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Env. Document Type: Solid Waste Correspondence

October 24, 2005

Mr. Larry Cook, Manager
Environmental Assistance Center
Division of Solid Waste Management
2700 Middlebrook Pike
Knoxville, Tennessee 37921-5602

Dear Mr. Cook:

RE: Submittal of Part I Permit Application and Processing Fee
Class II Disposal facility
Kingston Fossil Plant

Please find enclosed a completed Part I Permit Application, a Solid Waste Application/Processing Fee Form, and a check for \$10,000 for the proposed gypsum, fly ash, and bottom ash disposal facility at our Kingston Fossil Plant. It is anticipated that the Hydrogeology Report will be in by November 15, 2005 and the Part II Application Package will be submitted by May 15, 2006.

Please contact Mr. Larry C. Bowers at (423)751-4947 if you have questions concerning this correspondence.

Sincerely,

Gordon G. Park
Manager, Permitted Programs
5D Lookout Place

GGP:LCB:BFD

Enclosures

cc (Enclosures):

Mr. Glen Pugh
TN Division of Solid Waste Management
5th Floor, L&C Annex
401 Church Street
Nashville, Tennessee 37243

L. F. Campbell, KFP 1A-KST
E. L. Deskins, KFP 1A-KST
B. K. Ellis, MR 2T-C
EDMS, WT CA-K

P:\media files\solid waste\gen\kif class II disposal facility appl 05.doc



Tennessee Valley Authority, 1101 Market Street, Chattanooga, Tennessee 37402-2801

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Division of Solid Waste Management
2700 Middlebrook Pike
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Please contact Mr. Larry C. Bowers at (423)751-4947 if you have questions concerning this correspondence.

Sincerely,

A handwritten signature in cursive script that reads "Gordon G. Park".

Gordon G. Park
Manager, Permitted Programs
5D Lookout Place

Enclosures

cc (Enclosures):

Mr. Glen Pugh
TN Division of Solid Waste Management
5th Floor, L&C Annex
401 Church Street
Nashville, Tennessee 37243



SOLID WASTE APPLICATION FILING/PROCESSING FEE
 DIVISION OF SOLID WASTE MANAGEMENT
 TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION

(1) Name, Mailing Address, Zip Code: 714 Swan Pond Rd. Harriman, TN 37748	(2) I.D. Number: (3) Date Application Filed: 10/24/05 (4) Owner Name: Tennessee Valley Authority			
(5) Physical Location: 714 Swan Pond Rd. Harriman, TN 37748	(6) Phone Number: (423) 751-0011 (7) Type Facility and Fee Due: <input type="checkbox"/> Disposal Facility <input type="checkbox"/> Class I <input type="checkbox"/> Hydrogeology.....\$ 4,000 <input type="checkbox"/> Construction Plan Review..... 6,000 <input checked="" type="checkbox"/> Class II <input checked="" type="checkbox"/> Hydrogeology..... 4,000 <input checked="" type="checkbox"/> Construction Plan Review..... 6,000 <input type="checkbox"/> Class III..... 3,000 <input type="checkbox"/> Class IV..... 3,000 <input type="checkbox"/> Processing Facility..... 1,000 <input type="checkbox"/> Major Modification..... 2,000			
(8) Total Site Acres If Disposal Operation: 600	(9) Amount of Fee Enclosed: \$ 10,000			
(10) Total Acres in Actual Operation: 80	(11) Type and Size Facility If Processing Facility:			
(12) I certify the above to be true, accurate and complete. I further understand that this Filing/ Processing Fee has been earned by the Department if my application is reviewed within the time allotted by the regulations, even if the permit is denied. <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <u>Gordon D Park</u> (Signed) </div> <div style="text-align: center;"> <u>10/24/05</u> (Date) </div> </div>				
Field Office Use Only Below This Line.				
(13) a. Date Complete Application Received For Processing: _____ b. Received By: _____ c. Date Review Completed: _____ d. Was Review Completed On Time and Fee Earned? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Central Office Use Only Below This Line.				
CD Number	Date Rec'd	Amount	Receipt #	Comments

Send All Copies of This Form to SWM Central Office
 CN-0934

RD A 2022

SOLID WASTE PART I APPLICATION
 Tennessee Department of Environment and Conservation
 Division of Solid Waste Management

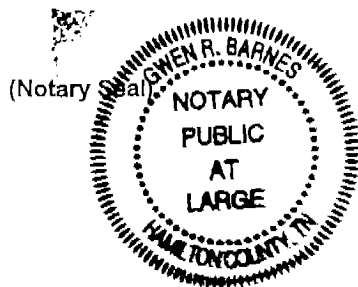


1. a. Facility's full, legal name Tennessee Valley Authority Kingston Fossil		Official Use Only	
b. Mailing address 714 Swan Pond Road		City Harriman	State Tn Zip Code 37748
2. a. Physical location or address of facility 714 Swan Pond Road		County Roane	
b. Latitude (degrees, minutes, and seconds) 35 deg. 53 min. 30 sec.		Longitude (degrees, minutes, and seconds) 84 deg. 30 min. 30 sec.	
3. a. Responsible official's name Joseph R. Bynum		Phone number with area code (423)751-2601	
4. Manager's or Operator's name Earl L. Deskins		Phone number with area code (865)717-2500	
5. a. Landowner's name Tennessee Valley Authority		Phone number with area code (423)751-2601	
b. Mailing address 1101 Market Street LP-3k		City Chattanooga	State Tn Zip Code 37402
6. a. Zoning authority's name* Roane County Zoning Officer		Current zoning status 1-3 Heavy Industrial	Phone number with area code (865) 376-5578
*see instruction on back			
b. Mailing address P.O. 643		City Kingston	State Tn Zip Code 37763
7. Type of facility: <input type="checkbox"/> Class I <input checked="" type="checkbox"/> Class II <input type="checkbox"/> Class III <input type="checkbox"/> Class IV <input type="checkbox"/> Class V <input type="checkbox"/> Class VI <input type="checkbox"/> Compost			
8. Site acreage 600		Fill acreage 80	
9. Type(s) of waste handled: <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Demolition <input type="checkbox"/> Medical <input type="checkbox"/> Yard Waste <input type="checkbox"/> Other _____			
10. Amount of waste handled: Weight <u>1230</u> tons/day Volume <u>1084</u> cubic yards/day			

11. I 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 gathered and evaluated 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 that there are significant penalties for submitting false information.

Date 10/24/05

Signature of Responsible Official Gordon B Park
 Official Title Executive Assistant
 Signature of Notary Gwen R. Barnes
 Date Commission Expires December 10, 2006

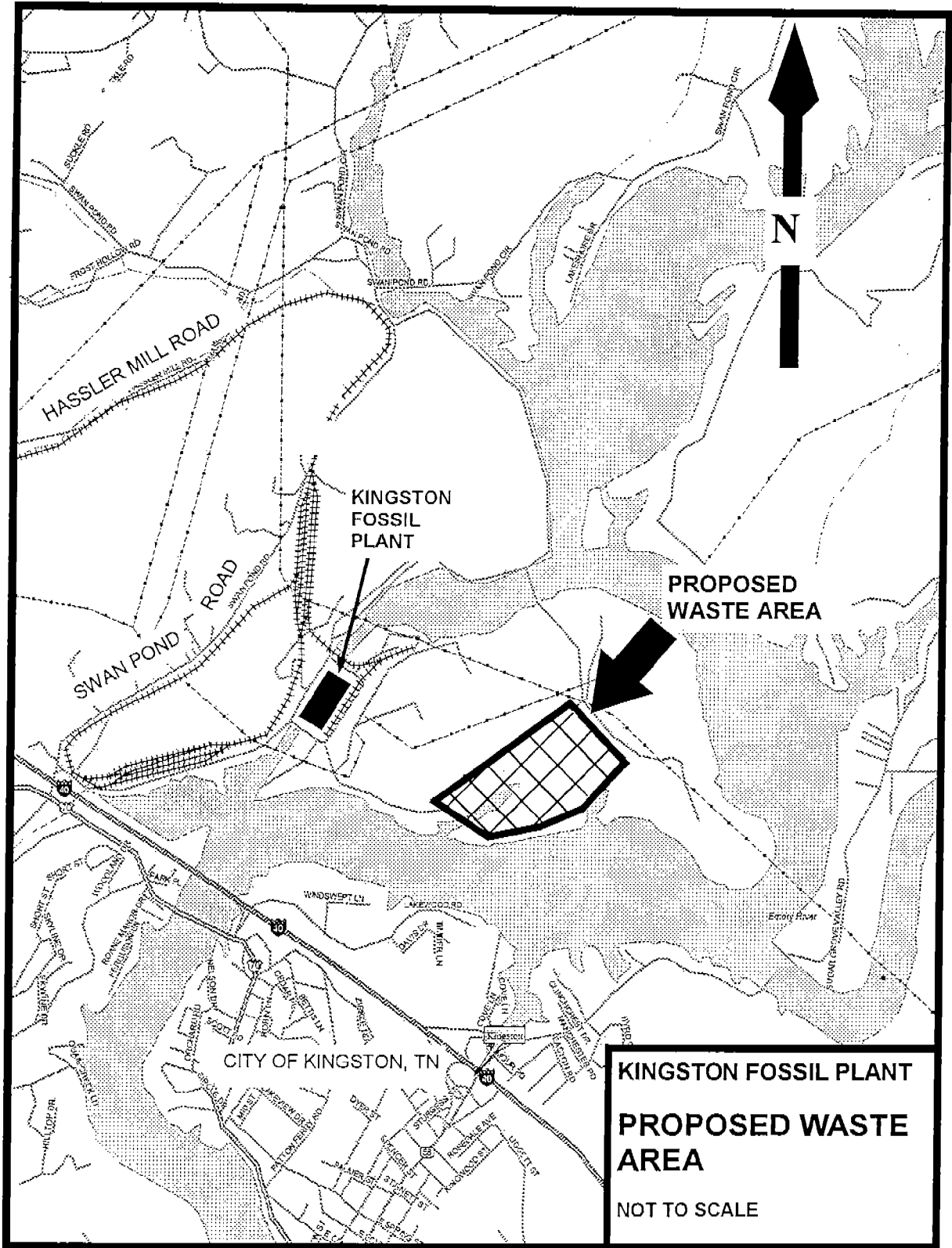


INSTRUCTIONS FOR SOLID WASTE PART I APPLICATION

Complete this form for each facility that is disposing or composting solid waste in Tennessee. If multiple facilities exist or are planned, describe each facility and its wastes on a separate form. **Submit completed documents to the respective field office in your area.**

Facilities beginning operation after the effective date of this rulemaking, must submit this form along with the required information [1200-1-7-.02(2)(d)].

- Line 1 a. **Facility's full, legal name** – Give the applicant's full, legal name for this site to distinguish it from any other site the applicant or organization may own or operate in Tennessee. **Identification Number** - leave blank for Division usage.
b. **Mailing address** – Give a complete mailing address for applicant or organization.
- Line 2 a. **Physical location or address of facility** – Give information which will aid the Division in going to the site/facility. **Do not** give a Post Office Box Number.
b. Supply the **latitude** and **longitude** of the site with the precision of degrees, minutes and seconds. Latitude and longitude may be found by using a U. S. Geological Survey quadrangle map.
- Line 3 **Responsible official's name** – Give the name and phone number of the person who the Division may contact for further information about the contents of this form.
- Line 4 **Manager's or Operator's name** – Give the name and phone number of the manager or person who is responsible for the direction of activities at the site/facility.
- Line 5 a. **Landowner's name** – Give the person(s) or organization name(s) and phone number(s) of the immediate owner(s) of the property [attached letter from landowner(s) as required by Rule 1200-1-7-.02(2)(d)1.(iv)].
b. **Mailing address** – Give a complete mailing address for landowner.
- Line 6 a. **Zoning authority's name** – Give the name and phone number of the zoning authority plus the current zoning status of the property. Also, attach a statement whether this facility is subject to local approval as provided at TCA 68-211-701 (the Jackson Law) and a statement whether the facility is subject to a solid waste regional approval as provided at TCA 68-211-814(b)(1)(D). If such local approval is required, demonstration of that approval should be attached.
b. **Mailing address** – Give a complete mailing address for the zoning authority.
- Line 7 **Type of facility** – Check the type of facility to be operated at this site.
- Line 8 **Site acreage** – Give total acreage of the property.
Fill acreage – Give the acreage within the proposed fill area (footprint).
- Line 9 **Type(s) of waste handled** – Check the type(s) of waste to be handled at the facility. If the waste type is not listed, check "other" and briefly describe the source or characteristics of the solid waste.
- Line 10 **Amount of waste handled** – Provide an estimate of the daily weight in tons/day and/or volume in cubic yards/day that will be handled at the facility.
- Line 11 **Certification** – After all documents have been compiled for submission to the Division, the manager or owner responsible for the site must sign, date and give title. This signature must be notarized.
- Line 12 **Date** – The landowner must sign and date the application.



United States Treasury

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10/16/05



Pay to
the order of

TENNESSEE VALLEY
AUTHORITY
KNOXVILLE, TN

4912-80212038

Check No.

\$10,000.00/100

*****10000*00

TENNESSEE DEPARTMENT OF
ENVIRONMENT AND CONSERVATION

VOID AFTER ONE YEAR

TENNESSEE VALLEY AUTHORITY
TVA
John M. Ashburn
DISBURSING OFFICER A

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