



IOWA DEPARTMENT OF NATURAL RESOURCES

Municipal Solid Waste Landfill

PERMIT APPLICATION FORM 50



☐ New Permit
☐ Permit Renewal (permit number) _____ - SDP - _____ - _____ MLF
☐ Closure Permit

SECTION 1: PERMIT APPLICATION REQUIREMENTS

Owner of site

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____

Certified Operator Responsible for Operation at Facility

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____

Permit Applicant

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____

Design Engineer (PE)

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____
Iowa Engineer License #: _____ Expiration Date: _____

Responsible Official for the Facility

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____

Agency and Responsible Official of Agency Served (if any)

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____

Facility

Name: _____
Address: _____ City, State, Zip: _____
Legal Description: _____

Landfill is part of the following solid waste comprehensive planning area:

Planning Area Name: _____

Date of Last Approved Plan: _____

Service area of the landfill (include unincorporated areas and out of state generators):

Population Served: _____

SECTION 2: PERMIT APPLICATION SUPPORTING DOCUMENTATION

PLANS AND SPECIFICATIONS

Checking the appropriate boxes below certifies that the documents submitted in conjunction with this application form are complete and in compliance with the applicable chapters of the Iowa Administrative Code. While some of the documents below may have been submitted previously, updated copies of each are required to be provided with each permit renewal application, unless a prior document remains current and is identified by Doc ID#, Section, and Page.

Required Plans and Specifications

- ☐ Executive Summary
An executive summary shall address the following:
- Summary of modifications, if any, to the approved plans and specifications that occurred during the current permit cycle.
 - Summary of each special provision of the current permit to determine if it is to remain the same, be revised or be removed.
 - Provide documentation and certification as required for new permit amendment requests, if any.
 - Provide documentation and certification as required for equivalency review requests, if any.
 - Provide documentation and certification as required for new variance requests from Iowa Administrative Code requirements, if any.
- ☐ An organizational chart in accordance with Iowa Administrative Code 567 paragraph [113.5\(1\)“b”](#).
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ A site exploration and characterization report for the facility that complies with the requirements of subrule [113.6\(4\)](#).
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ Design plans and specifications for the facility, and quality control and assurance plans, that comply with the requirements of rule [113.7\(455B\)](#).
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ A development and operations (DOPS) plan for the facility, an emergency response and remedial action plan (ERRAP), and proof of MSWLF Operator Certification that comply with the requirements of rule [113.8\(455B\)](#) .
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ An environmental monitoring plan that complies with the requirements of rules [113.9\(455B\)](#) and [113.10\(455B\)](#).
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ The project goals and time lines, and other documentation as necessary to comply with subrule [113.4\(10\)](#) and other requirements of the Department if an RD&D permit is being requested or renewed.
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ Proof of financial assurance in compliance with rule [113.14\(455B\)](#).
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ A closure and postclosure plan that complies with the requirements of rules [113.12\(455B\)](#) and [113.13\(455B\)](#).
No Revision Required - See Doc ID#, Section, and Page: _____
- ☐ Comprehensive plan requirements. Attach a copy of the most recent comprehensive plan approval or amendment letter.
No Revision Required - See Doc ID#, Section, and Page: _____

In addition to the documents required above, the permit holder shall comply with the implementation plan requirements of subrule [113.2\(9\)](#), the public notice requirements of subrule [113.4\(12\)](#), and the record-keeping and reporting requirements of rule [113.11\(455B\)](#).

If the department finds the permit application information to be incomplete, the department shall notify the applicant of that fact and of the specific deficiencies. If the applicant fails to correct the noted deficiencies within 30 days, the department may reject the application and return the application materials to the applicant. The applicant may reapply without prejudice.

SECTION 3: APPLICANT SIGNATURE

Signature of Permit Applicant: _____ **Date:** _____

Printed Name: _____ **Title:** _____

Applications for sanitary disposal projects must be accompanied by the plans, specifications and additional information required by the applicable solid waste rules under Iowa Administrative Code.

Send completed applications with attached information to the DNR project officer via email or file sharing platform.

For questions concerning this application contact Brian Rath at 515-537-4051, brian.rath@dnr.iowa.gov