



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: Norman Divers  
 Charah, Inc.  
 PO Box 287  
 Belmont, NC 28012

Date: 12/9/2014  
 Invoice #: SW014-0104

Description	Amount Due
Facility-Application: Green Meadow, LLC (Brickhaven No. 2) Charah, Inc. (Non Permit) 1473 Moncure-Flatwood Road Moncure, NC 27559 Permit Renewal Application (New Facility) received on 11/21/2014	\$0.00
<b>Total Amount Due</b>	<b>\$0.00</b>
<b>Date Due</b>	<b>1/8/2015</b>

**Remit Payment (including a copy of this invoice) To:**

**N.C. Division of Waste Management  
 Solid Waste Section  
 1646 Mail Service Center  
 Raleigh, NC 27699-1646  
 Attn: Ellen Lorscheider**

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. You may also pay using e-check by connecting to: <http://portal.ncdenr.org/web/wm/sw/epayment>  
 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. Proceed with your payment by following the instructions on the e-payment screen.  
 [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

**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>

SW014-0104

P1286

## PERMIT APPLICATION REVIEW FORM

Review Requested by:	<u>Larry Frost</u>
Date Requested:	<u>11/24/2014</u>
Facility Name and Permit ID	<u>New Permit</u>
Applicant (Owner) Name	<u>Green Meadow, LLC</u>
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input checked="" 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 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>None</u>
Date Application Received	<u>11/21/2014</u>
Contact Name, Title & Phone #	<u>Charles E. Price, President/CEO, 877.314.7724</u>
Email Address	<u>1273 Moncure-Flatwood Road, Moncure, NC</u>
Company	<u>Green Meadow, LLC</u>
911 Address	
Mailing Address	<u>12601 Plantside Drive</u>
City/State/Zip	<u>Louisville, KY 40299</u>
Parent Company	<u>Charah, Inc.</u>
Known Subsidiaries	<u>NA</u>
Other known names business has operated under	<u>NA</u>
Known Counties of Operation	<u>NA</u>
Does the applicant have a past or current solid waste permit?	Yes <input type="checkbox"/> No + <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: INDUS Permit #:
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Needed <input type="checkbox"/>
Other notes	<u>This is an Open Pit Mine/CCR Structural Fill site.</u> <u><b>No fees.</b> Need an invoice/project number for tracking purposes only.</u> <u>Need a "P" number.</u>

**APPLICATION FOR NEW PERMIT DATA SHEET (Revised March 2012)**

Data Field	Description	Data
Site Name	M: name given to the facility. Name can permit name, but does not have to.	Brickhaven No.2 Mine Tract "A"
Address1	M: first line of physical address assigned by local 911 service, may be different than mailing address.	1473 Moncure-Flatwood Road
Address2	M: second line of physical address, used when necessary.	NA
City	M: city, town or locality where facility is located.	Moncure
State	M: two letter US postal service abbreviation for the state where the facility is located.	NC
Zip	M: zip code for the location address.	27559
County	M: county name where facility is located.	Chatham
Latitude	M: decimal degrees, should be between 33 and 37.	35.596
Longitude	M: decimal degrees, should be between -75 and -85.	79.010
Horiz_Collection_Method	O: applies to how the coordinates were collected: 001=GPS or 002=geocode or 003=from map	003
Supplemental_Location	O: descriptive text for locating a facility when address is not practical.	6 miles south of Moncure, NC (Chatham County) off of Moncure-Flatwood Road
Geometric_Type	M: 001=Fixed or 002=Mobile, e.g. Facility is Fixed, a septage pumper is Mobile	001
Reference_Point	O: description of point where coordinates were collected at the facility, 001=front door, 002=permitted feature, 003=for mobile, 004=undefined point on facility	001
Status	M: description of the overall facility; Open or Closed.	Closed
Owner	M: classification of the owner of the facility as either Public or Private entities.	Private
Start_Date	M: date on which the facility began to be of interest to the program, Facility Registration Date; Facility's Original Permit Issue Date; Facility's First Inspection Date; Program's Start Date; Department's Creation Date (07/01/1989)	November 21, 2014
Start_Date_Qualifier	O: description of event represented by Start_Date field, e.g. Facility's Original Permit Issue Date.	receipt of application
End_Date	O: date on which the facility ceased to be of interest to the program.	NA
End_Date_Qualifier	O: description of event represented by End_Date field, e.g. Date of Final Closure.	NA
PermitID	M: unique id number used for permit	NOT DETERMINED at this time
LocationID	M: id number used in location table to identify the facility or environmental interest subject to this permit. This number is assigned and is only needed if permit relates to an existing site.	needed
Permit Name	M: Common Name used for this permit	Brickhaven No.2 Mine Tract "A"
Orig_PermitIssueDate	M: Date when first permit issued.	NA
PermitIssueDate	M: Date MOST recent permit issued.	NA
PermitExpDate	M: Date when current permit expires.	NA
PermitStatus	M: Active=Accepting/handling waste; Inactive=Not accepting waste; Proposed=Application in-house for NEW permit; Expired=Past Expiration date but not officially closed; Post-Closure=Not taking waste but monitoring; Closed=Not accepting waste and 'official' closure letter sent; Post-Closure Complete=Not taking waste and monitoring complete; County=Non-facility within a county	Proposed - Structural Fill
Rule	M: block of rules governing site e.g. .1600, .0500, .1100, .0800, etc.	.1700
EnvMonitoring	M: environmental monitoring required, yes is required or no is not required.	yes
PrimaryWaste_Type	M: primary waste type handled under this permit: MSW, CD, Indus, Tire, LCID, Medical, YW, Septage, HHW, WG	Structural Fill
PrimaryOperation_Type	M: primary operation when dealing with waste: LF, Trans, LandAp, TP, Compost, MatRecovery, Incin, Hauler, WasteToEnergy, Authorization, Notification, Collection, Detention	CCR Structural Fill
Owner Name	M: name of owner as appears on the permit.	Green Meadows, LLC
Operator Name	M: name of operator/facility manager.	Charah, Inc.