

We ask that completed forms be returned to: NC Solid Waste Section, 1646 Mail Service Center, Raleigh, NC 27699 or by email. If you have questions or require assistance in completing this report, contact Ethan Brown (ethan.brown@ncdenr.gov or 919.707.8249).

Facility Name: Advanced Disposal-ECO Safe Permit: SNL-820-000-0282

Facility Website (URL): AdvancedDisposal.com

Physical Address	Mailing Address
Street 1: <u>385 Harr Lane</u>	Street 1: <u>385 Harr Lane</u>
Street 2: _____	Street 2: _____
City: <u>Blountville</u> County: <u>Sullivan</u>	City: <u>Blountville</u>
State: <u>Tennessee</u> Zip: <u>37617</u>	State: <u>Tennessee</u> Zip: <u>37617</u>

Primary Facility Contact Person	Secondary Facility Contact Person
Name: <u>Charlie Appleby</u>	Name: <u>Casey Waite</u>
Phone: <u>(423) 482-0900</u> Fax: <u>(423) 574-1901</u>	Phone: <u>(423) 482-0900</u> Fax: <u>(423) 574-1901</u>
Email: <u>CAppleby@Advanceddisposal.com</u>	Email: <u>Casey.Waite@Advanceddisposal.com</u>

1. What type of facility is this?

- Municipal Solid Waste Landfill
 Transfer Station
 Construction & Demolition Landfill
 Treatment and Processor
 Industrial Landfill
 Materials Recovery
 Other (specify) _____

2. If this facility is a Transfer Station, Treatment and Processor, or Materials Recovery Facility, please indicate the facility(s) that received your non-recycled waste material:

NAME, PERMIT #, and LOCATION (city, state) of FACILITY	Facility Type	Tons
TOTAL		

