unit before discharge to a municipal sewer.
- Lead foils, shields and aprons are not disposed of in the trash and are properly recycled.
- Spent fluorescent lamps and batteries (nickel cadmium, nickel metal hydride small sealed lead acid, and lithium ion) are not disposed of in the trash and are properly recycled.

Name of Dental Practice

Date

Signature

Name (Please Print)