

APPLICATION FOR A PERMIT TO OPERATE A SEPTAGE DETENTION OR TREATMENT FACILITY

North Carolina Department of Environmental Quality
Division of Waste Management – Solid Waste Section
1646 Mail Service Center, Raleigh, NC 27699-1646

I. Operator and Facility Information

1. Applicant _____
Address _____
Phone _____

2. Contact person for site operation (if different from applicant): _____
Title or position _____ Phone _____
Address _____

3. Landowner _____
Address _____

4. Site Location: County _____ State Road Number _____
Directions to site: _____

5. Is the location on a permitted Septage Land Application Site? _____
If yes, give the site permit number here: _____

6. Indicate whether project is: new _____ renewal _____ modification _____
For a permit renewal or modification, indicate the existing permit number _____ and the permit expiration date _____.

7. Attach written, notarized landowner authorization to operate a septage storage or treatment facility form signed by the landowner (if the permit applicant does not solely own the property). **If a corporation owns the land use a corporate landowner authorization form. If Limited Liability Company owns the land, use a limited liability company landowner authorization form.**

8. Aerial photograph scale 1 inch = 400 feet with site property lines accurately located on the photograph must be enclosed (if 1 inch = 400 feet is not available, 1 inch = 660 feet may be substituted).

9. Vicinity map (county road map showing site location).

10. Land application site or wastewater treatment plant to be used after treatment or storage:

(over)

II. Facility Information: the following information shall be included with the application form.

1. Facility to be used for: Storage _____ Treatment _____
2. Types of septage to be stored or treated:
Domestic Septage _____ Grease Trap Pumpings _____
Portable Toilet Waste _____ Commercial/Industrial Septage _____
3. Types of treatment to be provided: pH Adjustment (lime stabilization) _____
Screening _____ Other _____ (attach explanation if other)
4. A description of the proposed detention or treatment facility including the size, type, and number of structures to be used and how those structures will be constructed or installed (use additional paper to explain, if necessary): _____

5. An explanation of how septage will be discharged into and removed from the facility (**use additional paper to explain, if necessary**): _____

6. An explanation of how any leaks or spills at the facility will be cleaned and how odors will be controlled (**use additional paper to explain, if necessary**): _____

III. Certification

I hereby certify that:

1. The information provided on this application is true, complete, and correct to the best of my knowledge, and
2. I have read and understand the N.C. Septage Management Rules.
3. I am aware of the potential consequences, including penalties and permit revocation, for failing to follow all applicable rules and the conditions of a Septage Detention or Treatment Facility permit.

Signature *(Signature of company official required)*

Date

Print name

Title

Note: This application will not be accepted for review until all parts of the application are complete.