



Application for Permit to Construct a Solid Waste Management System

SUBMIT TO: DHEC, Division of Mining and Solid Waste Management,
Bureau of Land and Waste Management, 2600 Bull Street, Columbia, SC 29201-1708
(NOTE: Instructions and additional information for completing this form are provided on the back.)

SECTION I

TYPE OF FACILITY:	<input type="checkbox"/> Transfer Station		<input type="checkbox"/> Processing Facility
	<input type="checkbox"/> Class 2 Landfill		<input type="checkbox"/> Class 3 Landfill
	<input type="checkbox"/> Incinerator		<input type="checkbox"/> Contaminated Soil
Is this an existing facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Permit Number (if Yes):
TYPE OF APPLICATION:	<input type="checkbox"/> New Facility		<input type="checkbox"/> Expansion
	<input type="checkbox"/> Transfer of Ownership		<input type="checkbox"/> Modification
	<input type="checkbox"/> Demonstration of Need (DON) or Tonnage Increase		<input type="checkbox"/> Landfill Determinations Request
TYPES OF TASKS:	<input type="checkbox"/> ADC Request		<input type="checkbox"/> Cell Certification
	<input type="checkbox"/> Closure Certification		<input type="checkbox"/> Cost Estimate
	<input type="checkbox"/> One-Time Waste Disposal		<input type="checkbox"/> Continual Waste Stream
	<input type="checkbox"/> Notation to Deed		<input type="checkbox"/> Termination of Permit
	<input type="checkbox"/> Other (Provide Description of Other Task):		

SECTION II

Name of Project:		
Physical Address:		County:
City:	State:	Zip:
Latitude and Longitude (in decimal degrees):		
Mailing Address:		
City:	State:	Zip:

SECTION III

Operator's Name:		
Mailing Address:		
City:	State:	Zip:
Telephone Number:	Email Address:	
Facility Telephone Number:		
Landowner's Name (if different from Operator's):		
Mailing Address:		
City:	State:	Zip:
Telephone Number:	Email Address:	

SECTION IV

"I have placed my signature and seal upon the documents submitted with the application signifying that I accept responsibility for the information and/or design contained therein. Additional submittals where required will also bear my signature and seal, signifying that I accept responsibility for the information and/or design contained therein."		Seal:
Engineer's Name:	Date:	
Engineer's Signature:	SC Registration No.:	

SECTION V

"I have read this application and all attached documents. I agree to the requirements and conditions that are contained in it. I also agree to the admission of properly authorized persons at reasonable hours for the purpose of sampling and inspection."	
Facility Representative's Name:	Title:
Signature:	Date:
Operator Representative's Name: (if different from facility representative)	Title:
Signature:	Date:
Landowner's Name:	
Signature:	Date:

INSTRUCTIONS: Application for Permit to Construct a Solid Waste Management System

Purpose

This form is to be submitted as part of the application process to obtain a permit for the construction of a solid waste management facility, or to modify an existing solid waste management facility permit.

Audience

Anyone who wishes to obtain a permit for the construction of a solid waste management facility, or who wishes to modify a current solid waste management facility permit.

Completing the Form

SECTION I

- **TYPE OF FACILITY:** Check the box next to the type of facility for which you wish to obtain or modify a permit.
 - **Is this an existing facility?** Check yes if this is an existing permitted facility. Check no if this is a new facility. If existing, list the permit number for the facility.
- **TYPE OF APPLICATION:** Check the box next to the relevant application type.
- **TYPE OF TASKS:** For Class 2 and 3 landfills, check the box next to the task you wish to perform if applicable. If Other, provide a brief description of the task to be performed.

SECTION II

- **Name of Project:** Print the name of the project for which you are filling out the form.
- **Physical Address:** Print the address and county in which the facility is located.
- **Latitude and Longitude:** Provide the coordinates for the facility. These can be obtained using Google Earth.
- **Mailing Address:** Provide an address that mail regarding the facility can be received.

SECTION III

- **Operators Name and Contact information:** Provide the name of the operator in charge of the facility, their mailing address (if different from the facility), telephone number and email address.
- **Facility Telephone Number:** Provide a telephone number that can be used to contact facility personnel.
- **Landowner's Name Contact Information:** Provide the name of the landowner, their mailing address (if different from the facility or operator), telephone number and email address.

SECTION IV

- **Engineer's Signature:** The Registered Professional Engineer in charge of the project must read the statement, then include their name, signature, S.C. Registration Number and seal. The engineer's stamp and signature are only required if the Type of Application is for a new facility, expansion or modification.

SECTION V

- **Signed Statement:** The facility representative, operator and landowner must read the statement, then include their name, signature and date signed.

Where to Send the Registration Form

Registration applications must be sent to the following address.

DHEC
Bureau of Land and Waste Management
Division of Mining and Solid Waste Management
2600 Bull Street
Columbia, SC 29201-1708

Retention Schedule Nos. 14651, 14652 and 14653