



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF SOLID WASTE MANAGEMENT
312 Rosa L. Parks Avenue, 14th Floor
Nashville, TN 37243
SOLID WASTE APPLICATION FILING/PROCESSING FEE

1. Facility Information <hr/> Full Legal Name of Facility <hr/> Mailing Address <hr/> City, State, Zip Code	2. Permittee Information <hr/> Permittee (Name/Legal Entity) <hr/> Mailing Address <hr/> City, State, Zip Code <hr/> () Telephone Number of Permittee															
3. Physical Location/Directions to Facility 	4. Type Facility and Fee Due: <input type="checkbox"/> New Disposal Facility* <div style="margin-left: 40px;"> <input type="checkbox"/> Class I <input type="checkbox"/> Class II <input type="checkbox"/> Hydrogeology\$ 4,000 <input type="checkbox"/> Construction Plan Review... 6,000 <input type="checkbox"/> Class III 3,000 <input type="checkbox"/> Major Modification 2,000 <input type="checkbox"/> Processing Facility 1,000 <input type="checkbox"/> Transfer of Ownership..... 1,000 <input type="checkbox"/> Transfer Station 500 </div> *Includes Lateral Expansions															
5. Total Site Acres (If Disposal Operation): <hr/>	6. Amount of Fee Enclosed: <hr/> \$															
7. Total Acres In Landfill Footprint: <hr/>	8. Type and Size Facility If Processing Facility: <hr/>															
9. I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, and accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.																
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <hr/> Print or Type Name </div> <div style="width: 45%;"> <hr/> Title </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <hr/> Signature </div> <div style="width: 45%;"> <hr/> Date </div> </div>																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;">FISCAL SERVICES USE ONLY BELOW THIS LINE</td> <td colspan="2" style="padding: 5px;">ASSIGNED FACILITY ID NUMBER:</td> </tr> <tr> <td style="width: 20%; padding: 5px;">CD Number</td> <td style="width: 20%; padding: 5px;">Date Received</td> <td style="width: 20%; padding: 5px;">Amount</td> <td style="width: 20%; padding: 5px;">Receipt #</td> <td style="width: 20%; padding: 5px;">Comments</td> </tr> <tr> <td style="height: 40px;"></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		FISCAL SERVICES USE ONLY BELOW THIS LINE			ASSIGNED FACILITY ID NUMBER:		CD Number	Date Received	Amount	Receipt #	Comments					
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INSTRUCTIONS FOR APPLICATION FILING/PROCESSING FEE

1. Enter full name of facility, mailing address, and zip code.
2. Enter the permittee's name (person/legal entity to whom permit will be issued), mailing address, zip code, and telephone number complete with area code in this block.
3. Enter the physical location with directions to the proposed facility (not a post office box or mailing address) in this space.
4. Mark the appropriate checkbox to indicate if the application is for a disposal facility, a processing facility, a transfer facility, a major modification, or a transfer of ownership for an existing facility. If the application is for a disposal operation, also mark the appropriate checkbox to indicate the classification of the facility being proposed. For class I and class II facilities, indicate whether the payment is being made for the hydrogeologic report (\$4000.00) or the construction plan review (\$6,000.00). Transfers of ownership apply to all facility types.
5. If this facility is a landfill (any class), enter the number of total permitted site acres, regardless of whether the entire site will be a part of the operational area.
6. Enter the amount of the fee you are enclosing. The correct amount can be determined by referring to item (4) of the form. To the right of the facility type is the amount of the fee due for that type of application (example: a Class III disposal facility has a \$3,000.00 fee).
7. Enter the total area in the landfill footprint here, if applicable.
8. If application is for a processing facility, enter the type and size (example: incinerator--25 tons/day capacity).
9. The owner or an authorized officer of the company must print their name and title before signing and dating the certification.

Note:

Make checks payable to State of Tennessee, Division of Solid Waste Management.

Mail check and the completed form to: State of Tennessee, Department of Environment and Conservation, Division of Fiscal Services – Fee Section – SWM, 312 Rosa L. Parks Avenue, 10th Floor, Nashville, TN 37243.

"TIMELY ACTION" TIMING STARTS WITH THE RECEIPT OF YOUR CHECK AND THE COMPLETED FORM IN THE CENTRAL OFFICE AND THE RECEIPT OF ALL NECESSARY MATERIALS FOR THE REVIEW IN THE FIELD OFFICE.