 **ENERGY AND ENVIRONMENT CABINET**

**DEPARTMENT FOR ENVIRONMENTAL PROTECTION**

**DIVISION OF WASTE MANAGEMENT**

**300 SOWER BLVD., SECOND FLOOR**

**FRANKFORT, KY 40601**

**TELEPHONE NUMBER 502-564-6716**

|  |
| --- |
| **Registration for a Registered Permit-By-Rule** **Solid Waste Transfer Station, Convenience Center,****and Recycling Center** **Form DEP 7059 (6/99)** |

**Statutes and regulations may be viewed online at the following website address:** [**http://www.lrc.ky.gov/search.htm**](http://www.lrc.ky.gov/search.htm)

**Solid waste application forms are available at the following website address:** [**http://waste.ky.gov**](http://waste.ky.gov)

**DWM OFFICAL USE ONLY**

**AI#: \_\_\_\_\_\_\_\_\_\_\_\_ Application #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This registration shall become effective five (5) business days after the cabinet receives it, with the exception of medical waste transfer stations which become effective thirty (30) days after receipt, unless the cabinet denies the registration within that time.**

**General Instructions**

**1. APPLICABILITY – This form must be complete and submitted to the cabinet by persons requesting the issuance or modification of a permit for a registered permit-by-rule transfer station, convenience center or recycling center.**

**2. ASSISTANCE – Questions regarding this form may be directed in writing to the Division of Waste Management (DWM), Solid Waste Branch at the address listed above, or by calling 502-564-6716.**

**3. SUBMISSION – Type or print legibly in permanent ink. Submit the original and two (2) copies of the completed form to the DWM at the address listed above. If an item is not applicable, write “N/A” in the space provided.**

**4. REPORTING - Form DEP 7046 must be maintained on site at all times to comply with regulatory recordkeeping requirements and can be downloaded from the website listed above.**

**5. FEES – See 401 KAR 47:090 for all application fees.**

**6. LAWS AND REGULATIONS – Applicants are expected to understand and comply with all applicable laws and regulations, including all operator certification requirements.**

**To assist you in the submittal of a complete and accurate application, the DWM has identified the most common errors found during the review process. These errors are listed below for your convenience.**

**1. Failure to complete the application. All maps, attachments, and supplemental data of sufficient detail must be submitted with this application.**

**2. Failure to properly sign and notarize the application. An individual with signature authority for the registrant as defined by KRS 224.01-010(44) and 401 KAR 47:160, Section 6 must sign and notarize the appropriate signature sections of the application.**

**3. Failure to do the public notice 14 days prior to submitting the application.**

**4. Failure to provide appropriate application fees.**

 **Warning! Due to the potential for identity theft, do not provide social security numbers to the DWM as part of this application. If this information is required during the normal course of review of the application, a cabinet representative will contact the appropriate individual to acquire this information in a secure format.**

**Application for a Registered Permit-By-Rule**

**Transfer Station, Convenience Center or Recycling Center**

 **General Information**

 **1.** [ ]  New Application **(Skip items #2 and #3 if this is a proposed new permit.)**

 [ ]  Modification to an existing application **(Complete items #2 and #3 if you check this box.)**

 **2.** Agency Interest #:       **3.** Permit #:     -

 **4.** Facility Type: (check all that apply) [ ]  Convenience Center

 [ ]  Transfer Station

 [ ]  Medical Waste Transfer Station

 [ ]  Recycling Center**:** [ ]  Processing

 [ ] Broker

 [ ]  Collection

 **5.** Fee submitted**: $**      **.**   6**.** Check or Money Order #**:**

 **7.** Method of payment**:** [ ]  Check

[ ]  Money Order

[ ]  Cash

[ ]  Exempt (Publicly Owned Facility)

 **Registrant (Owner or Operator) Information**

 **8.** Registrant Name:

 (The corporation, LLC, business, person, government agency, etc., that owns or operates the facility.)

 **9.** Registrant Mailing Address:

**10.** City:       **11.** State:    **12.** Zip Code:

**13.** Contact Person:       **14.** Title:

**15.** E-Mail:

**16.** Phone #:     -     -      ext.

**17.** Cell #:     -     -

 **Facility Information**

**18.** Facility Name:       **19.** County:

**20.** Facility Location:

 (Provide the street or physical location. Do not use P. O. Box #’s, etc.)

**21.** City:       **22.** Zip Code:

**23.** Facility Contact:       **24.** Title:

**25.** Phone #:     -     -      ext**.**       **26.** Cell #:     -     -

**27.** E-Mail:

 **Preparer Information**

**(Complete items 28 – 36 if the following information concerning the person preparing this application is different from the contact persons named in items 13 and 24.)**

**28.** Preparers Name:

**29.** Company:       **30.** Mailing Address:

**31.** City: **32.** State:    **33.** Zip Code:

**34.** Phone #:     -     -      ext.       **35.** Cell #     -     -

**36.** E-Mail:

 **Site Information**

**37**. What community is nearest to the proposed facility?

**38.** What highway intersection is nearest to the proposed facility?

       &

**39**. What stream is nearest to the proposed facility?

**40**. What is the estimated daily and annual amount of waste that will be managed at the

 facility?

 DAILY: Cubic Yards       Tons

 ANNUAL: Cubic Yards       Tons

 **Attachments & Descriptions**

**41.** For transfer stations, what disposal site will accept the waste from this facility? For

 recycling centers and convenience centers, what disposal site will accept the non-

 recyclable waste from this facility?

|  |  |  |
| --- | --- | --- |
| **Facility Name** | **Permit Number** | **State** |
|       |       |    |
|       |       |    |
|       |       |    |
|       |       |    |

**42.** List all anticipated sources of waste by county and state and estimate the monthly

 tonnage to be managed. If there are more than three (3) waste sources, provide the

 additional information and Label as **Attachment 1**. If accepting waste from an entire

 state, write the state name in the space provided.

|  |  |
| --- | --- |
| **Source of Waste (County and State)** | **Monthly Quantity (Tons)** |
|       |       |
|       |       |
|       |       |
|       |       |
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|       |       |
|       |       |

**43.** Provide, as **Attachment 2,** a detailed description of the following: the equipment to

 be used, operating hours, number of personnel onsite daily, provisions for temporary

 storage, and the contingency plans for emergencies such as fire, spills, and equipment

 failure, etc.

**44**. Provide, as **Attachment 3,** one (1) current, original U.S.G.S. 7.5 minute topographic

 map with the original and each copy of the application. Clearly mark the location of

 the facility and property boundaries. Do not send aerial photographs in lieu of

 topographic maps.

**45.** Provide, as **Attachment 4,** a site plan drawing showing all buildings, roads, property

 boundaries, fences, etc. Include a North arrow. The site plan may be hand-drawn.

**46**. Indicate the appropriate legal organizational structure of the registrant:

 [ ]  Proprietorship [ ]  Partnership General

 [ ]  Joint Venture [ ]  Partnership Limited

 [ ]  Governmental Agency [ ]  Corporation

 [ ]  Other (describe)

**47.** Provide, as **Attachment 5,** a notarized true and exact copy of the document which

 establishes the legal structure of the registrant. Check the box that applies.

 [ ]  Partnership agreement (partnership)

 [ ]  Certificate of Incorporation from the Kentucky Secretary of State (in-state

 corporation)

 [ ]  Certificate of Authority to transact business in Kentucky (out-of-state corporation)

 [ ]  Not Applicable (if the registrant is a sole proprietor or government entity)

**48**. Provide, as **Attachment 6,** a copy of the approved Certificate of Assumed Name

 as provided by the Secretary of State if the registrant is a corporation, limited

 partnership, or general partnership operating under an assumed name.

 If not applicable, check here [ ] .

**49.** If the registrant is a corporation, provide the demographic information for the resident agent in Kentucky for service of process:

**a.** Name:       **b.** Title:

**c.** Street Address:

**d.** City:       **e.** State:    **f**. Zip Code:

**g.** E-mail:

**h.** Phone #:     -     -      ext.       **i.** Cell #:     -     -

 **Addendums and Public Notice Information**

**50.** If the owner of the property on which the proposed facility is to be located is not the registrant, then the registrant must submit a notarized statement signed by the property owner. See **Addendum #1** attached to this application.

 If not applicable (if the registrant is the property owner), check here [ ]

**51**. Publish a notice using **Addendum #2**. Provide a tear sheet and affidavit of

 publication and label as **Attachment 7**. The tear sheet is the page of the paper

 containing the notice.

**52.** I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, certify that a copy of this

 (Registrant’s signature)

 application has been delivered to the governing body of the solid waste management

 area in which the facility will be located.

 **Registration Certification**

**53. Pursuant to 401 KAR 47:160, Section 6**, a person with signature authority such as a sole proprietor, owner, partner, corporate officer, plant manager, LLC member, mayor, county judge executive or other authorized official must sign this certification statement.

**NOTE: Consultants may not sign the following certification statement.**

**“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 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.”**

Name of Person Signing (type or print):

Title of Person Signing:       Date:    -    -

Signature per 401 KAR 47:160: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, Year 20\_\_\_\_\_

Notary Public Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_

**Registrant Disclosure Statement**

**The Registrant is the person, partnership, association, company, corporation,**

**government agency, etc., that owns or operates the facility.**

**54.** Registrant’s complete name:

**55.** Registrant’s mailing address:

**56.** State of Incorporation or Application:

**57.** City:       **58.** State:    **59.** Zip Code:

**60.** Contact Person:       **61.** Title:

**62.** E-mail:

**63.** Phone #:    -     -      ext.       **64.** Cell #:     -     -

**65.** As defined by KRS 224.01-010(44), provide the names of all key personnel and their titles or positions. Provide this data as **Attachment 8** if additional pages are needed. A completed Key Personnel Disclosure Statement must be submitted with the application for each individual listed as a key person.

**Government agencies and sole proprietors are not required to submit key personnel disclosure statements.**

**If you are a sole proprietor or government agency, check here.** [ ]

|  |  |
| --- | --- |
| **Key Person** | **Title/Position** |
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**66.** Provide, as **Attachment 9**, a description of the registrant's experience in managing solid waste including any past or present permits or licenses held by the registrant within the previous five (5) years.

If not applicable, check here. [ ]

**67.** Provide, as **Attachment 10**, a description of the registrant’s experience in managing hazardous waste including any past or present permits or licenses held by the registrant within the previous five (5) years.

If not applicable, check here.[ ]

**68.** Provide, as **Attachment 11**, a description of all civil and administrative complaints against the registrant and its key personnel for the violation of any state or federal environmental protection law that have resulted in a fine or penalty of more than one thousand dollars ($1,000) within five (5) years before the date of the submission of this application.

If applicable, each description shall include the following: the style of the complaint, the case, file, or other identifying number, the identity of all parties named in the complaint, the forum in which the complaint was filed, the identity of each state or federal agency involved with or named in the complaint, the amount of the fine or penalty, whether the fine or penalty has been paid, the identity and description of each law or regulation violated or alleged to have been violated and upon which the fine or penalty is based; and state whether the fine was the result of settlement or agreed order, an administrative order, or a court judgment. If litigation is ongoing, describe any orders or judgments entered and describe the current status of the litigation.

If not applicable, check here. [ ]

**69.** Provide, as **Attachment 12**, a description of all civil and administrative complaints against the registrant and its key personnel for the violation of any state or federal environmental protection law that allege an act or omission that constitutes a violation of a state or federal environmental protection law and that presented a substantial endangerment to the public health or the environment.

 If applicable, each description shall include the following: the style of the complaint, the case, file, or other identifying number, the identities of each party to the complaint, the forum in which the complaint was brought, the identity of each state or federal agency involved with or named in the complaint, an explanation of the alleged act or omission, the identity and a description of the environmental protection law or regulation alleged to have been violated, an explanation of all corrective action measures performed to correct or mitigate the alleged violation, and a description of the alleged endangerment to public health or to the environment. State whether the issues raised in the complaint have been resolved and whether the resolution was the result of a settlement or agreement, an administrative order, or a court order of judgment. If litigation on the allegation is ongoing, describe any orders or judgments entered and describe the present status of the litigation.

If not applicable, check here. [ ]

**70.** Provide, as **Attachment 13**, a description of all pending criminal complaints alleging the violation of any state or federal environmental protection law that have been filed against the registrant and its key personnel within five (5) years before the date of submission of this application.

If applicable, each description shall include the following: the style of the case and the identifying ease number, the date the complaint was filed, the forum in which the complaint is pending, the identity of the law or regulation allegedly violated and a narrative description of the law or regulation, whether the alleged violation is a misdemeanor or a felony, and all actions and pleadings which have occurred or have been fi1ed in association with the complaint.

If not applicable, check here. [ ]

**71.** Provide, as **Attachment 14**, a description of all judgments of criminal conviction entered against the registrant and its key personnel within five (5) years before the date of submission of this application for the violation of any state or federal environmental protection law.

If applicable, each description shall include the following: style, case number, forum in which the complaint was entered, date of judgment, sentence imposed, the identity and a description of each law the registrant was convicted of violating, whether the conviction was the result of a plea agreement or a trial, and, if currently on appeal, the status of the appeal.

If not applicable, check here. [ ]

**72.** Provide, as **Attachment 15**, a description of all judgments of criminal conviction of a felony under the laws of any state or the United States that are entered against the registrant and its key personnel within five (5) years before the date of submission of this application.

If applicable, each description shall include the following: style, case number, forum in which the complaint was entered, date of judgment, sentence imposed, the identity and a description of each law the registrant was convicted of violating, whether the conviction was the result of a plea agreement or a trial, and, if currently on appeal, the status of the appeal.

If not applicable, check here. [ ]

**73.** Provide, as **Attachment 16**, a list of the names and addresses of all waste sites or facilities and solid waste management facilities in which the registrant or any of its key personnel has a financial or equitable interest, or is an officer, director, or manager.

If not applicable, check here. [ ]

 **Registrant Disclosure Certification**

**74. Pursuant to 401 KAR 47:160, Section 6**, a person with signature authority such as a sole proprietor, owner, partner, corporate officer, plant manager, LLC member, mayor, county judge executive or other authorized official must sign this certification statement.

**NOTE: Consultants may not sign the following certification statement.**

**“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 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.”**

Name of Person Signing (type or print):

Title of Person Signing:       Date:    -    -

Signature per 401 KAR 47:160: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, Year 20\_\_\_\_\_

Notary Public Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_

 **Key Personnel Disclosure Statement**

**Sole proprietors and government agencies are exempt from the requirements of this section.**

**75.** Key Person (type or print):

**76.** Mailing Address:

**77.** City:       **78.** State:    **79.** Zip Code:

**80.** E-mail:

**81.** Phone #:    -     -     ext.      **82.** Cell #:     -     -

**83.** What is the relationship between the applicant and key person?

 See KRS 224.01-010(44).

[ ]  Partner [ ]  Corporate Official [ ]  LLC Member

[ ]  Shareholder [ ]  Other (describe)**:**

**84.** Provide, as **Attachment 17**, a description of the key person’s experience in managing solid waste including any past or present permits or licenses held by the key person within the previous five (5) years.

If not applicable, check here. [ ]

**85.** Provide, as **Attachment 18**, a description of the key person’s experience in managing hazardous waste including any past or present permits or licenses held by the key person within the previous five (5) years.

If not applicable, check here.[ ]

**86.** Provide, as **Attachment 19**, a description of all civil and administrative complaints against the key person for the violation of any state or federal environmental protection law that have resulted in a fine or penalty of more than one thousand dollars ($1,000) within five (5) years before the date of the submission of this application.

If applicable, each description shall include the following: the style of the complaint, the case, file, or other identifying number, the identity of all parties named in the complaint, the forum in which the complaint was filed, the identity of each state or federal agency involved with or named in the complaint, the amount of the fine or penalty, whether the fine or penalty has been paid, the identity and description of each law or regulation violated or alleged to have been violated and upon which the fine or penalty is based; and state whether the fine was the result of settlement or agreed order, an administrative order, or a court judgment. If litigation is ongoing, describe any orders or judgments entered and describe the current status of the litigation.

If not applicable, check here. [ ]

**87.** Provide, as **Attachment 20**, a description of all civil and administrative complaints against the key person for the violation of any state or federal environmental protection law that allege an act or omission that constitutes a violation of a state or federal environmental protection law and that presented a substantial endangerment to the public health or the environment.

If applicable, each description shall include the following: the style of the complaint, the case, file, or other identifying number, the identities of each party to the complaint, the forum in which the complaint was brought, the identity of each state or federal agency involved with or named in the complaint, an explanation of the alleged act or omission, the identity and a description of the environmental protection law or regulation alleged to have been violated, an explanation of all corrective action measures performed to correct or mitigate the alleged violation, and a description of the alleged endangerment to public health or to the environment. State whether the issues raised in the complaint have been resolved and whether the resolution was the result of a settlement or agreement, an administrative order, or a court order of judgment. If litigation on the allegation is ongoing, describe any orders or judgments entered and describe the present status of the litigation.

If not applicable, check here. [ ]

**88.** Provide, as **Attachment 21**, a description of all pending criminal complaints alleging the violation of any state or federal environmental protection law that have been filed against the key person within five (5) years before the date of submission of this application.

If applicable, each description shall include the following: the style of the case and the identifying ease number, the date the complaint was filed, the forum in which the complaint is pending, the identity of the law or regulation allegedly violated and a narrative description of the law or regulation, whether the alleged violation is a misdemeanor or a felony, and all actions and pleadings which have occurred or have been fi1ed in association with the complaint.

If not applicable, check here. [ ]

**89.** Provide, as **Attachment 22**, a description of all judgments of criminal conviction entered against the key person within five (5) years before the date of submission of this application for the violation of any state or federal environmental protection law.

If applicable, each description shall include the following: style, case number, forum in which the complaint was entered, date of judgment, sentence imposed, the identity and a description of each law the key person was convicted of violating, whether the conviction was the result of a plea agreement or a trial, and, if currently on appeal, the status of the appeal.

If not applicable, check here. [ ]

**90.** Provide, as **Attachment 23**, a description of all judgments of criminal conviction of a felony under the laws of any state or the United States that are entered against the key person within five (5) years before the date of submission of this application.

If applicable, each description shall include the following: style, case number, forum in which the complaint was entered, date of judgment, sentence imposed, the identity and a description of each law the key person was convicted of violating, whether the conviction was the result of a plea agreement or a trial, and, if currently on appeal, the status of the appeal.

If not applicable, check here. [ ]

**91.** Provide, as **Attachment 24**, a list of the names and addresses of all waste sites or facilities and solid waste management facilities in which the key person has a financial or equitable interest, or is an officer, director, or manager.

If not applicable, check here. [ ]

 **Key Personnel Disclosure Certification**

**92. Pursuant to 401 KAR 47:160, Section 6**, the key person must sign this statement.

**“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 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.”**

Name of Key Person Signing (type or print):

Title of Key Person Signing:       Date:    -    -

Signature per 401 KAR 47:160: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, Year 20\_\_\_\_\_

Notary Public Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_

**Addendum 1**

**OWNER’S ACKNOWLEDGEMENT OF LIABILITY**

 **1.** Property Owner:

 **2.** Mailing Address:

 **3.** City:       **4.** State:    **5.** Zip:

 **6.** Contact Person:

 **7.** Title:

 **8.** E-mail:

 **9.** Phone #:     -     -      ext.      **10.** Cell #:     -     -

**Note: The property owner must sign this statement.**

**“I am aware of the facility that has been proposed for my property; and, I have been given a copy of the application outlining this project. I hereby give permission for the registrant to proceed with this project. I understand that I am fully liable if the registrant fails to comply with the statutory and regulatory requirements for this facility, including any enforcement actions by the Energy and Environment Cabinet.”**

Name of Property Owner (type or print):

Signature of Property Owner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subscribed and sworn to before me this\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

Notary Public Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My commission expires\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Addendum 2**

**Note:** **The notice must run two weeks prior to submitting the application to the DWM.**

**1.** Fill in all blanks.

**2.** Submit this notice for publication to a newspaper of general circulation in the county where the proposed waste management facility will be located.

**3**. Inform the newspaper that the public notice shall be of a size to include not less than two (2) column widths for advertising and shall be in a display format.

**4.** Request a tear sheet and affidavit of publication from the newspaper publishing the notice. The tear sheet and affidavit of publication must be submitted to the DWM along with your completed application. Label as **Attachment 8**.

**PUBLIC NOTICE**

**REGISTERED PERMIT-BY-RULE**

      (Name of Registrant) proposes to submit an application for a registered permit-by-rule       (transfer station, convenience center or recycling center) facility to the Energy and Environment Cabinet, Division of Waste Management, pursuant to 401 KAR 47:110. The registration shall become effective five (5) business days after the cabinet receives it, with the exception of medical waste transfer stations which become effective thirty (30) days after the cabinet receives it, unless the cabinet denies the registration within that time. The proposed facility will:

      (Provide a description of the business to be conducted.)

The proposed facility will be located at the following address:

      (facility name)

      (facility physical address)

      (city)    (state)       (zip)

For questions regarding this proposed facility, contact:       (facility owner or operator) at     -     -      (phone number including area code). Questions concerning the application process for registered permits-by-rule can be directed to the:

**Division of Waste Management**

**Solid Waste Branch**

**300 Sower Blvd., Second Floor**

**Frankfort, KY 40601**

**(502) 564-6716**