



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. David Pepper, Manager Waste Industries 3301 Benson Drive, Suite 601 Raleigh, NC 27609	Sanford Transfer Station 3290 McDonald Drive Sanford, NC

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW013-0067	10/7/13		\$7,500.00

**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
New Permit	TRANSFER	New Facility	8/28/13	\$7,500.00	\$7,500.00
				Total Amount Due	\$7,500.00
				Amount Paid	\$0.00

*5305-TRANSFER 2013*

**PAID**  
 CK. NO. 00122575  
 DATE 11-5-13

**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

**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 Facili

*CK # <sup>Permit</sup> 12-3-13  
 00122994  
 Returned 11-13-13  
 mj*

SW013-0067

PERMIT APPLICATION REVIEW FORM

P1269

Review Requested by:	<u>Pat Bakcus</u>
Date Requested:	<u>10/2/2013</u>
Facility Name and Permit ID	<u>P1269 – Sanford Transfer Station</u>
Applicant (Owner) Name	<u>Waste Industries, 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 – 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>N/A</u>
Permit Fee	<u>\$7,500 10-year permit</u>
Date Application Received	<u>8/28/2013</u>
Contact Name, Title & Phone #	<u>David Pepper***, Manager, (919) 325-3000</u>
Email Address	<u>david.pepper@wasteindustries.com</u>
Company	<u>Waste Industries</u>
911 Address	<u>3290 McDonald Drive, Sanford, NC</u>
Mailing Address	<u>3301 Benson Drive, Suite 601</u>
City/State/Zip	<u>Raleigh, NC 27609</u>
Parent Company	<u>Waste Industries, Inc.</u>
Known Subsidiaries	<u>Waste Industries, LLC; Red Rock Disposal, LLC; Wake Reclamation, LLC, etc.</u>
Other known names business has operated under	<u>See above</u>
Known Counties of Operation	<u>Many</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, C&DLF, Trans, T&P    Permit #: many
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input type="checkbox"/> No <input type="checkbox"/> Not Needed <input checked="" type="checkbox"/>
Other notes	<u>***David Pepper is the contract during construction. After the facility is built, the contact will be Mr. Ted Habets, Waste Industries, 4621 Marracco Drive, Hope Mills, NC 28348, Office (910) 423-4122, Fax (910) 423-4125 Fax.</u>

## APPLICATION FOR NEW PERMIT DATA SHEET (Revised March 2012)

P1269

Data Field	Description	Data
Site Name	M: name given to the facility. Name can permit name, but does not have to.	Sanford Transfer Station
Address1	M: first line of physical address assigned by local 911 service, may be different than mailing address.	3290 McDonald Drive
Address2	M: second line of physical address, used when necessary.	
City	M: city, town or locality where facility is located.	Sanford
State	M: two letter US postal service abbreviation for the state where the facility is located.	NC
Zip	M: zip code for the location address.	27330
County	M: county name where facility is located.	Lee
Latitude	M: decimal degrees, should be between 33 and 37.	35.44276
Longitude	M: decimal degrees, should be between -75 and -85.	-79.13578
Horiz_Collection_Method	O: applies to how the coordinates were collected: 001=GPS or 002=geocode or 003=from map	003
Supplemental_Location	O: descriptive text for locating a facility when address is not practical.	
Geometric_Type	M: 001=Fixed or 002=Mobile, e.g. Facility is Fixed, a septage pumper is Mobile	001
Reference_Point	O: description of point where coordinates were collected at the facility, 001=front door, 002=permitted feature, 003=for mobile, 004=undefined point on facility	004
Status	M: description of the overall facility; Open or Closed.	
Owner	M: classification of the owner of the facility as either Public or Private entities.	Private
Start_Date	M: date on which the facility began to be of interest to the program, Facility Registration Date; Facility's Original Permit Issue Date; Facility's First Inspection Date; Program's Start Date; Department's Creation Date (07/01/1989)	8/28/2013
Start_Date_Qualifier	O: description of event represented by Start_Date field, e.g. Facility's Original Permit Issue Date.	Original Permit Application
End_Date	O: date on which the facility ceased to be of interest to the program.	
End_Date_Qualifier	O: description of event represented by End_Date field, e.g. Date of Final Closure.	
PermitID	M: unique id number used for permit	
LocationID	M: id number used in location table to identify the facility or environmental interest subject to this permit. This number is assigned and is only needed if permit relates to an existing site.	
Permit_Name	M: Common Name used for this permit	Sanford Transfer Station
Orig_PermitIssueDate	M: Date when first permit issued.	
PermitIssueDate	M: Date MOST recent permit issued.	
PermitExpDate	M: Date when current permit expires.	
PermitStatus	M: Active=Accepting/handling waste; Inactive=Not accepting waste; Proposed=Application in-house for NEW permit; Expired=Past Expiration date but not officially closed; Post-Closure=Not taking waste but monitoring; Closed=Not accepting waste and 'official' closure letter sent; Post-Closure Complete=Not taking waste and monitoring complete; County=Non-facility within a county	Proposed
Rule	M: block of rules governing site e.g. .1600, .0500, .1100, .0800, etc.	.0400
EnvMonitoring	M: environmental monitoring required, yes is required or no is not required.	No
PrimaryWaste_Type	M: primary waste type handled under this permit: MSW, CD, Indus, Tire, LCID, Medical, YW, Septage, HHW, WG	MSW
PrimaryOperation_Type	M: primary operation when dealing with waste: LF, Trans, LandAp, TP, Compost, MatRecovery, Incin, Hauler, WasteToEnergy, Authorization, Notification, Collection, Detention	Trans
Owner_Name	M: name of owner as appears on the permit.	Waste Industries
Operator_Name	M: name of operator/facility manager.	Waste Industries