



North Carolina Department of Environment and Natural Resources
 Division of Waste Management
 Solid Waste Section



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.

Applicant Address:	Contact/Billing Information:	Facility Location Address:
	Ms. Gwen Matthews Halifax County Dept. of Public Utilities PO Box 70 Halifax, NC 27839	Halifax County Transfer Station 921 Liles Road Littleton, NC 27850

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW012-0018	3-09-2012		\$5,000.00

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
To Be Determined	TRANSFER	New Permit	03/06/2012	\$5,000.00	\$5,000.00
Total Amount Due					\$5,000.00
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. 407483 \$5,000
 DATE 4/9/2012

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.

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

SW012-0018

Submit to the Field Operations Branch Head (or Compliance Officer) and to Liz Patterson

NEW

Review Requested by: Donna Wilson

Date Requested: 3-7-12

Name of facility and permit number: Halifax County Transfer Station, no permit number yet

P1244

Applicant (Owner) Name: Halifax County

Permit request: Application for new MSW transfer station. Requesting new P number. Transfer station is on the same property as the Halifax County CDLF, 4204-CDLF-1998 and the Halifax Coal Ash Landfill, 4204-INDUS-1994.

Permit fee action: new permit \$5,000

Date Application Received: 3-6-12

Contact Name and Title: Ms. Gwen Matthews

Company: Halifax County Dept. Public Utilities

Street Address: P. O. Box 70

City/State/Zip: Halifax, NC 27839

Email: matthewsg@halifaxnc.com

Parent Company: N/A

Known Subsidiaries: N/A

Other known names business has operated under: N/A

Known Counties of Operation: Halifax

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

If yes, write Facility Type: CDLF, industrial LF and Permit #: 4204-CDLF-1998, 4204-INDUS-1994

Does the applicant have other DENR permits? Yes No unknown

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

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

Are the cost estimates sufficient? Yes No N/a

Other notes

Please provide a new P number for this facility. Please confirm that the compliance review requirements for this application have been satisfied.