

1305 Rossi Road Mountain Home, AR 72653

September 7, 2011

AFIN: 03-0051

Pmt #: 0 2 49-54

RECD

SCAN SEP 0 8 2011

Doc 10#: 60 86 Z

To: KL 7 Yele

Dear Mr. Lawrence:

Enclosed is a copy of the request for the transfer of the Northwest AR Regional Solid Waste Management District Permit to N.A.B.O.R.S., as well as the \$1000 fee to process the application and all pertinant paperwork.

Please contact me if there is anything else needed to complete this process.

Sincerely,

Jason Kincade

Manager

Cc: Karen Bassett

Ph: 870.425.3213 • Fax: 870.425.2864 www.naborssanitation.com



September 6, 2011

To Whom It May Concern,

Prior to the landfill permit transfer from The Ozark Mtn. Solid Waste District to the North Arkansas Board Of Regional Sanitation, all engineering design, operational plans and other permit documents will be turned over to the North Arkansas Board of Regional Sanitation by the Ozark Mountain Solid Waste District. The District will insure this transfer is complete prior to the permit transfer.

Thank you,

Chairman Mayor Tim McKinney
Ozark Mountain Solid Waste District

REQUEST FOR SOLID WASTE PERMIT TRANSFER OR NAME CHANGE

In order for the Department of Environmental Quality (ADEQ) to process your permit transfer request, you must complete the following information and return this form and the disclosure form (as required by Arkansas Code Annotated '8-1-106) to the appropriate division of ADEQ. A permit transfer request and a disclosure form must be completed for each and every permit to be transferred.

* Required Data	Name Change	Transfer	Name Change & Transfer	
AFIN *	03-00	POSI Permi	#* 0249-54	
Current facility site name				
Name* northwest ar RSWMD				
New facility site name and site address; required if current listing is inadequate (a physical address is required; "911 addresses" are preferred; no PO boxes) (the facility Name is the first line on a four-line mailing label; Alternate Name does not appear on a label)				
Name *	North	North AR Board of Regional Switation		
Alternate Name				
Site Address - If you do not have a 911 site address and are in a 911 area you will be required to get one when submitting a transfer or name change.				
Site Address line	2* /320	RLH Lan	Ifiu Rd.	
city, state, zip *	L		AR 72653	
New invoice mailing address if changed (If same as site location, write "same as location")				
mailing address	1305	Rossi R	d	
city, state, zip, co		711ta. Home, AR 72653		
Invoice phone				
Owner ID and Owner Name if changed				
Current Owner ID	20-	3321423		
Current Owner Na	Current Owner Name Northwest AR RSWMD			
New Owner ID	New Owner ID 32-0348076			
New Owner Name	New Owner Name North AR Board of Regional Sanitation			
2 2				
Request submitted by:	Good Je		Date: 9-7-11	
Company	nA.B	DRS	Phone: 810 -425 - 3212	

ADEQ reserves the right to request any information that is deemed necessary for deciding whether to grant or deny this transfer request.