IOWA DEPARTMENT OF NATURAL RESOURCES

Coal Combustion Residual Landfill

PERMIT APPLICATION

☐ **New Permit Application**

☐ **Permit Renewal** **Permit Number:** _____ **- SDP -** _____ **-** _____ **CCR**

☐ **Closure Permit Application**

SECTION 1: PERMIT APPLICATION REQUIREMENTS

Facility

Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Owner of Facility

Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Certified Operator Responsible for Operation of Facility

Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Permit Applicant

Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Design Engineer (P.E.)

Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Iowa Engineer License #: _____ Expiration Date: _____

Responsible Official for the Facility

Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Legal Description of Facility:

_____

Type, source, and expected volume or weight of waste to be handled per day, per week, or year:

_____

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 the 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.

☐ Permit application requirements in accordance with subrule 101.304(455B).

If no revision is required include Doc ID#, Section, and Page: _____

☐ Design requirements in accordance with subrule 101.305(455B).

If no revision is required include Doc ID#, Section, and Page: _____

☐ Operating requirements in accordance with subrule 101.305(455B).

If no revision is required include Doc ID#, Section, and Page: _____

☐ Closure/Post-closure requirements in accordance with subrule 101.308(455B).

If no revision is required include Doc ID#, Section, and Page: _____

☐ Emergency response and remedial action plan requirements in accordance with rule 101.9(455B).

If no revision is required include Doc ID#, Section, and Page: _____

☐ Financial assurance requirements in accordance with rule 101.309(455B).

If no revision is required include Doc ID#, Section, and Page: _____

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