



# INVOICE 2012

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. [G.S. 25-3-506: A \$25.00 processing fee will be charged on all returned checks.] Please return a copy of this invoice with your payment.

<b>Applicant Address:</b>	<b>Contact/Billing Information:</b>	<b>Facility Location Address:</b>
	Mr. Mike L. Griffin Greenway Waste Solutions of Apex, LLC 19109 West Catawba Avenue, Suite 200 Cornelius, NC 28031	Greenway Waste Solutions of Apex LLC 5940 Old Smithfield Road Apex, NC 27539

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SWCD012-0003	2-23-2012		\$9,000.00

**A. Permit Fee Requirements:** 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.

**B. Explanation of Invoice Amount is Based on Facility's Current Permit Application**

Facility Permit #	Facility Type	Application Type	Application Date	Fee	Total Amount
9230-CDLF-	CDLF	Permit Amendment	02/05/2012	\$9,000.00	\$9,000.00
Total Amount Due					\$9,000.00
Amount Paid					\$0.00

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

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

**PAID**  
 CK. NO. 34000764 \$9,000.00  
 DATE 3/12/2012

**D. Solid Waste Contacts:**

- Questions about billing process: Liz Patterson at (919) 707-8286 or Ellen Lorscheider at (919) 707-8445
- Questions about the Regulations and Technical Assistance:  
 Ed Mussler (919) 707-8231 Landfills, Transfer Stations  
 Michael Scott (919) 707-8246 Land Application Sites, Compost Facilities

**E. Update Your Information:** Please indicate any changes in Facility or Contact Information.

~~SWCD012-0015~~  
 SWCD012-003

**SOLID WASTE SECTION PERMIT APPLICATION  
 COMPLIANCE REVIEW REQUEST  
 AND PERMIT FEE INVOICE REQUEST**

Submit to the Field Operations Branch Head (or Compliance Officer) and to Jeff Skabo

Review Requested by:	<u>John Murray</u>	Date Requested:	<u>2/16/2012</u>
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Name of facility and permit number	<u>Highway 55 C&amp;D Landfill - Name Changed to GREENWAY WASTE SOLUTIONS of Apex, LLC- Permit No. 92-30-CDLF</u>
Applicant (Owner) Name	<u>GREENWAY WASTE SOLUTIONS of Apex, LLC-</u>
Description of Permit Request	<u>PTO &amp; Name Change</u>
Permit Fee Action	<u>Admendment, \$9,000</u>
Date Application Received	<u>2/5/2012</u>
Contact Name and Title	<u>Mike L. Griffin, Manager</u>
Company	_____
911 Address	<u>5940 Old Smithfield Road</u>
Mailing Address	<u>19109 West Catawba Avenue Suite 200 Cornelius, NC 28031</u>
City/State/Zip	<u>Apex, NC 27539</u>
Parent Company	<u>Griffin Brothers</u>
Known Subsidiaries	<u>Greenway Waste Solutions at North Meck, LLC ,Greenway Waste Solutions Of Harrisburg</u>
Other known names business has operated under	<u>HY 55 C&amp;D</u>
Known Counties of Operation	<u>Wake</u>
Does the applicant have a past or current solid waste permit? If Yes:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: <u>CDLF</u> Permit #: <u>92-30</u>
Does the applicant have other DENR permits? If Yes:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Division: <u>DWM, SWS</u> Facility Type: <u>CDLFs</u> Permit #: <u>13-06,</u>
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/a <input type="checkbox"/> Not Needed <input type="checkbox"/>
Are the cost estimates sufficient?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/a <input checked="" type="checkbox"/>
Other notes	_____

Please confirm that the compliance review requirements for this application have been satisfied.