



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. Amanda Bader, County Engineer Harnett County Dept. of Solid Waste PO Box 940 Lillington, NC 27546	Anderson Creek Transfer Station 1086 Poplar Drive Spring Lake, NC 28390

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW013-0065	9/24/13		\$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
4309T-TRANSFER-	TRANSFER	5 Year Permit Renewal	9/24/13	\$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. 19927
 DATE 9-26-13

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.

SW013-0065

PERMIT APPLICATION REVIEW FORM

P 1157

Review Requested by: MING-TAI CHAO	Date Requested: 9/24/2013
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Facility Name and Permit ID	<u>Anderson Creek Transfer Station/4309T-Transfer</u>		
Applicant (Owner) Name	<u>Harnett County</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>9/24/2013</u>		
Contact Name, Title & Phone No.	<u>Amanda Bader, County Engineer, 252-633-1564</u>		
Contact Email Address	<u>abader@harnett.org</u>		
Company Name	<u>Harnett County Department of Solid Waste</u>		
911 Address	<u>1086 Poplar Dr, Spring Lake, NC 28390</u>		
Mailing Address	<u>P.O. Box 940</u>		
City/State/Zip	<u>Lillington, NC 27546</u>		
Parent Company	<u>Harnett County</u>		
Known Subsidiaries	<u>None</u>		
Other Known Related or Associated Business Names	<u>unknown</u>		
Known Counties of Operation	<u>Harnett</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: MSWLFs, CDLFs, LCIDs, TSs Permit No.: 4301, 4302, 4303, 4307T, 4309T, etc.		
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>None</u>		