

**PERMIT APPLICATION REVIEW FORM**

Review Requested by:	<u>Allen Gaither</u>
Date Requested:	<u>5/14/2014</u>
Facility Name and Permit ID	<u>Haywood Co White Oak Landfill, 4407-MSWLF-1993</u>
Applicant (Owner) Name	<u>Haywood 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 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 ( <b>No CHR</b> ) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate ( <b>No CHR</b> ) <input type="checkbox"/> (3)c. Modification – Five-year Limited Review <input type="checkbox"/> (4) Major Permit Modification
Permitted Annual Tonnage	<u>~147,000 TPY</u>
Permit Fee	<u>\$3000</u>
Date Application Received	<u>5/12/2014</u>
Contact Name, Title & Phone #	<u>Mr. Ron Vail, Engineering Department Manager, (423) 476-9160</u>
Email Address	<u>ron@santekenviro.com</u>
Company	<u>Santek Waste Services</u>
911 Address	<u>3898 Fines Creek Road, Waynesville, NC 28786</u>
Mailing Address	<u>650 25<sup>th</sup> Street, N.W., Suite 100</u>
City/State/Zip	<u>Cleveland, TN 37311</u>
Parent Company	<u>N/A</u>
Known Subsidiaries	<u>N/A</u>
Other known names business has operated under	<u>N/A</u>
Known Counties of Operation	<u>Haywood</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>MSW</u> Permit #: <u>4407-MSWLF-1993</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	SW014-0043
Application ID #	5/12/14

### Review Form Submission

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

### Accounting Clock

Invoice Date		# of Days
Deposit Date	7/29/14	

### CHR Clock

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

### Application Review Clock

Completeness Determination Letter	8/14/14	
Engineering Technical Review Letter #1	8/14/14	# of Days
Engineering Technical Review Response #1	10/22/14	
Engineering Technical Review Letter #2		# of Days
Engineering Technical Review Response #2		
Hydro Technical Review Letter #1		# of Days
Hydro Technical Review Response #1	N/A	
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	12/12/14	