



STATE OF TENNESSEE
DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF SOLID WASTE MANAGEMENT
WILLIAM R. SNODGRASS TENNESSEE TOWER
312 ROSA L. PARKS AVENUE, 14TH FLOOR
NASHVILLE, TN 37243

SOLID WASTE PERMIT BY RULE NOTIFICATION

1. TYPE OF PERMIT- BY- RULE REQUESTED			ID# TDEC USE ONLY	
<input type="checkbox"/> COMPOST FACILITY	<input type="checkbox"/> LAND APPLICATION	<input type="checkbox"/> TIRE STORAGE FACILITY		
<input checked="" type="checkbox"/> CONVENIENCE CENTER	<input type="checkbox"/> PROCESSING FACILITY	<input type="checkbox"/> TRANSFER STATION		
2. FACILITY INFORMATION			FACILITY LOCATION COUNTY	
FULL LEGAL NAME OF FACILITY			MACON	
MACON COUNTY SOLID WASTE WESTSIDE CONVENIENCE CENTER			LATITUDE (DECIMAL DEGREES)	
PHYSICAL LOCATION OR ADDRESS OF FACILITY			36.5389	
CITY			LONGITUDE (DECIMAL DEGREES)	
10860 HIGHWAY 52 BYPASS WEST WESTMORELAND TN 37186			-86.1984	
FACILITY MAILING ADDRESS			FACILITY EMAIL	
10860 HIGHWAY 52 BYPASS WEST WESTMORELAND TN 37186			mcsw@nctc.com	
FACILITY MANAGER OR SITE OPERATOR		PHONE (WITH AREA CODE)	AFFILIATION OF SITE OPERATOR (IF DIFFERENT FROM PERMITTEE)	
DEBBIE RICHARDSON		(615) 699-3707		
3. APPLICANT (PERMITTEE)				
APPLICANT NAME		PHONE (WITH AREA CODE)	EMAIL	
MACON COUNTY		(615) 666-2363		
RESPONSIBLE OFFICIAL / TITLE		PHONE (WITH AREA CODE)	EMAIL	
STEVE JONES, MAYOR		(615) 666-2363	sjonesmayor@macontn.org	
RESPONSIBLE OFFICIAL MAILING ADDRESS		CITY	STATE	ZIP
201 COURTHOUSE VIEW ST. ROOM 201 LAFAYETTE		TN		37083
LANDOWNER NAME	LANDOWNER MAILING ADDRESS	CITY	STATE	ZIP
MACON COUNTY	201 COURTHOUSE VIEW ST. LAFAYETTE			TN 37083
→		→	→	→
LANDOWNER SIGNATURE		LANDOWNER SIGNATURE	LANDOWNER SIGNATURE	DATE
				10-31-18
4. WASTE HANDLING				
DESCRIPTION OF ACTIVITIES AND WASTES HANDLED OR PROCESSED		AMOUNT OF WASTE HANDLED, PROCESSED OR STORED		
COLLECTION OF CLASS 1 AND CLASS 3-4 RESIDENTIAL TYPES OF MSW.		27.00		
		WEIGHT TONS / DAY	VOLUME YARDS / DAY	STORAGE MAX CU YARDS
5. CERTIFICATION REQUIRED				
I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information 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 fine and imprisonment. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.				
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SIGNATURE OF RESPONSIBLE OFFICIAL		PRINTED NAME		
Steve Jones		Steve Jones		
MAYOR		DATE		
TITLE		10-31-18		
→		→		
SIGNATURE OF NOTARY		DATE COMMISSION EXPIRES		
Alecia King		June 1, 2019		
TITLE				