

SOLID WASTE SECTION PERMIT APPLICANT COMPLIANCE REVIEW
Instructions: Complete upper portion and submit this form to the Field Operations Branch Head

Review Requested by: Larry Frost

Date Requested: February 20, 2012

Type of Permit: Transfer Station

Check One: New Permit

Amendment

Date Application Received: February 16, 2012

Applicant Business Name: Hawk Sanitation & Recycling, Inc.

Applicant Mailing Address

Contact Name and Title: Ms. Laila D. Macs, Manager

Company: Hawk Sanitation & Recycling, Inc

Street Address: 4260 Mountain Creek Road

City/State/Zip: Iron, Station, NC 28080

Parent Company: same

Known Subsidiaries: n/a

Other known names business has operated under: n/a

Known Counties of Operation: Mecklenburg

Does the applicant have a past or current solid waste permit? Yes No

If yes, write Facility Type: Transfer Station, and Permit #: 6019 - closed

Does the applicant have other DENR permits? Yes No

If yes, please specify DENR Division na Permit Type na and Permit # na

Did the permit applicant submit Financial Assurance cost estimates? Yes No N/a

Are the cost estimates sufficient? Yes No N/a