



west virginia department of environmental protection

Division of Water and Waste Management
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Harold D. Ward, Cabinet Secretary
dep.wv.gov

Revised February 8, 2021

APPLICATION FOR OPERATOR ASSIGNMENT OR REASSIGNMENT

A permittee/owner, who wishes to assign the operation of the facility to an operator for the first time, or reassign the operation of the solid waste facility through an agreement, contract, or other legal instrument to another party but retain the permit, must request and receive prior written approval using forms prescribed by the Secretary.

If there are any questions regarding the proper procedure for completing the information required by this application, contact the Solid Waste Management Unit at (304) 926-0499.

I. The following information must be submitted with this application. This application will not be approved until the following information is received.

- A. An amended Certificate of Need (CON) from the Public Service Commission of West Virginia.
- B. A completed copy of the proposed operator's background investigation disclosure statement(s), as required by 33CSR1 Subsection 3.14..
- C. Bonding and financial assurance, as required by 33CSR1 "Solid Waste Management Rule" Section 3.13..

II. Permit Information

- A. Permit Number: _____
- B. Date Issued: _____
- C. Date of Expiration: _____

III. General Site Information

- A. Name of Solid Waste Facility:

- B. Address of the Facility: _____

- C. Telephone Number of the Facility: _____
- D. County: _____
- E. District: _____
- F. Nearest Post Office: _____
- G. Latitude and Longitude of the Center of the Site:
1. Latitude: _____
2. Longitude: _____
- H. Number of site acres:
1. Permitted Area: _____
2. Disposal Area: _____
- I. Description of the location of the site:

- J. Include a location map (either general highway county map(s) or USGS map(s) with the application.
1. Include a map with a minimum size of two (2) inches by two (2) inches (suggested size 4" x 4").
2. Indicate on the map the center of the site with cross hairs.
3. Include on the map the latitude and longitude of the center of the site.
4. Include a north arrow.
5. Include information pertinent to the identity (name) of the highway map utilized or the quad name(s) and date(s) of last revision.
6. Indicate the scale of the map.

IV. Current Permittee

- A. Current Permittee: _____
- B. Contact Person: _____
- C. Address: _____

- D. Telephone Number: _____

V. To assign the Permit to an Operator different from the permittee:

If the permittee is submitting this application to assign the operation of the facility to an operator for the first time, please complete the following for the proposed operator.

- A. Company Name: _____
- B. Contact Person: _____
- C. Address: _____

- D. Telephone Number: _____

Attach two (2) copies of the enabling instruments, such as the permittee's agreement or contract, to support the proposed operator.

VI. To reassign the permit to an operator different from the current operator

If the permittee is submitting this application to reassign the operation of the facility to another operator, please complete the following for the proposed operator.

- A. Company Name: _____
- B. Contact Person: _____
- C. Address: _____

- D. Telephone Number: _____

Attach two (2) copies of the enabling instruments that have, or will, terminate the permittee's agreement or contract with the current operator.

CERTIFICATION

Owner/ Permittee Signature

I, _____, having been duly sworn, depose and attest that all the representations contained in the foregoing application are true to the best of my knowledge, that I am the principal executive officer of the owner and the permittee, and that this application assigns or reassigns the solid waste facility operating rights only.

Signed: _____

STATE OF WEST VIRGINIA

COUNTY OF: _____

Taken, subscribed and sworn to before me the undersigned authority in my said county this _____ day of _____, 20 _____.

My Commission Expires _____

Notary Public

STAMP OR SEAL

CERTIFICATION

Proposed Operator Signature

I, _____, having been duly sworn, depose and attest that I am the principal executive officer of the operator and that this application is being executed with my consent. All of the representations contained in the foregoing application are true to the best of my knowledge, and that this application has been executed by the persons required by law.

Signed: _____

STATE OF WEST VIRGINIA

COUNTY OF: _____

Taken, subscribed and sworn to before me the undersigned authority in my said county this _____ day of _____, 20 _____.

My Commission Expires _____

Notary Public

STAMP OR SEAL

We will process your personal information (email address, mailing address and/or telephone number) in accordance with the State of West Virginia's Privacy Policy for appropriate and customary business purposes. Your personal information may be disclosed to other state agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. The Division of Water and Waste Management will appropriately secure your personal information. If you have any questions about our use of your personal information, please contact the DEP's Chief Privacy officer at depprivacyofficer@wv.gov.