

ENERGY AND ENVIRONMENT CABINET

DEPARTMENT FOR ENVIRONMENTAL PROTECTION DIVISION OF WASTE MANAGEMENT 200 FAIR OAKS, 2ND FLOOR FRANKFORT, KY 40601 TELEPHONE NUMBER (502) 564-6716

Application for a Major Modification To a Formal Solid Waste Permit Form DEP 7016 (1/05)

GENERAL INSTRUCTIONS

- 1. APPLICABILITY This form must be completed and submitted to the Cabinet by persons who propose to apply for a major modification of a formal permit.
- 2. ASSISTANCE Questions regarding this form may be directed in writing to the Division of Waste Management, Solid Waste Branch at the address listed above, or by calling (502) 564-6716.
- 3. SUBMISSION Please type or print legibly in permanent ink. Submit the original and one (1) copy of the completed form to the Division of Waste Management at the address listed above. If an item is not applicable to your facility write "N/A" in the space provided.
- 4. FEES Applicants must submit a \$1000.00 filing fee at the time of application submittal in accordance with 401 KAR 47:090 Section 2(6).
- 5. LAWS AND REGULATIONS Applicants are expected to understand and comply with all laws and regulations applicable to the facility.



DEP# <u>7016</u>

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To be assigned by the Cabinet County			
Fac	Cacility Fees Submitted		
I.D	Date		
Sec	ction Initials		
A.	General Information		
1.	Applicant Name		
	Address		
	City State Zip Code		
	Facility Name Agency Interest #		
	Facility Permit No. Phone Number		
	Contact Person		
2.	Mailing Address (If different from Above) Address		
	City State Zip Code		
	Phone Number		
	Contact Person		
3.	Correction to the application are to be made by: Applicant		
	Consultant		
	Address		
	City State Zip Code		
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4.	Type of Modification you are seeking:		
	A change in the liner design		
	A vertical expansion greater than two (2) years		
	In a narrative form provide as attachment(s), starting with attachment 1, a description of the		
	permitting action you are seeking from the Cabinet. Include appropriate drawings, calculations,		
	maps, cross-sections, etc.		
_	Complete the information below for the multiprotion which counties with 401 MAD 47 140		
3.	Complete the information below for the public notice which complies with 401 KAR 47:140, Section 12 and KRS 224.40-310. These mandates require public notice(s) be made for major		
	modifications. Only those applicants notified by the Cabinet in writing may publish the public		
	notice. The Division will send the notice to the appropriate newspaper for your convenience. The		
	bill for the advertisement will be sent to you by the newspaper.		
	Directions to the facility:		
	Brief description of the permitting action:		
6.	Provide as Attachment A the documentation that demonstrates that this permitting action will be		
	consistent with the solid waste plan for the host county (local determintaion).		

B. Certification

401 KAR 47:160, Section 6(4)

"I certify under penalty of law that this documentation and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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, including the possibility of fine and imprisonment for such violations."

Original Signature of Responsible Official	Date
Type the Name of the Responsible Official	Title
Name of Applicant, e.g. Corporation or Unit of Government	
Subscribed and sworn before me by	
this the day of	_, 20
Notary Public Signature	
My commision expires	