

west virginia department of environmental protection

Division of Water and Waste Management 601 57th St. SE Charleston, WV 25304 Phone: (304) 926-0499 Fax: (304) 926-0465 Harold D. Ward, Cabinet Secretary dep.wv.gov

**Revised February 01, 2021** 

# SOLID WASTE ASSESSMENT FEE EXEMPTION APPLICATION

Persons applying for a Solid Waste Assessment Fee Exemption shall complete this application and resubmit one (1) copy of the completed application to:

WV Department of Environmental Protection Division of Water and Waste Management Solid Waste Management 601 57<sup>th</sup> Street SE Charleston, WV 25304

<u>NOTE:</u> This exemption request must be signed and submitted by the solid waste facility that will receive the waste.

THE SOLID WASTE FACILITY that has agreed to accept the waste:

Name of Facility:		
Address:		
Permit Number:	 	
Contact Person:		
Telephone:	 	

### **PROJECT COORDINATOR:**

Name:		
Address:		
Telephone:		

**NAME OF PROJECT** and brief description of the type and estimated amount of waste (in tons):

### **PROJECT DATES:**

Beginning Date:	
Ending Date:	

### **TYPE OF PROJECT:**

PPOD/Open Dump Reclamation
Adopt-A-Highway Program
County Sponsored Clean-up Project
City of Community Sponsored Clean-up Project
Solid Waste Authority Sponsored Clean-up Project
Adopt-A-Dump Program
Other (Please Describe)

# CERTIFICATION

I, \_\_\_\_\_, certify under penalty of law that (Print Name of Applicant)

this exemption application and all attachments were prepared under my direction or supervision and that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of revocation of registration, fine and/or enforcement action for knowing violations.

(Signature of Owner/Applicant)

(Date)

STATE OF WEST VIRGINIA COUNTY OF: \_\_\_\_\_

Taken, subscribed and sworn to before me, a Notary Public in and for the County and State aforesaid 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 <u>depprivatcyofficer@wv.gov</u>.