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# **Solid Waste Facility License Renewal Application**

**Solid Waste Reload Facility** 



Issued: November 2010

This packet contains an application for a Metro Solid Waste Facility License. You may also want to review the relevant sections of the Metro Code for additional information. The Metro Code can be accessed via the Metro web site at <a href="https://www.oregonmetro.gov">www.oregonmetro.gov</a>. Solid waste facilities within the Metro boundary generally may operate only under the authorization of a License or Franchise.

## Application for a new Solid Waste Facility License

Those wishing to apply for a new Metro Solid Waste Facility License should schedule a preapplication conference prior to submitting a final application form. Applicants should prepare for the pre-application conference by reviewing the application forms and drafting answers prior to the conference with Metro. To schedule the pre-application conference, contact Metro's Solid Waste Compliance and Cleanup Division at (503) 797-1835. The purpose of the pre-application conference is to determine what parts of the Metro Solid Waste Facility Application you will need to submit, and to identify any potential issues specific to your proposal. Applications for new Licenses are generally granted or denied within 120 days of the filing of a complete application. (See Metro Code section 5.01.060.) The fee for filing a license application is \$300.

## Renewal of an Existing License

Those wishing to renew an existing authorization without substantive changes to the current authorization must submit a completed *Renewal Application Form*, unless otherwise directed by Metro staff. License renewal applications must be submitted not less than 60 days prior to expiration of the existing license. Failure to submit applications in a timely fashion may result in a lapse of authority to operate. (See Metro Code section 5.01.087.) The fee for filing a license renewal application is \$300.

## **Change of Authorization to an Existing License**

A change in authorization of an existing License requires an application for a formal License amendment. The applicant cannot implement the change of authorization until it has been approved by Metro. (See Metro Code section 5.01.095.) The fee for filing an application for a change of authorization or limits is \$100.

## **Change of Ownership or Control of an Existing License**

To transfer ownership or control of an existing License, an application for a formal License amendment is required. The applicant cannot transfer ownership or control of an existing License until it has been approved by Metro. (See Metro Code section 5.01.090.)



#### DATE RECEIVED BY METRO:

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Metro Finance and Regulatory Services Solid Waste Compliance and Cleanup 600 NE Grand Avenue Portland, OR 97232-2736 (503) 797-1835

## Solid Waste Facility License Renewal Application Solid Waste Reload Facility

## PART 1 - Standard License Application Information

Applicants applying to operate a solid waste facility must provide the following information:

| 1. Applicant (Licensee) |                            |
|-------------------------|----------------------------|
| Facility Name:          | GreenWay Recycling, LLC    |
| Company Name:           | GreenWay Recycling, LLC    |
| Street Address:         | 4135 NW St. Helens Rd.     |
| Mailing Address:        | P.O. Box 4483              |
| City/State/Zip:         | Portland, OR 97208-4483    |
| Contact Person:         | Terrell Garrett            |
| Phone Number:           | (503) 683-2755             |
| Fax Number:             | NONE                       |
| E-mail Address:         | greenwaybusiness@gmail.com |
|                         |                            |

| 2. Licensee's Owner or I | Licensee's Owner or Parent Company (provide information for all owners) |  |  |
|--------------------------|---|--|--|
| Name:                    | Chris Garrett/Terrell Garrett   |  |  |
| Address:                 | P.O. Box 4483   |  |  |
| City/State/Zip:          | Portland, OR 97208-4483   |  |  |
| Phone Number:            | (503) 793-8679/(503) 793-9238   |  |  |
| Fax Number:              |   |  |  |
| E-mail Address:          | greenwaybusiness@gmail.com  |  |  |

| 3. Land Owner   |                          |   |  |
|---|--------------------------|---|--|
| owner of the property<br>on which the facility is<br>located? | NO                       | NO If no, complete the rest of the information requested in this section and submit Attachment G (Property Use Consent Form), signed by the owner(s) of the property. |  |
| Name:   | GreenWay Properties, LLC |   |  |
| Mailing Address:  | P.O. Box 4483            |   |  |
| City/State/Zip:   | Portland, OR 97208-4483  |   |  |
| Phone Number:   | (503) 793-9238           |   |  |

| 4. Public/Commercial Operation  | ns     |     |                  |                              |
|---|--------|-----|------------------|------------------------------|
| □Vill the facility be open to the public?   | NO     |     | NO               |                              |
| Il the facility be open to non-<br>affiliated commercial solid<br>waste collectors? | YES    |     | NO               |                              |
| waste collection companies that collect waste from outside the boundary of Metro?   | YES    |     | NO               |                              |
| Operating Hours and Traffic<br>Volume:  | PUBLIC |     | ERCIAL<br>LIATED | COMMERCIAL<br>NON-AFFILIATED |
| Operating Hours   | N/A    | N/A |                  | 4:00am - 5:00pm M-F          |
| Estimated Vehicles Per Day N/A  |        | N/A |                  | 150                          |

| For each material type accepted at the facility, list the expected posted tip fee: (attach additional pages if necessary) |                  |  |
|---|------------------|--|
| WASTES / MATERIALS TO BE ACCEPTED   | EXPECTED TIP FEE |  |
| Wood/yard debris  | \$47.50/ton      |  |
| Asphalt shingle Roofing tear-off  | \$75/ton         |  |
| Recoverable Waste   | \$90/ton         |  |
| Non-Recoverable Waste   | \$94/ton         |  |
| Concrete, Rock, Brick   | \$27.50/ton      |  |

Describe the purpose (activities to be performed and waste types to be received) of the proposed facility and include an estimate of the quantity of waste to be received annually.

| WASTE TYPE            | PURPOSE                     | QUANTITY    |
|-----------------------|-----------------------------|-------------|
| Wood/yard debris      | Hogged fuel                 | 25,000 tons |
| Recoverable waste     | Material recovery           | 45,000 tons |
| Non-recoverable waste | Limited material recovery   | 9,000 tons  |
| Asphalt Roofing       | Recycling to asphalt plants | 3,000 tons  |
|                       |                             |             |
|                       |                             |             |

Solid Waste delivered to this facility will be reloaded for transport to the following facility or facilities: (Please list all facilities and include additional pages if necessary.)

|                             | 1 0                   |                |                              |
|-----------------------------|-----------------------|----------------|------------------------------|
| FACILITY NAME               | WASTE TYPE            | WASTE QUANTITY | PURPOSE *                    |
| Finley Buttes/ Wasco County | ADC                   | 8,000 tons     | ADC                          |
| Hillsboro Landfill          | Residual              | 27,500 tons    | disposal                     |
| Hillsboro Landfill          | Concrete, rock, brick | 7,500 tons     | Roads and fill               |
|                             |                       | * For          | example: Processing disposal |

### For example: Processing, disposal.

## 6. Has the Operating Plan changed from that previously submitted and currently on file at Metro?

XIII YES YES If yes, submit an updated Operating Plan that includes the following requirements for Metro review and approval with this application.

- a) Procedures for inspecting loads.
  - Inspecting incoming loads for the presence of prohibited wastes.
  - A set of objective criteria for accepting and rejecting loads.
    - b) Procedures for processing loads.
  - Processing authorized solid wastes, including any chipping or grinding.
  - Procedures for minimizing storage times, avoiding delay in processing and managing waste during all weather conditions.
  - Describe the maximum length of time for retaining wastes on-site if it is beyond 24-hours.
- Procedures for managing prohibited wastes. The operating plan shall describe procedures for managing and transporting to appropriate facilities any prohibited wastes discovered at the facility. The plan shall include procedures for managing.
  - Hazardous wastes.
  - Other prohibited solid wastes.
- Procedures for emergencies. The operating plan shall describe procedures to be followed in case of fire or other emergency.
- Procedures for preventing and controlling nuisances, including noise, vectors, dust, litter, and odors. Include a description of how you encourage delivery of waste in covered loads.
- Procedures for fire prevention, protection, and control measures used at the facility.

| X NO                      | YES If yes, complete and submit Attachment A with this application.   |
|---------------------------|---|
| 8. Has the facility       | design plan changed from that previously submitted and currently on file at Metro?  |
| XI NO                     | YES If yes, complete and submit Attachment B with this application.   |
| 9. Have any requ          | ired insurance policies on file with Metro expired?   |
| <b>№</b> NO               | YES If yes, submit copies of new policies with Attachment C with this application.  |
| 10. Have any req expired? | uired federal, state, county or city permits, licenses or franchises on file with Metro   |
| <b>™</b> NO               | YES If yes, submit new documents with Attachment D or E with this application   |
| submit<br>examp           | other proposed material changes not already described herein from the information ted by the Licensee with its prior license application and renewal requests? For le, have there been changes in the activities performed, wastes received, or annual t of waste received? |
| XII NO                    | YES If yes, please describe and explain the changes (attach additional pages necessary).  |

| PART 2 - Standard Attachments (I                           | License application form continued)  |           |
|--|--|-----------|
|  | nitted copies of permits, site plans, facility design plans, or o                    | ther      |
| attachments required herein, are not<br>Metro are current. | t required to re-submit such documents if the documents on                           | file at   |
| ATTACHMENT A: SITE PLAN                                    |  |           |
|  | wing the location of the facility at a scale no smaller than one in ist be provided: | ch equals |

Location of all buildings on the property and other pertinent information with respect to the operation of the

Location of receiving, processing, and storage areas for solid waste, source-separated recyclable materials,

facility (e.g. scale locations, water supply, fencing, access roads, paved areas, etc.).

recovered materials, waste residuals, hazardous waste, and other materials.

Boundaries of the facility.

Property boundaries, if different.

Boundaries of the sorting, processing or reload area.

#### ATTACHMENT B: GENERAL FACILITY DESIGN PLAN

The following information must be provided:

- A description of any barriers that the facility has (or will have) to prevent unauthorized entry and dumping (fencing, gates, locks).
- A description of the facility signage to include: name of facility, address of facility, emergency number, operating hours, fees and charges, Metro's name and telephone number (503) 234-3000, and a list of authorized and prohibited wastes.
- The estimated capacity (cubic yards) of the facility storage area(s) for incoming solid waste waiting to be processed.
- The estimated capacity (cubic yards) for storage of recovered materials.
- On-site traffic flow patterns, including user type designation.

#### ATTACHMENT C: INSURANCE

Include proof of the following types of insurance, covering the applicant, its employees, and agents:

- Broad form comprehensive general liability insurance covering bodily injury and property damage, with automatic coverage for premises, operations, and product liability. The policy must be endorsed with contractual liability coverage.
- Automobile bodily injury and property damage liability insurance.
- Insurance coverage shall be a minimum of \$500,000 per occurrence. If coverage is written with an annual aggregate limit, the aggregate limit shall not be less than \$1,000,000.
- Metro, its elected officials, departments, employees, and agents must be named as ADDITIONAL INSUREDS.

#### ATTACHMENT D: DEQ PERMIT APPLICATIONS AND INFORMATION

The following information must be provided:

• A duplicate copy of all applications for necessary DEQ permits and any other information required by or submitted to DEQ, including closure plans, financial assurance for the costs of closure of the facility, and conditional use permit or land use compatibility statement, if applicable.

### ATTACHMENT E: OTHER REQUIRED PERMITS

The following information must be provided:

• A copy of any required federal, state, county, city or other permits, licenses, or franchises that have been granted or issued, not including materials required by Attachment D, or a copy of any applications for such other permits, licenses, or franchises. Copies of correspondence pertaining to such permits, licenses or franchises may be requested.

#### ATTACHMENT F: CLOSURE PLAN AND FINANCIAL ASSURANCE

- If a closure plan and financial assurance are required by DEQ, copies of these documents should be included with the application per Attachment D.
- If DEQ did **not** require a closure plan for the facility, attach a closure document describing closure protocol.
- If DEQ did **not** require any financial assurance for the costs of closure of the facility, attach proof of financial assurance for the costs of closure of the facility.

#### ATTACHMENT G: PROPERTY USE CONSENT FORM

• If required by Part 1 of this application. Form is available at www.oregonmetro.gov.

## APPLICANT CERTIFICATION: This form cannot be processed without a signature

| I certify under penalty of law that the information contained in this application is true and correct to the best of my knowledge. I agree to notify Metro within 10 days of any change in the information submitted as a part of this application. |
|---|
| SIGNATURE OF AUTHORIZED AGENT   |
| TITLEMEMBER   |
| PRINT NAMETERRELL GARRETT   |
| DATE 10/6/15 PHONE 503-793-9238   |

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