



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399

DEP Form #: 62-701.900(37), F.A.C.
Form Title: Application to Construct, Operate, or Modify or Close a Coal Combustion Residual (CCR) Unit
Effective Date: Not Yet Determined
Incorporated in Rule: 62-701.805(10)(c), F.A.C.

APPLICATION TO CONSTRUCT, OPERATE, MODIFY OR CLOSE A COAL COMBUSTION RESIDUAL (CCR) UNIT OR UNITS

GENERAL REQUIREMENT: Facilities that have Coal Combustion Residual (CCR) Units subject to the requirements in Rule 62-701.804, Florida Administrative Code (F.A.C.) are required to obtain a permit issued by the Department to construct, operate, modify or close a CCR landfill or surface impoundment pursuant to Rule 62-701.805.(11), F.A.C. A permit application to construct, operate, modify or close a CCR landfill or surface impoundment shall be submitted to the Department's Solid Waste Section in Tallahassee using this form. The appropriate fee in accordance with Rule 62-701.805(12), F.A.C., shall be submitted with the application by check made payable to the Department of Environmental Protection (DEP). Complete appropriate sections for which application is made and include all information, drawings, and reports necessary to evaluate the CCR unit(s) associated with each facility.

A. FACILITY INFORMATION

1. Type of CCR unit included as part of this application (check all that apply):

- Existing CCR Landfill or Landfills
- Existing CCR Surface Impoundment(s)
- Horizontal Expansion of CCR Landfill
- New CCR Surface Impoundment(s)
- New CCR Landfill
- Horizontal Expansion of CCR Surface Impoundment(s)
- In-Active CCR Surface Impoundment(s)

2. Type of application:

- Construction
- Closure
- Operation
- Long-Term Care

3. Classification of application:

- New
- Substantial Modification
- Renewal
- Intermediate Modification
- Minor Modification

4. Facility name: _____

5. DEP WACS ID number: _____ County: _____

6. Facility location address (main entrance): _____

7. Location coordinates:

Section: _____ Township: _____ Range: _____

Latitude: _____ ° _____ ' _____ " Longitude: _____ ° _____ ' _____ "

Datum: _____ Coordinate Method: _____

Collected by: _____ Company/Affiliation: _____

8. Applicant name (operating authority): _____

Mailing address: _____
Street or P.O. Box City State Zip

Contact person: _____ Telephone: (_____)_____

Title and E-Mail Address: _____

9. Authorized Agent/Consultant: _____

Mailing address: _____
Street or P.O. Box City State Zip

Contact person: _____ Telephone: (_____)_____

Title and E-Mail Address: _____

10. Landowner(if different than applicant): _____

Mailing address: _____
Street or P.O. Box City State Zip

Contact person: _____ Telephone: (_____)_____

Title and E-Mail Address: _____

11. Estimated costs: Total Construction \$_____ Closing Costs \$_____

12. Anticipated construction starting and completion dates: From_____ To _____

13. Surrounding land use, zoning:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Agricultural | <input type="checkbox"/> None |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Other (describe): |

14. Provide a brief description of the facility, operations, and all CCR Units included in this application: _____

15. CCR Landfill linertype:
- | | |
|---|--|
| <input type="checkbox"/> Natural soils | <input type="checkbox"/> Double geomembrane |
| <input type="checkbox"/> Single clay liner | <input type="checkbox"/> Geomembrane & composite |
| <input type="checkbox"/> Single geomembrane | <input type="checkbox"/> Double composite |
| <input type="checkbox"/> Single composite | <input type="checkbox"/> None |
| <input type="checkbox"/> Slurry wall | <input type="checkbox"/> Other (describe): |
-
-
-

16. CCR Surface Impoundment linertype:
- | | |
|---|--|
| <input type="checkbox"/> Natural soils | <input type="checkbox"/> Double geomembrane |
| <input type="checkbox"/> Single clay liner | <input type="checkbox"/> Geomembrane & composite |
| <input type="checkbox"/> Single geomembrane | <input type="checkbox"/> Double composite |
| <input type="checkbox"/> Single composite | <input type="checkbox"/> None |
| <input type="checkbox"/> Slurry wall | <input type="checkbox"/> Other (describe): |
-
-
-

17. CCR Landfill Leachate collection method:
- | | |
|--|---|
| <input type="checkbox"/> Collection pipes | <input type="checkbox"/> Double geomembrane |
| <input type="checkbox"/> Geonets | <input type="checkbox"/> Gravel layer |
| <input type="checkbox"/> Well points | <input type="checkbox"/> Intercept trench |
| <input type="checkbox"/> Perimeter ditch | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (describe): | |
-
-
-

18. CCR Landfill Leachate storage method:
- | | | |
|--|---|-------------------------------|
| <input type="checkbox"/> Tanks | <input type="checkbox"/> Surface impoundments | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (describe): _____ | | |
-

19. CCR Landfill Leachate treatment method:
- | | |
|--|---|
| <input type="checkbox"/> Oxidation | <input type="checkbox"/> Chemical treatment |
| <input type="checkbox"/> Secondary | <input type="checkbox"/> Settling |
| <input type="checkbox"/> Advanced | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (describe): | |
-

20. CCR Landfill Leachate disposal method (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Recirculated | <input type="checkbox"/> Pumped to WWTP |
| <input type="checkbox"/> Transported to WWTP | <input type="checkbox"/> Discharged to surface water/wetland |
| <input type="checkbox"/> Injection well | <input type="checkbox"/> Percolation ponds |
| <input type="checkbox"/> Evaporation | <input type="checkbox"/> Spray irrigation |
| <input type="checkbox"/> Other (describe): _____ | |
-

21. Storm Water at CCR Landfill:

Collected: Yes No Type of Treatment: _____

22. Environmental Resources Permit (ERP) number and status:

B. CCR PERMIT APPLICATION REQUIREMENTS: Please provide documentation and information for each of the items below, as applicable. (Rule 62-701.805(11)(c), F.A.C.)

1. TRANSMITTAL LETTER AND DESCRIPTION OF FACILITY OPERATIONS (Rule 62-701.805(11), F.A.C)

- a. Provide a transmittal letter with this permit application. (Rule 62-701.805(11)(c)1.a., F.A.C.).
- b. Provide a detailed description of facility operations, all CCR units, and/or proposed CCR units included in this permit application. (Rule 62-701.805(11)(c)1.b., F.A.C.).

2. MAPS AND SITE PLANS (Rule 62-701.805(11), F.A.C)

- a. For all CCR permit applications, include a regional map or plan showing the project location in relation to major roadways and population centers; and a vicinity map or aerial photograph taken within one year preceding the application, showing the facility site and relevant surface features located within 1000 feet of the facility. (Rule 62-701.805(11)(c)1.c., F.A.C.).
- b. For all CCR permit applications, include a site plan, of a scale not greater than 200 feet to the inch, which shows the project location and identifies the existing and proposed CCR units, total acreage of the site and of the existing and proposed CCR units, and any other relevant features such as water bodies or wetlands on or within 200 feet of the site and potable water wells on or within 500 feet of the site. (Rule 62-701.805(11)(c)1.d., F.A.C.).
- c. For all CCR permit applications, include a boundary survey, legal description, and topographic survey of the property (Rule 62-701.805(11)(c)1.e., F.A.C.).
- d. All maps and site plans must be signed and sealed by a professional engineer registered under Chapter 471, Florida Statutes. (Rule 62-701.805(11)(d), F.A.C.)

3. LOCATION RESTRICTION REQUIREMENTS (Rule 62-701.805(1), F.A.C)

- a. Provide documentation that the requirements in 40 CFR, 257.60, Placement Above the Uppermost Aquifer, for new CCR landfills, existing and new CCR surface impoundments, and all lateral expansions of CCR units, have been met or will be met.
- b. Provide documentation that the requirements in 40 CFR, 257.61, Wetlands, for new CCR landfills, existing and new CCR surface impoundments, and all lateral expansions of CCR units, have been met or will be met.
- c. Provide documentation that the requirements in 40 CFR, 257.62, Fault Areas, for new CCR landfills, existing and new CCR surface impoundments, and all lateral expansions of CCR units, have been met or will be met.
- d. Provide documentation that the requirements in 40 CFR, 257.63, Seismic Impact Zones, for new CCR landfills, existing and new CCR surface impoundments, and all lateral expansions of CCR units, have been met or will be met.
- e. Provide documentation that the requirements in 40 CFR, 257.64, Unstable Areas, for existing and new CCR landfills, existing and new CCR surface impoundments, and all lateral expansions of CCR units, have been met or will be met.

4. OPERATING REQUIREMENTS FOR CCR LANDFILLS (Rule 62-701.805(2)(a), F.A.C)

- a. For an existing CCR landfill, any new CCR landfills, and any lateral expansions, provide applicable documentation that meets the items specified in 40 CFR, 257.80, Air Criteria.
 - b. For an existing CCR landfill, any new CCR landfills and any lateral expansions, provide applicable documentation that meets the items specified in 40 CFR, 257.81, Run-On and Run-Off Controls for CCR Landfills.
 - c. For an existing CCR landfill, any new CCR landfills, and any lateral expansions, provide applicable documentation that meets the items specified in 40 CFR, 257.84, Inspection Requirements for CCR Landfills.
 - d. For an existing CCR landfill, any new CCR landfills, and any lateral expansions, provide the financial assurance documentation required by Rule 62-701.805(7), F.A.C.
- 5. OPERATING REQUIREMENTS FOR CCR SURFACE IMPOUNDMENTS (Rule 62-701.805(2)(b), F.A.C)**
- a. For an existing CCR surface impoundment (or impoundments), any new CCR surface impoundments, and any lateral expansions, provide applicable documentation that meets the items specified in 40 CFR, 257.80, Air Criteria.
 - b. For an existing CCR surface impoundment (or impoundments), any new CCR surface impoundments, and any lateral expansions, provide applicable documentation that meets the items specified in 40 CFR, 257.82, Hydrologic and Hydraulic Capacity Requirements for CCR Surface Impoundments.
 - c. For an existing CCR surface impoundment (or impoundments), any new CCR surface impoundments and any lateral expansions, provide applicable documentation that meets the items specified in 40 CFR, 257.83, Inspection Requirements for CCR Surface Impoundments.
 - e. For an existing CCR surface impoundment (or impoundments), any new CCR surface impoundments, and any lateral expansions, provide the financial assurance documentation required by Rule 62-701.805(7), F.A.C.
- 6. DESIGN REQUIREMENTS FOR NEW CCR LANDFILLS AND LATERAL EXPANSIONS (Rule 62-701.805(3)(a), F.A.C)**
- a. For a new CCR landfill and any lateral expansion of a CCR landfill, provide applicable documentation that the new CCR landfill or any lateral expansion that meets the design criteria specified in 40 CFR, 257.70.
 - b. For a new CCR landfill and any lateral expansion of a CCR landfill, provide a quality assurance/quality control (QA/QC) plan in accordance with Rule 62-701.805(3)(c), F.A.C.
- 7. DESIGN REQUIREMENTS FOR CCR SURFACE IMPOUNDMENTS AND LATERAL EXPANSIONS (Rule 62-701.805(3)(b), F.A.C)**
- a. For an existing CCR surface impoundment, (or impoundments, as applicable), provide documentation that the existing CCR surface impoundment(s) meets the design criteria specified in 40 CFR, 257.71.
 - b. For a new CCR surface impoundment and any lateral expansions of CCR surface impoundments, provide applicable documentation that the new CCR surface impoundment or any lateral expansion meets the design criteria specified in 40 CFR, 257.72.
 - c. For an existing CCR surface impoundment (or impoundments, as applicable), provide applicable documentation that all existing active surface impoundments meet the structural integrity requirements in 40 CFR, 257.73.
 - d. For a new CCR surface impoundment, and any lateral expansions of CCR surface impoundments, provide applicable documentation that the new surface impoundment and any lateral expansions of CCR surface impoundments meet the structural integrity requirements in 40 CFR, 257.74.
 - e. For a new CCR surface impoundment and any lateral expansion of a CCR surface impoundment, provide a QA/QC plan in accordance with Rule 62-701.805(3)(c), F.A.C.
- 8. REQUIREMENTS FOR INACTIVE CCR SURFACE IMPOUNDMENTS (Rule 62-701.805(4), F.A.C)**
- a. For inactive CCR surface impoundments subject to the criteria specified in 40 CFR, 257.100, provide all applicable documentation required by this section.
- 9. GROUNDWATER MONITORING AND CORRECTIVE ACTION REQUIREMENTS FOR CCR UNITS (Rule 62-701.805(5), F.A.C)**
- a. For existing CCR landfills and CCR surface impoundments, provide applicable documentation for the items specified in 40 CFR, 257.90 through 40 CFR, 257.98, as applicable.
 - b. For new CCR landfills, CCR surface impoundments, and any lateral expansions of CCR units, provide applicable documentation that the criteria for groundwater sampling and analysis requirements specified in 40 CFR, 257.90, 257.91, 40 CFR, 257.93, and 40 CFR, 257.94 will be met.
- 10. RETROFIT REQUIREMENTS FOR UNLINED CCR SURFACE IMPOUNDMENTS (Rule 62-701.805(6), F.A.C)**

- a. For retrofit of an existing CCR surface impoundment, provide applicable documentation that meets the requirements in 40 CFR, 257.102(k).
- b. For retrofit of an existing CCR surface impoundment in accordance with 40 CFR, 257.102(k), provide a QA/QC plan in accordance with Rule 62-701.805(3)(c) F.A.C.

11. CLOSURE REQUIREMENTS (Rule 62-701.805(8), F.A.C)

- a. For all CCR units, provide a written closure plan that describes the steps necessary to close the CCR unit at any point during the active life of the CCR units, that meets the requirements in Rule 62-701.805(8), F.A.C.
- b. For closure by removal of CCR, provide applicable documentation that the requirements in Rule 62-701.805(8), F.A.C. have been met, or will be met.
- c. For closure when leaving CCR in place, provide applicable documentation that the requirements in Rule 62-701.805(8), F.A.C. will be met.

12. ALTERNATIVE CLOSURE REQUIREMENTS (Rule 62-701.805(9), F.A.C)

- a. For CCR units subject to closure pursuant to 40 CFR, 257.101 (b)(1), or (d), who would like to continue to receive CCR in the unit, provide applicable documentation that meets the requirements of 40 CFR, 257.103 for alternative closure requirements.

13. POST-CLOSURE CARE REQUIREMENTS (Rule 62-701.805(8), F.A.C)

- a. For all CCR units, provide a written post-closure plan that meets the requirements in Rule 62-701.805(8), F.A.C. as applicable.

14. RECORDKEEPING, NOTIFICATION AND POSTING OF INFORMATION ON THE INTERNET (Rule 62-701.805(10), F.A.C)

- a. For all CCR units, provide documentation that demonstrates compliance with the recordkeeping requirements specified in 40 CFR, 257.105, as applicable.
- b. For all CCR units, provide documentation that demonstrates compliance with the notification requirements specified in 40 CFR, 257.106, as applicable.
- c. For all CCR units, provide documentation that demonstrates compliance with the publicly accessible internet site requirements specified in 40 CFR, 257.107, as applicable.

C. CERTIFICATION BY APPLICANT AND ENGINEER OF RECORD

1. Applicant:

The undersigned applicant or authorized representative of _____

is aware that statements made in this form and attached information are an application for a _____

_____ Permit from the Florida Department of Environmental Protection and certifies that the information in this application is true, correct and complete to the best of his/her knowledge and belief. Further, the undersigned agrees to comply with the provisions of Chapter 403, Florida Statutes, and all rules and regulations of the Department. It is understood that the Permit is not transferable, and the Department will be notified prior to the sale or legal transfer of the permitted facility.

_____ Signature of Applicant or Agent	_____ Mailing Address
_____ Name and Title	_____ City, State, Zip Code
_____ E-Mail address	(_____)_____ Telephone Number
	_____ Date

Note: A letter of authorization should be attached if the applicant/agent is not a governmental official, owner, or corporate officer.

2. Engineer of Record - Professional Engineer registered in Florida.

This is to certify that the engineering features of this application have been designed/examined by me and found to conform to engineering principles applicable to such facilities.

_____ Signature	_____ Mailing Address
_____ Name and Title	_____ City, State, Zip Code
	_____ E-Mail address
_____ Florida Registration Number (please affix seal)	(_____)_____ Telephone Number
	_____ Date