

SOLID WASTE DISPOSAL FACILITY PERMIT MODIFICATION APPLICATION

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
SOLID WASTE MANAGEMENT DIVISION
5301 NORTSHORE DRIVE
NORTH LITTLE ROCK, AR 72118

Note: This modification application is to be used for all modifications to solid waste disposal and processing facilities. The Department will classify this modification as major or minor in accordance with the provisions of Section 22.308 of Regulation 22. Major modifications will be subject to the provisions of Regulation 8.

I. FACILITY TYPE

_____ Class 1 Landfill _____ Transfer Station (TS)
_____ Class 4 Landfill _____ Composting Facility (Y, O or S)
_____ Class 3C Landfill _____ Solid Waste Recovery Facility (WRF)
_____ Class 3N Landfill _____ Construction and Demolition Recycling Facility (CDRF)
_____ Class 3T Landfill

II. FACILITY IDENTIFICATION

Facility Name: _____ Permit Number: _____ AFIN: _____
Facility Address: _____
City: _____ State: _____ Zip: _____
County: _____ Telephone Number: _____ Fax Number: _____

III. APPLICANT

Applicant Name: _____
Applicant Address: _____
City: _____ State: _____ Zip: _____
Contact Person: _____ Phone Number: _____

PERMIT HISTORY

(Complete for each permit and modification to date)

| | Number | Date Issued |
|------------------|--------|-------------|
| Permit Number: | | |
| Modification #1: | | |
| Modification #2: | | |
| Modification #3: | | |
| Modification #4: | | |

MODIFICATION DESCRIPTION

(Complete each part below as it applies to this modification - if an item doesn't apply, mark it "N/A")

CHANGE IN PERMITTED CAPACITY (Specify whether yards or tons)

Original Cubic Yards _____
(This includes the volume of solid waste and any daily or intermediate soil cover)

Modified Cubic Yards _____

Cubic Yards Increase (Decrease) _____

SITE LIFE & SERVICE AREA

Current Service Area _____

Current Tons per year through the gate _____ (tons/year)

Current Landfill Utilization Rate _____ (cu. yards/year)

Estimated remaining site life (after this modification) _____ years

CHANGE IN PERMITTED DISPOSAL ACREAGE

Original Site Acres _____

Modified Site Acres _____

Site Acres Increase (Decrease) _____

CHANGE IN OPERATING PROCEDURES (Provide brief description of each proposed modification) _____

CHANGE IN FACILITY DESIGN (Provide brief description of each proposed modification) _____

REASON FOR MODIFICATION (Check one or specify below)

Change in Regulation _____

Additional Site Life _____

Improve Site Operations _____

Correct Past Violation _____

Other (Specify) _____

DRAWING REVISIONS

(Identify below each drawing that was revised or added as a result of this modification. Each revised or added drawing should be included as an attachment to this application.)

| Drawing Number | Title | Date | Revision Number |
|-----------------------|--------------|-------------|------------------------|
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OPERATING NARRATIVE REVISIONS

(Identify below each change to the operating narrative as a result of this modification. Revised narrative pages should be included as an attachment to this application. Deletions from the previous narrative should be indicated by strikeout, additions should be redlined.)

| Page Number | Change Description |
|--------------------|---------------------------|
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SUPPLEMENTAL DATA SUBMITTED

(Any report, study, data, information, etc. that was not part of previous permit documents should be identified below. In addition, any data identified below should be included as an attachment to this application.)

Description

SIGNATURE AND CERTIFICATION

(The application should be signed by an authorized representative of the applicant as well as the Consultant that prepared this application. By signing below, the representatives certify that all the information in this modification is accurate and truthful.)

APPLICANT

| | | |
|-------------------|--------------|------|
| Signature & Title | Printed Name | Date |
|-------------------|--------------|------|

ENGINEER/CONSULTANT

| | | |
|-------------------|--------------|------|
| Signature & Title | Printed Name | Date |
|-------------------|--------------|------|

CONFIDENTIALITY: This application shall be available for public inspection, provided, however, that the Department shall not disclose, except to authorized persons, any information which the Director determines is entitled by law to protection as trade secrets without the consent of the applicant. Trade secrets shall not include the name and address of the applicant, nor any information necessary, as determined by the Director, for the public to evaluate the hazards associated with the proposed operation, nor any other information required by law to be available to the public.