



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:
Ms. Brenda McQueen Superintendent of Buildings County of Currituck 153 Courthouse Road, Suite 302, Currituck, NC 27929	Currituck Transfer Station 216 Airport Road Maple, NC 27956

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW013-0060	8/27/13		\$3,000.00

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
2703T-TRANSFER-1996	TRANSFER	2b. Amendment	6/25/13	\$3,000.00	\$3,000.00
Total Amount Due					\$3,000.00
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. 141069  
 DATE 9-9-13

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.

SW013.0060

PERMIT APPLICATION REVIEW FORM

PO915

Review Requested by: Pat Backus	Date Requested: 8/27/2013
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Facility Name and Permit ID	<u>Currituck Transfer Station 2703T-TRANSFER-1996</u>
Applicant (Owner) Name	<u>County of Currituck</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 – 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>\$3,000</u>
Date Application Received	<u>6/25/2013</u>
Contact Name, Title & Phone No.	<u>Brenda McQueen, Superintendent of Buildings, (252)232-2504</u>
Contact Email Address	<u>Brenda.mcqueen@currituckcountync.gov</u>
Company Name	<u>County of Currituck</u>
911 Address	<u>216 Airport Road, Maple, NC 27956</u>
Mailing Address	<u>153 Courthouse Road, Suite 302</u>
City/State/Zip	<u>Currituck, NC 27929</u>
Parent Company	<u>Currituck County</u>
Known Subsidiaries	Known Subsidiaries
Other Known Related or Associated Business Names	Related or Associated Business Names
Known Counties of Operation	<u>Currituck</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: Transfer Permit No.: 27-03T
Did the Permit Applicant Submit Financial Assurance Cost Estimates?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Not Needed <input checked="" type="checkbox"/>
Other Notes	<u>Send invoice to Brenda McQueen</u>