

We ask that completed forms be returned to: NC Solid Waste Section, 1646 Mail Service Center, Raleigh, NC 27699 or by email. If you have questions or require assistance in completing this report, contact Ethan Brown (ethan.brown@ncdenr.gov or 919.707.8249).

Facility Name: Wheelabrator Portsmouth Inc Permit: Virginia Permit PBR-500

Facility Website (URL): wheelabratorportsmouth.com

Physical Address	Mailing Address
Street 1: <u>2 Victory Blvd</u>	Street 1: <u>3809 Elm Ave</u>
Street 2: _____	Street 2: _____
City: <u>Portsmouth</u> County: _____	City: <u>Portsmouth</u>
State: <u>Virginia</u> Zip: <u>23702</u>	State: <u>Virginia</u> Zip: <u>23704</u>

Primary Facility Contact Person	Secondary Facility Contact Person
Name: <u>Jeff Landrum</u>	Name: <u>Danny Armstrong</u>
Phone: <u>(757) 393-3105</u> Fax: <u>(757) 393-3178</u>	Phone: <u>(757) 393-5701</u> Fax: <u>(757) 393-3178</u>
Email: <u>jlandrum@wm.com</u>	Email: <u>darms7@wm.com</u>

1. What type of facility is this?

- Municipal Solid Waste Landfill
 Transfer Station
 Construction & Demolition Landfill
 Treatment and Processor
 Industrial Landfill
 Materials Recovery
 Other (specify) _____

2. If this facility is a Transfer Station, Treatment and Processor, or Materials Recovery Facility, please indicate the facility(s) that received your non-recycled waste material:

NAME, PERMIT #, and LOCATION (city, state) of FACILITY	Facility Type	Tons
Suffolk Regional Landfill, Suffolk, VA	MSW Landfill	1,700.2
TOTAL		1,700.20

