North Carolina Department of Environment and Natural Resources
Division of Waste Management
Solid Waste Section

INVOICE

Division of Waste Management
Solid Waste Section
1646 Mail Service Center
Raleigh, NC 27699-1646
phone: (919) 707-8236 fax: (919) 707-8236
email: mary.johnson@ncdenr.gov

To: Alan Stone
Stone LCID Landfill
5180-A Big Woods Road
Chapel Hill, NC 27517

Date: 5/22/2015
Invoice #: **SW015-0049**

Description	Amount Due
Facility-Application: Stone Landfill (1909-LCID-2010) 52 Rock Hill Drive Chapel Hill, NC 27517 Permit Amendment Application (Substantial Amendment) received on 3/10/2015	$1,000.00
Total Amount Due	**$1,000.00**
Date Due	6/21/2015

Payment Options:

E-check - Available online at http://go.ncdenr.gov/swpay
Requires bank account and routing information. You will need to use the zip code in the description box and the invoice number shown on this invoice to access your account. If a zip code is not listed, use the code: 99999 along with the invoice number.

Credit Card - Available online at http://go.ncdenr.gov/swpay
Accepts MasterCard, Visa, and Discover cards. You will need to use the zip code in the description box and the invoice number shown on this invoice to access your account. If a zip code is not listed, use the code: 99999 along with the invoice number.
*Convenience Fee of 2.65% added to amount invoiced.]

Paper check - 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. Please return a copy of this invoice with your payment.

[G.S. 25-3-506: A $25.00 processing fee will be charged on all returned checks.]

Explanation of Invoice Amount is Based on Facility's Current Permit Application:

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.

Solid Waste Contacts:

Billing process:
Mary H. Johnson (919) 707-8236
Ellen Lorscheider (919) 707-8245

Regulations and Technical Assistance:
Ed Mussler (919) 707-8281 Landfills, Transfer Stations
Tony Gallagher (919) 707-8280 Land Application Sites, Compost Facilities

PAID
CK. NO. 11853
DATE 6-12-15

More information available on the web:

North Carolina Department of Environment and Natural Resources (DENR) - http://portal.ncdenr.org/
North Carolina Solid Waste Program - http://portal.ncdenr.org/web/wm/sw
North Carolina Electronics Management Program - http://portal.ncdenr.org/web/sw/electronics

Remit paper checks to

N.C. Division of Waste Management
Solid Waste Section
1646 Mail Service Center
Raleigh, NC 27699-1646

SW015-0049
P 1198

PERMIT APPLICATION REVIEW FORM

Review Requested by:	Elizabeth Werner	Date Requested:	5/21/15

Facility Name and Permit ID	Stone Landfill / 1909-LCID-2010
Applicant (Owner) Name	Alan Stone Excavating, Inc. (ASE, Inc.)
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	☐ (1)a. New – New Facility ☐ (1)b. New – Expand Facility Boundary ☐ (1)c. New – Expand Waste Boundary ☒ (1)d. New – Substantial Amendment ☐ (2)a. Amendment – Next Phase of the Approved Facility Plan ☐ (2)b. Amendment – Five-year Renewal ☐ (2)c. Amendment – Change in Ownership ☐ (3)a. Modification – Change to Approved Plans **(No CHR)** ☐ (3)b. Modification – Subsequent Permit to Operate **(No CHR)**
Permit Fee	$ 1000.00
Date Application Received	3/10/15
Contact Name, Title & Phone #	Alan Stone alanrocs@gmail.com
Company	Alan Stone Excavating, Inc. (ASE, Inc.)
911 Address	5180-A Big Woods Road, Chapel Hill, NC 27517
Mailing Address	5180-A Big Woods Road,
City/State/Zip	Chapel Hill, NC 27517
Parent Company	Alan Stone Excavating, Inc. (ASE, Inc.)
Known Subsidiaries	NA
Other known names business has operated under	Stone Company, LLP and Stone Excavation, Inc.
Known Counties of Operation	Chatham
Does the applicant have a past or current solid waste permit?	Yes ☒ No ☐ Unknown ☐ Facility Type: LCID Permit #: 1909
Does the applicant have other DENR permits?	Yes ☐ No ☒ Unknown ☐ Division: _____ Facility Type: _____ Permit #: _____
Did the permit applicant submit Financial Assurance cost estimates?	Yes ☐ No ☐ N/a ☐ Not Needed ☒
Are the cost estimates sufficient?	Yes ☐ No ☐ N/a ☒
Other notes	_____