Agency of Natural Resources Solid Waste Management Program 1 National Life Dr – Davis 1, Montpelier VT 05620-3704

MEDIUM SCALE CATEGORICAL COMPOSTING FACILITY APPLICATION FORM

October 8, 2013

Please print the information in items 1-7 below

1. Facility, Facility Owner and Operator Information

A.	Facility Name:	
	Facility 911	
	Address:	
	Telephone:	
B.	Facility Landowner:	
	Signature:	
	Mailing Address:	
	Email:	
	Telephone:	
C.	Facility Operator:	
	Signature:	
	Mailing Address:	
	Email:	
	Telephone:	

2. Types and Amounts of materials to be composted

Type of Material	Annual Amount (cubic yards)

3. Siting and Prohibited Areas

Is the compost management area or leachate and run-off treatment area located:		
	Yes	No
A. In the 100 year flood plain as shown on National		
Flood Insurance Maps?		
B. In a Class I or II wetlands or associated buffers?	If yes, attach conditional	
	use determination	
C. In a Class III wetlands?	If yes, attach water	
	quality certification	
D. In a location where the municipality has		
prohibited composting as part of its zoning bylaws?		
E. Within 1000 feet of a residential housing unit		
situated in an area that has a residential housing		
density of 3 units per acre or greater?		
F. In a designated downtown or village center?		
	If yes, attach consent letter from Town	
G. Within 300 feet of a private water supply not		
owned by the applicant?		
H. Within 3 feet of seasonal high water table and		
bedrock?		
I. Within 100 feet of waters of the state?		
J. Within 100 feet of a property line or edge of a		
public road?		
K. Within 300 feet of a residence not owned by the applicant or a public building?		
L. Within 10,000 feet of a runway used by turbojet		
aircraft, or 5,000 feet of a runway used only by		
piston-type aircraft?		

4. Notice to Municipality and Solid Waste District

Ι

submitted a copy of this application form to the

Applicant Print Name

submitted a copy of this approacion form to

following municipality and solid waste management district:

Municipality:

Print Name of Municipality

Solid Waste District:

Print Name of Solid Waste Management District

5. Notice to Adjoining Landowners

Attach copy of notice and list of adjoining residences and landowners.

6. Facility Operator Training

Has the facility operator completed an approved operator training course as of the filing of this registration? (circle one)

	Yes:	No:
If Yes:		
Course:		Date:

7. **Compost Distribution**

Will the compost be marketed or distributed for sale? (circle one)

 Yes:
 No:

ATTACHMENTS

Please attach the following information to the application form

- a. Site Plan Map scale of 1:100 or less
- b. Topographic Map scale of 1:24,000
- c. NRCS Soils Map
- d. Letter from the local solid waste planning entity stating that the facility is acceptable under its plan.
- e. Copy of the facility management plan, including:
 - 1. Expected volume and type of incoming materials;
 - 2. Methods for achieving odor control;
 - 3. Methods for achieving noise control;
 - 4. Methods for controlling vectors, dust and litter;
 - 5. Methods for achieving the liquids management standards in §6-1108;
 - 6. Methods to inspect loads and remove non-compostable materials or contaminants from the incoming feedstocks;
 - 7. A description of the composting process and how that process will meet the standards established under §6-1110(c);
 - 8. Fire prevention control measures;
 - 9. List of equipment to be used;
 - 10. Hours of operation;
 - 11. Access control;
 - 12. Product distribution and;
 - 13. A sampling plan for metals concentrations as required by §6-1105(e)(8) and stability and maturity testing of the finished compost.
- f. Copy of application to municipality
- g. Copy of notice to municipality
- h. Copy of notice to adjoining landowners and residences and list, including addresses, of adjoining landowners and residences.
- i. Documentation of completion of an acceptable operator training or explanation of proficiency

SIGNATURES

LANDOWNER _____Date:_____ Note: Landowner, your signature constitutes approval to use this site for the composting facility

APPLICANT:	Date:
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Sample Adjoining Residence and Landowner Notification

(also available as a Microsoft Word document for editing)

As required by §6-1105(j)(1) of the Solid Waste Management Rules, you have been identified as an adjoining landowner and are hereby notified that an application for certification of (Facility Name) a Medium Scale Categorical Composting Facility will be submitted to the Solid Waste Management Program on (Date). A complete copy of the application is on file at the municipal office or can be viewed at the Solid Waste Management Program's office in Montpelier.

Public comment will be accepted for 14 days following the filing of the application. Comments should be sent to the Solid Waste Management Program at the address below. Additionally, a public informational meeting on the application may be convened upon the request of; the town selectboard, the trustees of an incorporated village, the city council, the appropriate officials of affected Agencies or subdivisions thereof, or by 25 or more citizens from within the municipality or adjacent municipalities where the facility is located. Below is a general description of the activity and the type of materials that will be managed at the facility.

Facility Name:	(Name)	
Facility Physical Address:	(Address)	
Facility Operator:	(Name)	
	(Address)	
	(Telephone Number)	

Please contact (Name of Operator) if you have any questions or would like additional information concerning this composting facility or alternatively, the staff of the Solid Waste Management Program may be contacted by telephone at (802) 828-1138 or by mail at 1 National Life Dr – Davis 1, Montpelier VT 05620-3704.

Sincerely,

(Operator)