



INVOICE 2013

Make checks payable to **N.C. Division of Waste Management, Solid Waste Section**, include Permit Number and invoice number on check. If you are paying by electronic transfer, include the invoice number with your electronic transfer. [G.S. 25-3-506: A \$25.00 processing fee will be charged on all returned checks.] **Please return a copy of this invoice with your payment.**

Contact/Billing Information:	Facility Location Address:
Ms. Helena Byrum Bay Disposal & Recycling 465 East Indian River Road Norfolk, VA 23523	Currituck Transfer & Recovery Facility 8546 Caratoke Hwy. Powells Point, NC 27966

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW013-0050	8/5/13		\$5,000.00

A. **Permit Fee Requirements:** Pursuant to North Carolina General Statute 130A-295.8 you are required to pay fee(s) based on your solid waste management activities. The fee(s) shall be used to support the solid waste management program. An application is deemed incomplete until all fees are received.

B. **Explanation of Invoice Amount is Based on Facility's Current Permit Application.**

Facility Permit #	Facility Type	Application Type	Application Date	Fee	Total Amount
	TRANSFER	1a. New Facility	7/5/13	\$5,000.00	\$5,000.00
Total Amount Due					\$5,000.00
Amount Paid					\$0.00

C. **Remit Payment (including a copy of this invoice) To:**

Division of Waste Management
 Solid Waste Section
 1646 Mail Service Center
 Raleigh, NC 27699-1646
 Attn: Ellen Lorscheider

PAID
 CK. NO. 84806
 DATE 8-7-13

D. **Solid Waste Contacts:**

- Questions about billing process: Mary H. Johnson at (919) 707-8236
or: Ellen Lorscheider at (919)707-8245
- Questions about the Regulations and Technical Assistance:
 Ed Mussler (919) 707-8281 Landfills, Transfer Stations
 Tony Gallagher (919) 707-8280 Land Application Sites, Compost Facilities

E. **Update Your Information:** Please indicate any changes in Facility or Contact Information.

PERMIT APPLICATION REVIEW FORM

P 1265
5N013-0050

Review Requested by: Pat Backus	Date Requested: 7/8/2013
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Facility Name and Permit ID	<u>New – Bay Disposal Inc – Currituck Transfer & Recovery Facility</u>
Applicant (Owner) Name	<u>Bay Disposal and Recycling</u>
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input checked="" type="checkbox"/> (1)a. New – New Facility <input type="checkbox"/> (1)b. New – Expand Facility Boundary <input type="checkbox"/> (1)c. New – Expand Waste Boundary <input type="checkbox"/> (1)d. New – Substantial Amendment <input type="checkbox"/> (2)a. Amendment – Next Phase of the Approved Facility Plan <input type="checkbox"/> (2)b. Amendment – Five-year Renewal <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input type="checkbox"/> (3)a. Modification – Change to Approved Plans (No CHR) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate (No CHR)
Permit Fee	<u>\$7,500</u>
Date Application Received	<u>7/5/2013</u>
Contact Name, Title & Phone No.	<u>Emmett Moore, President, (757) 857-9700</u>
Contact Email Address	<u>Emmett@baydisposal.com</u>
Company Name	<u>Bay Disposal & Recycling</u>
911 Address	<u>8546 Caratoke Highway, Powells Point, NC 27966</u>
Mailing Address	<u>365 East Indian River Rd</u>
City/State/Zip	<u>Norfolk, VA 23523</u>
Parent Company	<u>Bay Disposal, Inc.</u>
Known Subsidiaries	Known Subsidiaries
Other Known Related or Associated Business Names	Related or Associated Business Names
Known Counties of Operation	<u>Washington</u>
Does the Applicant have a Past Or Current Solid Waste Permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: Medical T&P Permit No.: 9406TP-TP-2009
Did the Permit Applicant Submit Financial Assurance Cost Estimates?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Not Needed <input type="checkbox"/>
Other Notes	9406TP --- Facility was sold to WM and new permit was issued. They also operate in Virginia. *** Send invoices to Helena Byrum, Accounting - Bay Disposal Inc.; 465 East Indian River Rd., Norfolk, VA 23523. Her email is hbyrum@baydisposal.com and phone is (757) 452-4016.