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**SKYLINE LANDFILL
CITY OF FERRIS
DALLAS AND ELLIS COUNTIES, TEXAS
TCEQ PERMIT APPLICATION NO. MSW 42D**

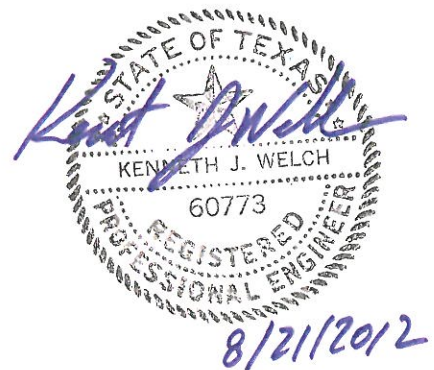
PERMIT AMENDMENT APPLICATION

Prepared for

Waste Management of Texas, Inc.

April 2012

Revised August 2012



Prepared by

BIGGS & MATHEWS ENVIRONMENTAL

1700 Robert Road, Suite 100 ♦ Mansfield, Texas 76063 ♦ 817-563-1144

TEXAS BOARD OF PROFESSIONAL ENGINEERS
FIRM REGISTRATION NO. F-256

TEXAS BOARD OF PROFESSIONAL GEOSCIENTISTS
FIRM REGISTRATION NO. 50222

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DALLAS AND ELLIS COUNTIES, TEXAS
TCEQ PERMIT APPLICATION NO. MSW 42D**

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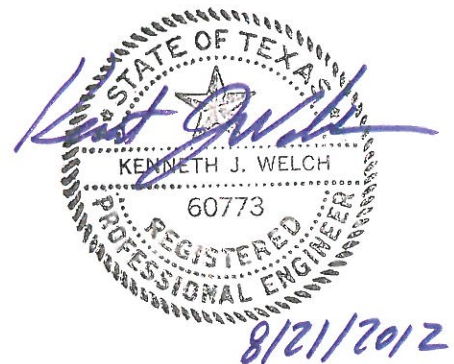
VOLUME 1 OF 5

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PERMIT AMENDMENT APPLICATION

VOLUME 1 OF 5

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SKYLINE LANDFILL
 Dallas and Ellis Counties, Texas
 TCEQ Permit Application No. MSW 42D
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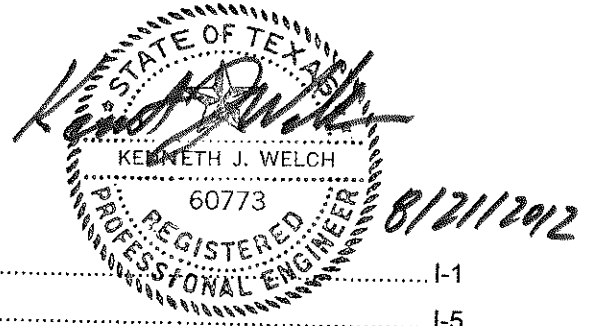
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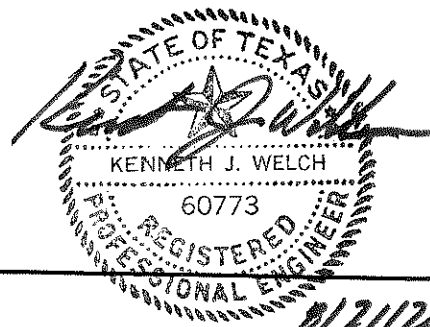
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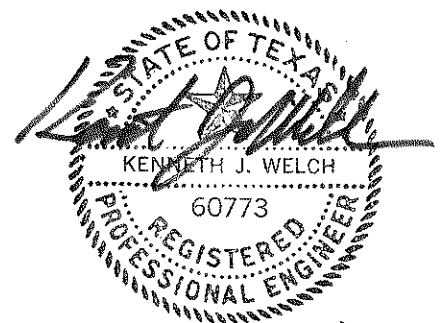
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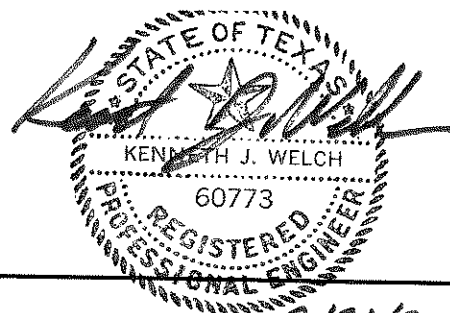
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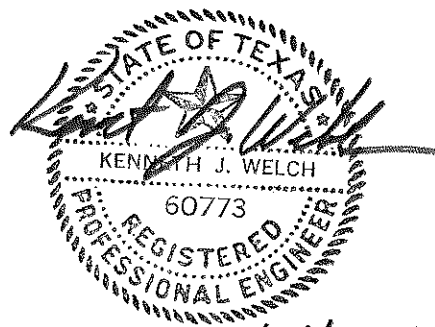
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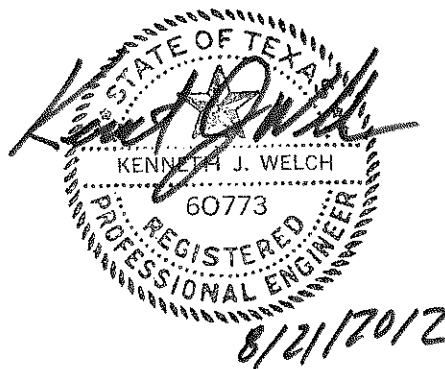
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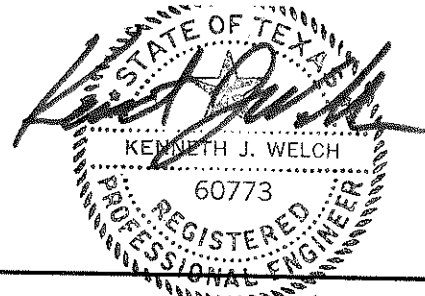
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Texas Commission on Environmental Quality

Permit or Registration Application for Municipal Solid Waste Facility

Part I

A. General Information

Facility Name:	Skyline Landfill			
Physical or Street Address (if available):	1201 North Central St			
(City) (County)(State)(Zip Code):	Ferris	Ellis	TX	75125-2101
(Area Code) Telephone Number:	972-842-5710			
Charter Number:	22300000			

If the application is submitted on behalf of a corporation, provide the Charter Number as recorded with the Office of the Secretary of State for Texas.

Operator Name ¹ :	Waste Management of Texas, Inc.			
Mailing Address:	1201 North Central St			
(City) (County)(State)(Zip Code):	Ferris	Ellis	TX	75125-2101
(Area Code) Telephone Number:	972-842-5710			
(Area Code) FAX Number:	942-842-5873 972-842-5873			
Charter Number:	22300000			

If the permittee is the same as the operator, type "Same as Operator".

Permittee Name:	Same as Operator			
Physical or Street Address (if available):				
(City) (County)(State)(Zip Code):				
(Area Code) Telephone Number:				
Charter Number:				

If the application is submitted by a corporation or by a person residing out of state, the applicant must register an Agent in Service or Agent of Service with the Texas Secretary of State's office and provide a complete mailing address for the agent. The agent must be a Texas resident.

Agent Name:	Steve Jacobs			
Mailing Address:	9708 Giles Rd.			
(City) (County)(State)(Zip Code):	Austin	Travis	TX	78754
(Area Code) Telephone Number:	512-272-6245			
(Area Code) FAX Number:	512-272-6289			

Application Type:

<input checked="" type="checkbox"/> Permit	<input checked="" type="checkbox"/> Major Amendment	<input type="checkbox"/> Minor Amendment
<input type="checkbox"/> Registration	<input type="checkbox"/> Modification	<input type="checkbox"/> Temporary Authorization
	<input checked="" type="checkbox"/> w/Public Notice	
	<input type="checkbox"/> w/out Public Notice	<input type="checkbox"/> Notice of Deficiency Response

¹ The operator has the duty to submit an application if the facility is owned by one person and operated by another [30 TAC 305.43(b)]. The permit will specify the operator and the owner who is listed on this application [Section 361.087 Texas Health and Safety Code].

Facility Classification:

<input checked="" type="checkbox"/> Type I	<input type="checkbox"/> Type IV	<input type="checkbox"/> Type V	<input type="checkbox"/> Type IX
<input type="checkbox"/> Type I AE	<input type="checkbox"/> Type IV AE	<input type="checkbox"/> Type VI	

Activities covered by this application (check all that apply):

<input checked="" type="checkbox"/> Storage	<input checked="" type="checkbox"/> Processing	<input checked="" type="checkbox"/> Disposal
---	--	--

Waste management units covered by this application (check all that apply):

<input type="checkbox"/> Containers	<input type="checkbox"/> Tanks	<input type="checkbox"/> Surface Impoundments	<input checked="" type="checkbox"/> Landfills
<input type="checkbox"/> Incinerators	<input type="checkbox"/> Composting	<input type="checkbox"/> Type IV Demonstration Unit	<input type="checkbox"/> Type IX Energy/ Material Recovery
<input checked="" type="checkbox"/> Other (Specify)	<u>Citizen's Convenience Center</u>	<input checked="" type="checkbox"/> Other (Specify)	<u>Leachate Storage Facility</u>
<input checked="" type="checkbox"/> Other (Specify)	<u>Mud Grate Facility</u>	<input checked="" type="checkbox"/> Other (Specify)	<u>Large Item Storage Area</u>
<input checked="" type="checkbox"/> Other (Specify)	<u>Construction & Demolition Recycling & Re-use Area</u>	<input checked="" type="checkbox"/> Other (Specify)	<u>Liquid Stabilization Area</u>
<input checked="" type="checkbox"/> Other (Specify)	<u>Bioremediation Treatment Pad</u>		

Is this submittal part of a Consolidated Permit Processing request, in accordance with 30 TAC Chapter 33?

Yes No

If yes, state the other TCEQ program authorizations requested.

Provide a brief description of the portion of the facility covered by this application. For amendments, modifications, and temporary authorizations, provide a brief description of the exact changes to the permit or registration conditions and supporting documents referenced by the permit or registration. Also, provide an explanation of why the amendment, modification, or temporary authorization is requested.

Permit amendment application for a horizontal expansion at the existing Skyline Landfill to provide long-term waste disposal capacity for the individuals, businesses, and communities in Dallas and Ellis counties in Texas and other surrounding areas.

Does the application contain confidential Material? Yes No

If yes, cross-reference the confidential material *throughout the application* and submit as a separate document or binder conspicuously marked "CONFIDENTIAL."

Alternative Language Notice Instructions

For certain permit applications, public notice in an alternate language is required. If an elementary school or middle school nearest to the facility offers a bilingual program, notice may be required to be published in an alternative language. The Texas Education Code, upon which the TCEQ alternative language notice requirements are based, trigger a bilingual education program to apply to an entire school district should the requisite alternative language speaking student population exist. However, there may not exist any bilingual students at a particular school within a district which is required to offer the bilingual education program. For this reason, the requirement to publish notice in an alternative language is triggered if the nearest elementary or middle school, as a part of a larger school district, is required to make a bilingual education program available to qualifying students and either the school has students enrolled at such a program on-site, or has students who attend such a program at another location in satisfaction of the school's obligation to provide such a program as a member of a triggered district.

If it is determined that an alternative language notice is required, the applicant is responsible for ensuring that the publication in the alternate language is complete and accurate in that language. Electronic versions of the Spanish template examples are available from the TCEQ to help the applicant complete the publication in the alternative language.

Alternative Language Notice Application Form:

Alternative language notice confirmation for this application:

1. Is a bilingual program required by the Texas Education Code in the school district where the facility is located? YES NO

(If NO, alternative language notice publication not required)

2. If YES to question 1, are students enrolled in a bilingual education program at either the elementary school or the middle school nearest to the facility? YES NO

(If YES to questions 1 and 2, alternative language publication is required; If NO to question 2, then consider the next question)

3. If YES to question 1, are there students enrolled at either the elementary school or the middle school nearest to the facility who attend a bilingual education program at another location? YES NO

(If Yes to questions 1 and 3, alternative language publication is required; If NO to question 3, then consider the next question)

4. If YES to question 1, would either the elementary school or the middle school nearest to the facility be required to provide a bilingual education program but for the fact that it secured a waiver from this requirement, as available under 19 TAC '89.1205(g)? YES NO

(If Yes to questions 1 and 4, alternative language publication is required; If NO to question 4, alternative language notice publication not required)

If a bilingual education program(s) is provided by either the elementary school or the middle school nearest to the facility, which language(s) is required by the bilingual program? Spanish

Note: Applicants for new permits and major amendments must make a copy of the administratively complete application available at a public place in the county where the facility is, or will be, located for review and copying by the public.

Public place where administratively complete permit application will be located.				
Public Place (e.g., public library, county court house, city hall, etc.):	Ferris Public Library			
Mailing Address:	301 E 10 th St			
(City) (County)(State)(Zip Code):	Ferris	Ellis	TX	75125
(Area Code) Telephone Number:	972-544-3696			

B. Facility Location

Local Government Jurisdiction:	Ellis and Dallas County
Except for Type I AE and Type IV AE landfill facilities, for permits, registrations, amendments, and modifications requiring public notice, provide the URL address of a publicly accessible internet web site where the application and all revisions to that application will be posted.	
http://www.wm.com/wm/texas/permits.asp	
Within City Limits of:	Ferris
Within Extraterritorial Jurisdiction of City of:	N/A
Is the proposed municipal or industrial solid waste disposal or processing facility located in an area in which the governing body of the municipality or county has prohibited the disposal or processing of municipal or industrial solid waste? (If YES, provide a copy of the ordinance or order):	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

Provide a description of the location of the facility with respect to known or easily identifiable landmarks.
<u>The facility is located approximately 0.3 miles west of IH-45 in Dallas and Ellis Counties; approximately one mile south of the Malloy Bridge Road and IH-45 Business South/N Central Street intersection on the west side of N. Central St on the north side of the city of Ferris.</u>

Detail the access routes from the nearest United States or state highway to the facility.
<u>From IH-45: South approximately one mile from the Malloy Bridge Road intersection to the site entrance on the west side of IH-45 Business South/N Central Street. From Ferris: North on S Central Street approximately one mile from the E 5th Street intersection to the site entrance on the west side of N. Central Street. Exit at N. Central St from I-45.</u>

Provide the latitudinal and longitudinal geographic coordinates of the facility.	
Latitude	N 32°32'48.0
Longitude	W 96°39'57.4"
Elevation (above msl)	438.58 feet

Is the facility within the Coastal Management Program boundary?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---

Texas Department of Transportation District Location:				
TXDOT District Name & Number:	Dallas District			
District Engineer's Name:	Bill Hale, P.E., District Engineer			
Street or P. O. Box:	P.O. Box 133067			
(City) (County)(State)(Zip Code):	Dallas	Dallas	TX	75313-3067
(Area Code) Telephone Number:	214-320-6100			
(Area Code) FAX Number:	214-320-4488			

The local governmental authority or agency responsible for road maintenance:				
Agency Name	TxDOT Dallas District			
Contact Person's Name:	Bill Hale, P.E., District Engineer			
Street or P. O. Box:	P.O. Box 133067			
(City) (County)(State)(Zip Code):	Dallas	Dallas	TX	75313-3067
(Area Code) Telephone Number:	214-320-6100			
(Area Code) FAX Number:	214-320-4488			

State Representative:				
District Number:	District 10			
State Representative's Name:	The Honorable Jim Pitts			
District Office Address:	310 West Jefferson, Suite 1			
(City) (County)(State)(Zip Code):	Waxahachie	Ellis	TX	75165
(Area Code) Telephone Number:	972-938-9392			
(Area Code) FAX Number:	972-937-2842			

State Representative:

District Number:	District 109			
State Representative's Name:	The Honorable Helen Giddings			
District Office Address:	1510 N. Hampton Rd., Suite 340			
(City) (County)(State)(Zip Code):	DeSoto	Dallas	TX	75115
(Area Code) Telephone Number:	972-224-6795			

State Senator:

District Number:	District 22			
State Senator's Name:	The Honorable Brian Birdwell			
District Office Address:	900 Austin Ave., Suite 500			
(City) (County)(State)(Zip Code):	Waco	McLennan	TX	76701
(Area Code) Telephone Number:	254-772-6225			

Local Government Official - City:

Name:	The Honorable Rick Barrett			
Title:	Mayor, City of Ferris			
Address:	100 Town Plaza			
(City) (County)(State)(Zip Code):	Ferris	Ellis	TX	75125
(Area Code) Telephone Number:	972-544-2110			

Local Government Official – City Health:

There is no health authority or health department for the City of Ferris.

Local Government Official – Ellis County:

Name:	The Honorable Carol Bush			
Title:	Ellis County Judge			
Address:	101 West Main Street			
(City) (County)(State)(Zip Code):	Waxahachie	Ellis	TX	75165-0405
(Area Code) Telephone Number:	972-825-5011			

Local Government Official – Ellis County:

~~There is no health authority or health department for Ellis County.~~

Name:	Dr. Leigh Nordstrom			
Title:	Health Officer			
Address:	1441 S. Midlothian Pkwy, Suite 100			
(City) (County)(State)(Zip Code):	Midlothian	Ellis	TX	76065
(Area Code) Telephone Number:	972-723-1474			

Local Government Official – Dallas County:

Name:	The Honorable Clay Jenkins			
Title:	Dallas County Judge			
Address:	411 Elm Street			
(City) (County)(State)(Zip Code):	Dallas	Dallas	TX	75202
(Area Code) Telephone Number:	214-653-7949			

Local Government Official – Dallas County Health:

Name:	Zachary S. Thompson			
Title:	Director, Dallas County Health and Human Services			
Address:	2377 N. Stemmons Fwy			
(City) (County)(State)(Zip Code):	Dallas	Dallas	TX	75207
(Area Code) Telephone Number:	214-819-2000			

Permits, Registrations or Other Authorizations:

The following are active for the Skyline Landfill:

Program	ID Type	ID Number
Air Account Number	Account Number	ED0240J
Air New Source Permits	AFS Num	4813900061
Air New Source Permits	Registration	42830
Air New Source Permits	Registration	78422
Air New Source Permits	Registration	78639
<u>Air New Source Permits</u>	<u>Registration</u>	<u>25101</u>
Air Operating Permits	Account Number	ED0240J
Air Operating Permits	Permit	1485
Municipal Solid Waste Processing	Registration	48018
Petroleum Storage Tank Registration	Registration	50511
Stormwater	Permit	TXR05U147
<u>Sludge Registration</u>	<u>Registration</u>	<u>710865</u>
<u>U.S. Army Corps of Engineers, Section 404 Individual Permit</u>	<u>Permit</u>	<u>SWF-2009-00371</u>
<u>U.S. Army Corps of Engineers, Nationwide Permit 39</u>	<u>Permit</u>	<u>SWF-2009-00138</u>
<u>City of Ferris Floodplain Administrator – Placement of fill in the 100-Year Floodplain</u>	<u>N/A</u>	<u>N/A</u>

Signature Page

I, Steve Jacobs
(Operator)

Director of Disposal Operations
(Title)

certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: [Handwritten Signature]

Date: August 21, 2012

TO BE COMPLETED BY THE OPERATOR IF THE APPLICATION IS SIGNED BY AN AUTHORIZED REPRESENTATIVE FOR THE OPERATOR

I, _____, hereby designate _____
(Print or Type Operator Name) (Print or Type Representative Name)

as my representative and hereby authorize said representative to sign any application, submit additional information as may be requested by the Commission; and/or appear for me at any hearing or before the Texas Commission on Environmental Quality in conjunction with this request for a Texas Water Code or Texas Solid Waste Disposal Act permit. I further understand that I am responsible for the contents of this application, for oral statements given by my authorized representative in support of the application, and for compliance with the terms and conditions of any permit which might be issued based upon this application.

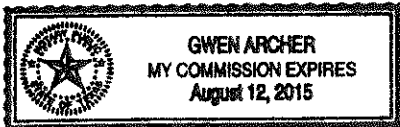
Not applicable
Printed or Typed Name of Operator or Principal Executive Officer

Not applicable when the owner and operator are the same entity.
Signature

SUBSCRIBED AND SWORN to before me by the said Steve Jacobs

On this 21ST day of AUGUST, 2012

My commission expires on the 12TH day of AUGUST, 2015



[Handwritten Signature]
Notary Public in and for
TARRANT County, Texas

(Note: Application Must Bear Signature & Seal of Notary Public)