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

INVOICE 2014

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. James Woodard, District Manager Waste Management of Carolinas, Inc. 2720 Wilkins Drive Sanford, NC 27330	Waste Management-Lee County Transfer Station 2740 Wilkins Drive Sanford, NC 27330

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW014-0019	3/10/14		$5,500.00

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
5304T-TRANSFER-1993	TRANSFER	2b. 10 year Renewal	3/7/14	$5,500.00	$5,500.00
				Total Amount Due	$5,500.00
				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. 0011571949
DATE 5-5-14

D. **Solid Waste Contacts:**
1. Questions about billing process: Mary H. Johnson at (919) 707-8236
   or: Ellen Lorscheider at (919)707-8245
2. 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

CK for $11,000.00 includes $5,500.00 for SW014-0017

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

SW014-0019

PERMIT APPLICATION REVIEW FORM PO484

Review Requested by:	Ming Chao
Date Requested:	3/10/2014
Facility Name and Permit ID	Waste Management-Lee County Transfer Station, 5304T-TRANSFER-1993-
Applicant (Owner) Name	Waste Management of Carolinas, Inc.
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	☐ (1)a. New – New Facility ☐ (1)b. New – Expand Facility Boundary ☐ (1)c. New – Expand Waste Boundary ☐ (1)d. New – Substantial Amendment ☐ (2)a. Amendment – Next Phase of the Approved Facility Plan X (2)b. Amendment – Renewal/Review ☐ 5YR XX 10YR ☐ (2)c. Amendment – Change in Ownership ☐ (3)a. Modification – Change to Approved Plans **(No CHR)** ☐ (3)b. Modification – Subsequent Permit to Operate **(No CHR)** ☐ (3)c. Modification – Five-year Limited Review ☐ (4) Major Permit Modification
Permitted Annual Tonnage	45,440
Permit Fee	$5,500
Date Application Received	3/7/2014
Contact Name, Title & Phone #	James Woodard, District Manager, 919-815-0149
Email Address	jwoodard@wm.com
Company	Waste Management of Carolinas, Inc.
911 Address	2740 Wilkins Drive, Sanford, NC 27330
Mailing Address	2720 Wilkins Drive,
City/State/Zip	Sanford, NC 27330
Parent Company	Waste Management, Inc.
Known Subsidiaries	NA
Other known names business has operated under	NA
Known Counties of Operation	100 counties in North Carolina
Does the applicant have a past or current solid waste permit?	Yes X No ☐ Unknown ☐ Facility Type: LF & TS Permit #: 19-03T, etc.
Did the permit applicant submit Financial Assurance cost estimates?	Yes ☐ No ☐ Not Needed X
Other notes	NA