

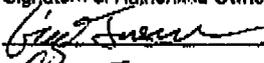
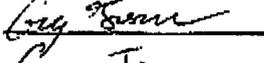
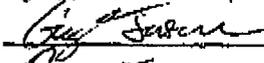
Utah Class I and V Landfill Permit Application Form

5W127
Division of
Solid and Hazardous Waste

AUG 12 2014
2014-010759

Part I General Information APPLICANT: PLEASE COMPLETE ALL SECTIONS.										
I. Landfill Type		<input checked="" type="checkbox"/> Class I <input type="checkbox"/> Class V		II. Application Type			<input type="checkbox"/> New Application <input checked="" type="checkbox"/> Renewal Application		<input type="checkbox"/> Facility Expansion <input type="checkbox"/> Modification	
For Renewal Applications, Facility Expansion Applications and Modifications Enter Current Permit Number <u>9516</u>										
III. Facility Name and Location										
Legal Name of Facility Uintah County Municipal Landfill										
Site Address (street or directions to site) 2801 East 500 North							County Uintah County			
City Vernal			State UT		Zip Code 84078		Telephone (435)789-6018			
Township 4 S		Range 22 E		Section(s) 17		Quarter/Quarter Section SE		Quarter Section SW		
Main Gate Latitude degrees 40 minutes 27 seconds 54				Longitude degrees 109 minutes 28 seconds 20						
IV. Facility Owner(s) Information										
Legal Name of Facility Owner Uintah County										
Address (mailing) 152 East 100 N										
City Vernal			State UT		Zip Code 84078		Telephone (435)789-6018			
V. Facility Operator(s) Information										
Legal Name of Facility Operator SAME										
Address (mailing)										
City			State		Zip Code		Telephone			
VI. Property Owner(s) Information										
Legal Name of Property Owner SAME										
Address (mailing)										
City			State		Zip Code		Telephone			
VII. Contact Information										
Owner Contact Greg Jensen					Title Landfill Supervisor					
Address (mailing) 152 East 100 N										
City Vernal			State UT		Zip Code 84078		Telephone (435)789-6018			
Email Address gjensen@co.uintah.ut.us					Alternative Telephone (cell or other)					
Operator Contact SAME					Title					
Address (mailing)										
City			State		Zip Code		Telephone			
Email Address					Alternative Telephone (cell or other)					
Property Owner Contact SAME					Title					
Address (mailing)										
City			State		Zip Code		Telephone			
Email Address					Alternative Telephone (cell or other)					

Utah Class I and V Landfill Permit Application Form

Part I General Information (Continued)																														
VII. Waste Types (check all that apply)		IX. Facility Area																												
<input type="checkbox"/> All non-hazardous solid waste (see R315-315-7(3) for PCB special requirements) OR the following specific waste types: <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Waste Type</td> <td style="width: 30%;">Combined Disposal Unit</td> <td style="width: 30%;">Monofill Unit</td> </tr> <tr> <td><input checked="" type="checkbox"/> Municipal Waste</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> Construction & Demolition</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> Industrial</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Incinerator Ash</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> Animals</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> Asbestos</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> PCB's (R315-315-7(3) only)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Waste Type	Combined Disposal Unit	Monofill Unit	<input checked="" type="checkbox"/> Municipal Waste	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Construction & Demolition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Industrial	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> Incinerator Ash	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Animals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> PCB's (R315-315-7(3) only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	Facility Area..... <u>200</u> acres Disposal Area..... <u>200</u> acres Design Capacity Years..... <u>10</u> Cubic Yards..... <u>1100000</u> Tons..... <u>550000</u>	
Waste Type	Combined Disposal Unit	Monofill Unit																												
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X. Fee and Application Documents																														
Indicate Documents Attached To This Application <input checked="" type="checkbox"/> Facility Map or Maps <input checked="" type="checkbox"/> Facility Legal Description <input checked="" type="checkbox"/> Ground Water Report <input checked="" type="checkbox"/> Closure Design		<input checked="" type="checkbox"/> Application Fee: Amount \$NA <input checked="" type="checkbox"/> Plan of Operation <input checked="" type="checkbox"/> Waste Description <input checked="" type="checkbox"/> Cost Estimates <input checked="" type="checkbox"/> Financial Assurance																												
<input type="checkbox"/> Class V Special Requirements Documents required by UCA 19-6-108(9) and (10)																														
I HEREBY CERTIFY THAT THIS INFORMATION AND ALL ATTACHED PAGES ARE CORRECT AND COMPLETE																														
Signature of Authorized Owner Representative  _____ Name typed or printed Greg Jensen		Title Landfill Manager	Date August 11, 2014																											
Signature of Authorized Land Owner Representative (If applicable)  _____ Name typed or printed Greg Jensen		Address 152 East Main Vernal UT 84078																												
Signature of Authorized Operator Representative (If applicable)  _____ Name typed or printed Greg Jensen		Title Date Address 																												

Division of
Solid and Hazardous Waste

AUG 12 2014

2014-010759

**UINTAH COUNTY MUNICIPAL
CLASS I LANDFILL
PERMIT APPLICATION**

Prepared for:

UINTAH COUNTY

152 East 100 North
Vernal, Utah 84078

Prepared by:

ADVANCED ENVIRONMENTAL ENGINEERING, INC.

1975 North Main, Suite #3
Layton, Utah 84041

August 2014