



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

INVOICE 2013

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.**

Contact/Billing Information:	Facility Location Address:
Mr. Matthew Einsmann, Environmental Mgr. Republic Services of NC, LLC 5111 Chin Page Road Durham, NC 27703	East Carolina Regional Landfill 1922 Republican Road Aulander, N C 27805

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW013-0084	12/4/13		\$30,000.00

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
0803-MSWLF-1993	MSWLF	Renewal 5 Year	8/9/13	\$30,000.00	\$30,000.00
				Total Amount Due	\$30,000.00
				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. 7083375
 DATE 12-18-13

D. Solid Waste Contacts:

- Questions about billing process: Mary H. Johnson at (919) 707-8236
 or: Ellen Lorscheider at (919)707-8245
- Questions about the Regulations and Technical Assistance:
 Ed Mussler (919) 707-8281 Landfills, Transfer Stations
 Tony Gallagher (919) 707-8280 Land Application Sites, Compost Facilities

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

5W 013-0084

P0492

PERMIT APPLICATION REVIEW FORM

Review Requested by:	<u>John Murray</u>
Date Requested:	<u>11/25/2013</u>
Facility Name and Permit ID	<u>East Carolina Regional Landfill, 0803-MSWLF-1993</u>
Applicant (Owner) Name	<u>Republic Services of North Carolina, LLC</u>
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input 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 checked="" type="checkbox"/> (2)b. Amendment – Renewal/Review <input type="checkbox"/> 5YR <input type="checkbox"/> 10YR <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) <input type="checkbox"/> (3)c. Modification – Five-year Limited Review <input type="checkbox"/> (4) Major Permit Modification
Permitted Annual Tonnage	<u>547,500 tpy</u>
Permit Fee	<u>\$30,000.00</u>
Date Application Received- Letter only	<u>8/9/2013</u>
Contact Name, Title & Phone #	<u>Matthew Einsmann Environmental Manager, (bus.) (919) 354-3227, (mob)- (919) 672-2837</u>
Email Address	<u>MEinsmann@republicservices.com</u>
Company	<u>Republic Services of NC, LLC</u>
911 Address	<u>1922 Republican Road, Aulander, NC 27805</u>
Mailing Address	<u>5111 Chin Page Road</u>
City/State/Zip	<u>Durham, NC 27703</u>
Parent Company	Republic Services Inc.
Known Subsidiaries	<u>Charlotte Motor Speedway MSWLF, Upper Piedmont MSWLF</u>
Other known names business has operated under	<u>East Carolina Environmental Inc., Addington Environmental Inc.</u>
Known Counties of Operation	<u>All of NC</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"/> Facility Type: MSWLF, T/S, etc Permit #: 6204, 1403,
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Needed <input type="checkbox"/>
Other notes	<u>Five year renewal of Phase 5-Cells 13 & 14., Original PTC 2/2/2009</u>