

MARYLAND DEPARTMENT OF THE ENVIRONMENT  
Land Management Administration • Solid Waste Program  
1800 Washington Boulevard • Suite 605 • Baltimore Maryland 21230-1719  
410-537-3315 • 800-633-6101 x3315 • [www.mde.maryland.gov](http://www.mde.maryland.gov)

**Natural Wood Waste Recycling Facility Permit Application**

Authority: Title 9, Environment Article, Annotated Code of Maryland, and Code of Maryland Regulations (COMAR) 26.04.09

Application for:  New Permit  Renewal Permit

Existing Permit No.: \_\_\_\_\_ - NWW - \_\_\_\_\_ Issued Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Applicant's Legal Name: \_\_\_\_\_

Applicant's Status:  Individual  Corporation  Other: \_\_\_\_\_

Corporation or Government Federal Tax Identification No.: \_\_\_\_\_

Maryland State Department of Assessments and Taxation (SDAT) ID No.: \_\_\_\_\_

Please note that a business/entity must be registered to do business in Maryland before a permit can be issued. The business or entity's information provided in this application must match the information in the SDAT register.

Proof of workers' compensation coverage is required under § 1-202 of the Environment Article. Please provide one of the Following:

(1) A copy of a Certificate of Compliance issued by the Maryland Workers' Compensation Commission; or

(2) Workers' Compensation Insurance Policy/Binder Number: \_\_\_\_\_

Applicant's Mailing Address : \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant's Telephone No.: ( ) \_\_\_\_\_ - \_\_\_\_\_ Facsimile No.: ( ) \_\_\_\_\_ - \_\_\_\_\_

Emergency Contact Name & Title: \_\_\_\_\_ Telephone No.: ( ) \_\_\_\_\_ - \_\_\_\_\_

Facility/Site Name: \_\_\_\_\_

Facility/Site Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Maryland Grid Coordinates: \_\_\_\_\_/\_\_\_\_\_

County Zoning Map No.: \_\_\_\_\_ Lot/Parcel No.: \_\_\_\_\_ Deed/Liber/Folio No.: \_\_\_\_\_

State Legislative District: \_\_\_\_\_ Local Council / Election District: \_\_\_\_\_

Bay Tributary Watershed Code: \_\_\_\_\_ Latitude/Longitude (Deg/Min/Sec): \_\_\_\_-\_\_\_\_-\_\_\_\_/\_\_\_\_-\_\_\_\_-\_\_\_\_

Site Acreage: \_\_\_\_\_ Facility Acreage (Estimated): \_\_\_\_\_

By signing this form, I the applicant or duly authorized representative, do solemnly affirm under the penalties of perjury that the contents of this application are true to the best of my knowledge, information, and belief. I hereby authorize the representatives of the Department to have access to the site of the proposed facility for inspection and to records relating to this application at any reasonable time. I acknowledge that depending on the type of facility applied for, other permits or approvals may be required.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Name (Print)

\_\_\_\_\_  
Title

This Notice is provided pursuant to §10-624 of the State Government Article of the Maryland Code. The personal information requested on this form is intended to be used in processing your application. Failure to provide the information requested may result in your application not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment ("MDE") is a public agency and subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by Federal or State law.

Privacy Act Notice: This Notice is provided pursuant to the Federal Privacy Act of 1974, 5 U.S.C. §552.a. Disclosure of your Social Security Number or Federal Employer Identification Number on this application is mandatory pursuant to the provisions of §1-203 (2003), Environment Article, Annotated Code of Maryland, which requires the MDE to verify that an applicant for a permit has paid all undisputed taxes and unemployment insurance. Social Security or Federal Employer Identification Numbers will not be used for any purposes other than those described in this Notice.

For questions regarding this application form, please contact the Department at (410) 537-3315

**THE FOLLOWING INFORMATION MUST BE SUBMITTED WITH THE PERMIT APPLICATION:**

1. A detailed description of the facility operation that includes a description of each component of the facility operations and how each of these operate as part of the regular function of the facility (i.e. weighing, unloading, processing, storage, marketing, residue disposal, hauling, record keeping, employees, administration, etc.)
2. A marketing plan and strategy for the product(s) produced at the facility. The plan must include the type and grade of each product to be produced and specifically show who will use or purchase these materials.
3. Eleven (11) copies of plans and engineering reports describing the proposed project. The information contained in the plans and report must include:
  - A. A map showing the specific location and land use within ½ mile of the site boundaries of the proposed facility.
  - B. A site plan designating the property boundaries, existing and proposed facility structures, and roads.
  - C. A topographic map of the site that identifies slopes greater than 25 percent, floodplains, wetlands, and aquifer recharge areas.
  - D. Drawings of on-site buildings and other facility structures indicating the type of construction, layout and dimensions.
  - E. Drawings indicating unloading, raw material storage, product storage, equipment storage and processing areas. Include the dimensions of the pile(s) or windrows used for raw material storage; for curing wood chips; and for product storage.
  - F. Days and hours of operation.
  - G. The geographic areas to be served by the proposed facility.
  - H. Types and estimated quantities of natural wood waste to be accepted and processed daily.
  - I. Types of natural wood waste that are not accepted .
  - J. Methods by which quantities of materials entering the site, being processed, and leaving the facility are determined.
  - K. The process and technology to be used for processing wood wastes. Include the number of times wood is ground, aerated, oxygen and temperature readings, and how often the product is removed from the site.
  - L. Number and type of employees.
  - M. Employee safety and sanitary facilities including the location of on site sewage disposal and water supply systems.
  - N. Major items of equipment including manufacturer, type, model, capacity, and number of units.
  - O. Soil types and depths on the site.
  - P. Measures that shall be taken to prevent or control ground or surface water pollution, fires, explosions, odors, noise, dust, litter, vectors, and other nuisances.
  - Q. Methods of controlling runoff from the unloading, storage, and processing areas.
  - R. Site security and access controls.
  - S. An Operations and Maintenance (O&M) Manual which identifies the operation in detail as specified in COMAR 26.04.09.05B.(2)(h)(i-vi).
  - T. An Emergency Preparedness Manual as specified in COMAR 26.04.09.07F.
4. The applicant must also submit:
  - A. An erosion and sediment control plan that meets the requirements of COMAR 26.17.01 and that has been approved by the local soil conservation district or appropriate approving authority.
  - B. A grading permit as required by the local jurisdiction.
  - C. An approved and bonded storm water management plan as required by the local jurisdiction.
  - D. A description of and copies of all other applicable permits or approvals as required under local, State or federal statutes.