

PERMIT APPLICATION REVIEW FORM

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| Review Requested by: | <u>Allen Gaither</u> |
| Date Requested: | <u>6/5/2014</u> |
| Facility Name and Permit ID | <u>Graham County Transfer Station, 3803-TRANSFER-</u> |
| Applicant (Owner) Name | <u>Graham County</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 checked="" type="checkbox"/> (2)b. Amendment – Renewal/Review <input checked="" type="checkbox"/> 5YR <input type="checkbox"/> 10YR <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) <input type="checkbox"/> (3)c. Modification – Five-year Limited Review <input type="checkbox"/> (4) Major Permit Modification |
| Permitted Annual Tonnage | <u>~7,000 TPY</u> |
| Permit Fee | <u>\$3,000</u> |
| Date Application Received | <u>6/4/2014</u> |
| Contact Name, Title & Phone # | <u>Mr. Gregory Cable, County Manager, (828)-479-7960</u> |
| Email Address | <u>greg.cable@grahamcounty.org</u> |
| Company | <u>Graham County</u> |
| 911 Address | <u>400 Snowbird Road</u> |
| Mailing Address | <u>12 North Main Street</u> |
| City/State/Zip | <u>Robbinsville, NC 28771</u> |
| Parent Company | <u>N/A</u> |
| Known Subsidiaries | <u>None</u> |
| Other known names business has operated under | <u>None</u> |
| Known Counties of Operation | <u>Graham</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: <u>MSWLF, TS</u> Permit #: <u>38-01, 03</u> |
| 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 | |

PERMIT APPLICATION REVIEW TRACKING

Clock Start

| | |
|---------------------------|-------------|
| Date Application Received | 6/4/14 |
| Application ID # | SW 014-0055 |

Review Form Submission

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|--|---|
| Date Application Review Form Submitted | 6/5/14 |
| Submitted to Accounting Tech | Yes <input checked="" type="checkbox"/> |
| Submitted to Compliance Officer | Yes <input checked="" type="checkbox"/> Not Needed <input type="checkbox"/> |

Accounting Clock

| | | |
|--------------|---------|-----------|
| Invoice Date | 6/5/14 | # of Days |
| Deposit Date | 6/30/14 | 25 |

CHR Clock

| | | |
|----------------------------|-----|-----------|
| CHR Org Chart Request | | # of Days |
| CHR Org Chart Response | N/A | |
| CHR Questionnaire Request | N/A | # of Days |
| CHR Questionnaire Response | | |

COMPLETE
7/23/14

Application Review Clock

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|--|---------|-----------|
| Completeness Determination Letter | 8/15/14 | 76 |
| Engineering Technical Review Letter #1 | N/A | # of Days |
| Engineering Technical Review Response #1 | | |
| Engineering Technical Review Letter #2 | | # of Days |
| Engineering Technical Review Response #2 | | |
| Hydro Technical Review Letter #1 | N/A | # of Days |
| Hydro Technical Review Response #1 | | |
| Hydro Technical Review Letter #2 | | # of Days |
| Hydro Technical Review Response #2 | | |
| Draft Permit | | |
| Permit to Construct Issued | | |
| CQA Received | | # of Days |
| CQA Reviewed | | |
| Permit to Operate Issued | 4/24/15 | 324 |