

SW015-0046
P 1266

PERMIT APPLICATION REVIEW FORM

Review Requested by:	<u>Larry Frost</u>
Date Requested:	<u>5/12/2015</u>
Facility Name and Permit ID	<u>3616-TRANSFER-2013, Recycle Carolina</u>
Applicant (Owner) Name	<u>Carole McLeod</u>
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input 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 – Renewal/Review <input type="checkbox"/> 5YR <input type="checkbox"/> 10YR <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input checked="" type="checkbox"/> (3)a. Modification – Change to Approved Plans (No CHR) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate (No CHR) <input type="checkbox"/> (3)c. Modification – Five-year Limited Review <input type="checkbox"/> (4) Major Permit Modification
Permitted Annual Tonnage	<u>NA</u>
Permit Fee	<u>\$500.00</u>
Date Application Received	<u>4/29/2015</u>
Contact Name, Title & Phone #	<u>Carole McLeod, Owner, 704.827.7767</u>
Email Address	<u>carole@wasterecyclingdisposal.com <i>CaroleMcLeod49@windstream.net</i></u>
Company	<u>FFD II, LLC dba Recycle Carolina (Owner), ADVANTAGE WASTE RECYCLING DISPOSAL, INC. (Operator)</u>
911 Address	<u>131 Brickyard Road</u>
Mailing Address	<u>Post Office Box 596</u>
City/State/Zip	<u>Mount Holly , NC 28120</u>
Parent Company	<u>See above</u>
Known Subsidiaries	<u>NA</u>
Other known names business has operated under	<u>See above</u>
Known Counties of Operation	<u>Cabarrus, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, and Union Counties of North Carolina and Cherokee, Chester, Lancaster, and York Counties of South Carolina..</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: INDUS Permit #:
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input type="checkbox"/> No <input type="checkbox"/> Not Needed <input checked="" type="checkbox"/>
Other notes	<u>Modification to plans for a new sorting pad.</u>