



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:
	Mr. Todd Wartford, Owner Todco Inc. 1123 Roy Loop Road Lexington, NC 27292	Todco Inc. 1123 Roy Loop Road Lexington, NC 27292

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW012-0014	3-23-2012		\$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
2908-TP-	TRANSFER	New - New Facility	1/19/2012	\$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 #22049 \$5,000
 5/30/2012

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**

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

Review Requested by:	<u>John Murray</u>	Date Requested:	<u>2/15/2012</u>
Name of facility and permit number	<u>TODCO, INC. WOOD RECYCLING 2908-TP-</u>		
Applicant (Owner) Name	<u>Todco Inc.</u>		
Description of Permit Request	<u>Addition of C&D Processing facility to a T&P (LCID) permit. Change in service area.</u>		
Permit Fee Action	<u>\$5,000</u>		
Date Application Received	<u>1/19/2012</u>		
Contact Name and Title	<u>Todd Warfford, Owner</u>		
Company	<u>Todco Inc.</u>		
911 Address	<u>1123 Roy Loop Rd.</u>		
Mailing Address	_____		
City/State/Zip	<u>Lexington, NC 27292</u>		
Parent Company	_____		
Known Subsidiaries	<u>Best Disposal, Inc., Hauling company</u>		
Other known names business has operated under	_____		
Known Counties of Operation	<u>Davidson</u>		
Does the applicant have a past or current solid waste permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>		
If Yes:	Facility Type: <u>T&P</u> Permit #: <u>2908-TP-</u>		
Does the applicant have other DENR permits?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>		
If Yes:	Division: <u>DWQ</u> Facility Type: _____ Permit #: <u>NCG210000</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.

5.4.2012

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