

DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF SOLID WASTE MANAGEMENT
SOLID WASTE PERMIT BY RULE NOTIFICATION



1. a. Full, Legal Name of Facility		Identification Number (Official Use Only)	
b. Facility Mailing Address	City	State	Zip Code
c. Physical Location or Address of Facility		County	
d. Latitude (degrees, minutes, and seconds)	Longitude (degrees, minutes, and seconds)		
e. Name of Facility Manager or Site Operator		Phone Number With Area Code ()	
f. Affiliation of Site Operator (If different from permittee)			

2. a. Name of Applicant (Corporation, etc.) as Permittee		Phone Number With Area Code ()	
b. Name of Responsible Official		Phone Number With Area Code ()	
c. Responsible Official's Mailing address	City	State	Zip Code
3. a. Landowner Name		Phone Number With Area Code ()	
b. Landowner Mailing Address	City	State	Zip Code

c. Signature of Landowner _____ Date _____

4. a. Type of Permit-By-Rule Requested:		
<input type="checkbox"/> Coal Ash Facility	<input type="checkbox"/> Land Application	<input type="checkbox"/> Tire Storage Facility
<input type="checkbox"/> Convenience Center	<input type="checkbox"/> Processing Facility	<input type="checkbox"/> Transfer Station

b. Description of Activities and Wastes Handled or Processed:

c. Amount of Waste Handled/Processed/Stored:
Weight _____ tons/day Volume _____ cubic yards/day Maximum Storage Capacity _____ cubic yards

5. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

Date _____ Signature of Responsible Official _____
Typed Name of Responsible Official _____
Official Title _____
Signature of Notary _____
Date Commission Expires _____

(Notary Seal)

INSTRUCTIONS FOR SOLID WASTE PERMIT BY RULE NOTIFICATION

Complete this form for each facility that is processing and/or disposing of solid waste in Tennessee. If multiple facilities exist or are planned, describe each facility and its wastes on a separate form. **Submit completed documents to the respective field office in your area.**

Each existing facility must submit this form along with the required information [1200-1-7-.02(1)(c)2.] within ninety (90) days after the effective date of this rulemaking. Facilities beginning operation after the effective date of this rulemaking must submit this form along with the required information [1200-1-7-.02(1)(c)2] at least thirty (30) days before beginning operation.

- Line 1a. **Full, Legal Name of Facility** - The full, legal name for this site to distinguish it from any other site the applicant or organization may own or operate in Tennessee. **Identification Number** - leave blank for Division usage.
- b. **Facility Mailing Address** - Give a complete mailing address for physical facility location.
- c. **Physical Location or Address of Facility** - Information that will aid the Division in going to the site/facility. Do not give a Post Office Box Number.
- d. Supply the **latitude** and **longitude** of the site with the precision of degrees, minutes and seconds. Latitude and longitude may be found by using a U. S. Geological Survey quadrangle map.
- e. **Name of Facility Manager or Site Operator** - The name and phone number of the manager or person who is responsible for the direction of activities at the site/facility.
- f. **Affiliation of Site Operator (If different from permittee)** - If site is operated by person or entity other than permittee, furnish name of person or corporation, etc.
- Line 2a. **Name of Applicant (Corporation, etc) as Permittee** - Name of legal entity making application (individual, corporation, government agency, etc.) This will be the permittee of record.
- b. **Name of Responsible Official** - The name and phone number of the person whom the Division may contact for further information about the contents of this form and who is authorized by the permittee to complete this notification form.
- c. **Responsible Official Mailing address** - Address of Responsible Official representing the permittee having authority to make application.
- Line 3a. **Landowner name** - The person(s) or organization name(s) and phone number(s) of the immediate owner(s) of the property [attached letter from landowner(s) as required by Rule 1200-1-7-.02(2)(d)1.(iv)].
- b. **Landowner Mailing address** - A complete mailing address for landowner.
- c. **Signature of Landowner** - The landowner(s) must sign and date the notification form.
- Line 4a. **Type of Permit-By-Rule Requested** - Check the appropriate type(s).
- b. **Description of Activities and Wastes Handled or Processed** - Provide a brief narrative statement that describes the activities and wastes handled or processed at the facility.
- c. **Amount of Waste Handled/Processed/Stored** - Provide an estimate of the daily weight in tons/day and/or volume in cubic yards/day that will be handled at the facility. Indicate the maximum amount of waste that can be stored in cubic yards.
- Line 5 **Certification** - After all documents have been compiled for submission to the Division, the manager or owner responsible for the site must sign, date and give title. This signature must be notarized.