



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

INVOICE

Division of Waste Management
 Solid Waste Section
 1646 Mail Service Center
 Raleigh, NC 27699-1646
 phone: (919) 707-8236 fax: (919) 707-8236
 email: mary.johnson@ncdenr.gov

To: Roy Hart, Environmental, Safety & Helath Mgr.
 Louisiana-Pacific Corporation
 PO Box 98
 Roaring River, NC 28669

Date: 6/10/2014
 Invoice #: SW014-0060

Description	Amount Due
Facility-Application: Louisiana-Pacific Corporation (9703-INDUS-1981) 1151 ABTCo Road N Wilkesboro, NC 28659 Permit Renewal Application (Modification- Change to Approved Plans (NO CHR)) received on 6/10/2014	\$1,500.00
Total Amount Due	\$1,500.00
Date Due	7/10/2014

Remit Payment (including a copy of this invoice) To:

**N.C. Division of Waste Management
 Solid Waste Section
 1646 Mail Service Center
 Raleigh, NC 27699-1646
 Attn: Ellen Lorscheider**

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. Please return a copy of this invoice with your payment. You may also pay using e-check by connecting to: <http://portal.ncdenr.org/web/wm/sw/epayment>
 You will need to use the zip code in the description box and the invoice number shown on this invoice to access your account. If a zip code is not listed use the code: 99999 along with the invoice number. Proceed with your payment by following the instructions on the e-payment screen.
 [G.S. 25-3-506: A \$25.00 processing fee will be charged on all returned checks.]

Explanation of Invoice Amount is Based on Facility's Current Permit Application:

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.

Solid Waste Contacts:

Billing process:
 Mary H. Johnson (919) 707-8236
 Ellen Lorscheider (919) 707-8245

Regulations and Technical Assistance:
 Ed Mussler (919) 707-8281 Landfills, Transfer Stations
 Tony Gallagher (919) 707-8280 Land Application Sites, Compost Facilities

PAID
 CK. NO. 0001972875
 DATE 6-12-14

More information available on the web:

North Carolina Department of Environment and Natural Resources (DENR) - <http://portal.ncdenr.org/>
 North Carolina Solid Waste Program - <http://portal.ncdenr.org/web/wm/sw>
 North Carolina Electronics Management Program - <http://portal.ncdenr.org/web/sw/electronics>

SW014-0060
P0161

PERMIT APPLICATION REVIEW FORM

Review Requested by: Allen Gaither	Date Requested: 6/10/2014
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Facility Name and Permit ID	<u>Louisana-Pacific Corporation, 9703-INDUS-1981</u>
Applicant (Owner) Name	<u>Louisana-Pacific Corporation</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 type="checkbox"/> (2)b. Amendment – Five-year Renewal <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input checked="" 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>\$1500</u>
Date Application Received	<u>6/10/2014</u>
Contact Name, Title & Phone No.	<u>Mr. Roy Hart, Environmental, Safety & Health Manager</u>
Contact Email Address	<u>(336) 696-3464, roy.hart@lpcorp.com</u>
Company Name	<u>Louisana-Pacific Corporation</u>
911 Address	<u>1151 ABTCo Road, North Wilkesboro, NC 28659</u>
Mailing Address	<u>PO Box 98</u>
City/State/Zip	<u>Roaring River, NC 28669</u>
Parent Company	<u>None</u>
Known Subsidiaries	<u>Unknown</u>
Other Known Related or Associated Business Names	<u>Unknown</u>
Known Counties of Operation	<u>Wilkes</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: ILF Permit No.: 97-03
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>Corporate Financial Test submitted with application</u>