IOW/	A DEPARTMENT OF NATUR SINGLE USE LANDFA PERMIT APPLICATION FO	RMING	<b>Þ</b> RR
New Permit			
Permit Renewal (permit number)	-SDP-	- PCS	
Permit Amendment			
SECTION 1. FACILITY CONTACT INFO	RMATION		
Facility			
Name:		Phone	:
Address:			
Country			
Responsible Official for the Facility			
Name:		Phone	:
Address:			
City, State, Zip:			
Owner of Site			
Name:		Phone	:
Address:			
City, State, Zip:			
Emergency Contact			
Name:		Phone	:
Address:		Fax:	
City, State, Zip:	E-mail:		
Design Engineer (P.E.), if any			
Name:		Phone	:
Address:		Fax:	
City, State, Zip:			
Iowa Engineer License #:	Expiration Date:		

# SECTION 2. PERMIT APPLICATION CHECKLIST

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, <u>updated copies of each is required to be provided with each permit renewal application</u>, unless a prior document remains current and is identified by Doc ID # below. If an application is found by the department to be incomplete, it may be denied and returned to the applicant.

#### **Required Documents**

## Section A. Executive Summary (permit renewals only)

- Summary of modifications, if any, to the facility 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.
- Summary of each permit amendment, if any, that occurred during the current permit cycle to determine if it shall be included with the renewed permit, be revised or be removed.

 Provide documentation and certification as required for new permit amendment requests and new variance requests from Iowa Administrative Code, if any.

Section B. Organizational Chart (IAC 567 102.12(5))

Section C. Site Operation Plan (IAC 567 120.5(2)"b")

Section D. Emergency Response and Remedial Action Plan (IAC 567 120.5(2)"c")

Section E. Proof of Financial Assurance (IAC 567 120.13)

## SECTION 3. APPLICANT CERTIFICATION

### Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision to assure that qualified personnel properly gathered and evaluated 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 further certify that the construction and operation of the above described facility will be in accordance with the plans, specifications, reports and related communications accepted by the Iowa Department of Natural Resources and on file in its office; and in accordance with conditions imposed in the permit issued by the Iowa Department of Natural Resources.

Signature of Permit Applicant:	Date:	
Printed Name:	Title:	

Application for a single-use landfarming permit must be accompanied by the plans, specifications and additional information required by the applicable solid waste rules under Iowa Administrative Code 567 Chapter 120.

Send completed applications with attached information to:

Iowa Department of Natural Resources Land Quality Bureau Solid Waste Section 502 E 9<sup>th</sup> St Des Moines, IA 50319-0034

For questions concerning this application please contact the Department at (515) 725-8331.