

PERMIT NO. _____

JOHNSON COUNTY, KANSAS
ENVIRONMENTAL DEPARTMENT

PERMIT APPLICATION
FOR
OPERATION OF A SANITARY LANDFILL AND/OR WASTE PROCESSING FACILITY

1. Applicant's Name _____

Mailing Address _____

(Street or Rural Route)

(City & State)

(ZIP)

Telephone _____

2. Type of site(s) applied for:

Sanitary Landfill _____

Recycling Facility _____

Composting Site _____

Other _____

If other, explain _____

3. Legal Description of each site:

Sanitary Landfill _____

Recycling Facility _____

Composting Site _____

4. Total site area (acres) _____ Area to be used for disposal (acres) _____

Area dedicated to waste processing:

Recycling (acres) _____ Composting (acres) _____

5. Provide Plan Drawings of Site(s) (attach)

6. Site(s) owned by applicant _____ Site(s) leased by applicant _____

If site is leased, please fill in the following information:

Owner of Record _____

Address _____

(City)

(State)

(ZIP)

Lease negotiated (date) _____ Duration of lease _____

7. Is the site an existing disposal/waste processing site? _____

Is the site a proposed new site? _____

8. Land characteristics (general description)

9. Estimate site acreage dedicated to other uses:

Heavily wooded	_____	Buffer/Screening Zones	_____
Light brush	_____	Rock Quarry Operations	_____
Light Industrial	_____		

10. If sufficient cover material is not available at the disposal site, where will it be obtained?

What kind of cover material is on-site?

Stockpile quantities and method for winter and wet weather use:

11. Are the sites properly zoned for landfilling and/or waste processing operations?

Yes____, please attach copy of conditional use permit

No _____, explain_____

12. Access roads serving the site(s):

a. City	_____	d. State	_____
b. Township	_____	e. Interstate	_____
c. County	_____	f. Other (explain)	_____

13. Types of road surface serving the site(s):

a. Concrete	_____	e. Gravel	_____
b. Asphalt	_____	f. Crushed stone	_____
c. Seal Coat	_____	g. Dirt	_____
d. Soil Cement	_____	h. Other	_____

14. Utilities (state whether on-site or nearby and Company supplying)

a. Water (describe) _____

(If a private well is to be constructed on site, then the work must be done by a licensed water well contractor.)

b. Electricity _____

c. Telephone _____

d. Sanitary Sewers _____

e. Non-Overflowing Waste Stabilization Pond _____

f. Privies _____

15. On-site improvements (employee and equipment, buildings, fencing, and sight screening - describe):

16. Type of Landfill Operation

a. Trench _____ b. Cut and Cover _____

c. Area _____ d. Ramp _____

e. Other or combination _____

(attach detailed recommendations)

17. Hours of Operation and Fees (attach fee schedule shown at scale on gate)

DAYS/HOURS

Sanitary Landfill _____

Recycling Facility _____

Composting Site _____

18. Any exclusions to area haulers or private persons at any of the sites?

Yes _____ No _____

19. Restrictions

a. Types of solid wastes, recyclables or compostables accepted:

Residential	_____	Industrial	_____
Commercial	_____	Demolition	_____
Agricultural	_____	Other	_____

b. Materials excluded from disposal site:

All Putrescibles	_____	Junked Automobiles	_____
All Noncombustibles	_____	Large Appliances	_____
All Combustibles	_____	Demolition Wastes	_____
Garbage	_____	Construction Debris	_____
Dead Animals	_____	Street Sweepings	_____
Waste Oil	_____	Whole Tires	_____
Sewage Solids	_____	Hazardous Waste	_____

Other (specify) _____

20. Employees and Equipment

a. Number of employees on site(s) (average daily)

Disposal area _____

Recycling center _____

Composting site _____

b. Equipment on each site (attach equipment list by area):

21. Fire Protection Available

a. Earth cover _____

b. Water _____

c. Firebreak _____

d. Municipal fire protection (specify) _____

22. Insurance (Attach Certificate of Insurance)
- a. Type of Insurance _____
 - b. Carrier _____
 - c. Amount of coverage _____
23. Estimated Tonnage or Yardage of Material Entering Each Area Daily
- a. Landfill _____
 - b. Recycling Center _____
 - c. Composting Site _____
24. Estimated Capacity of Disposal Site
- a. In cubic yards _____
 - b. In years _____
25. Maximum Elevations of Disposal Site (show finished contours on plan)
- a. Natural elevation of site before landfill operation

 - b. Man-made elevation of site after landfill closure

 - c. Maximum elevation of adjacent off-site man-made or natural features

26. Minimum Setbacks of Disposal Site (show finished setbacks on plan)
- a. Finished setbacks _____

 - b. Working setbacks (if different from above) _____

Current License Fee Enclosed \$ _____

Application Period _____ to _____

Signature of Applicant

Title

Organization

Date

APPLICANT WILL NOT WRITE BELOW THIS LINE

Review by Johnson County Environmental Director

Approved _____ Disapproved _____

Comments _____

Signature of Environmental Director

Date