

PERMIT APPLICATION REVIEW FORM

Review Requested by: Geof Little	Date Requested: 10/12/2012
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Facility Name and Permit ID	<u>Maysville C&D Recycling & Recovery Facility</u>
Applicant (Owner) Name	<u>Green Recycling Solutions LLC</u>
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input checked="" type="checkbox"/> (1)a. New – New Facility <input type="checkbox"/> (1)b. New – Expand Facility Boundary <input type="checkbox"/> (1)c. New – Expand Waste Boundary <input type="checkbox"/> (1)d. New – Substantial Amendment <input type="checkbox"/> (2)a. Amendment – Next Phase of the Approved Facility Plan <input type="checkbox"/> (2)b. Amendment – Five-year Renewal <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input type="checkbox"/> (3)a. Modification – Change to Approved Plans (No CHR) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate (No CHR)
Permit Fee	<u>\$1,750</u>
Date Application Received	<u>8/2/2012</u>
Contact Name, Title & Phone No.	<u>James Maides, President, 910-938-5900</u>
Contact Email Address	<u>JamesMaides@csbenc.com</u>
Company Name	<u>Green Recycling Solutions LLC [Operator]</u>
911 Address	<u>11710 Highway 17</u>
Mailing Address	<u>11710 Highway 17</u>
City/State/Zip	<u>Maysville NC 28555</u>
Parent Company	<u>Same</u>
Known Subsidiaries	<u>Unknown</u>
Other Known Related or Associated Business Names	<u>Unknown</u>
Known Counties of Operation	<u>Jones, Craven, Carteret, Onslow, Duplin and Lenoir</u>
Does the Applicant have a Past Or Current Solid Waste Permit?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: N/a Permit No.: N/a
Did the Permit Applicant Submit Financial Assurance Cost Estimates?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Not Needed <input type="checkbox"/>
Other Notes	Enter Other Notes