

WASTE DISPOSAL/PROCESSING FACILITY COORDINATION FORM

SECTION 1 – WASTE DISPOSAL/PROCESSING FACILITY INFORMATION

To be completed by applicant

Site/Facility Name _____

Associated City/State _____

Check as appropriate:

- | | |
|---------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> New Site | <input type="checkbox"/> Expand/Modify Existing Site |
| <input type="checkbox"/> Re-Permit Existing Site: | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Sanitary Landfill | <input type="checkbox"/> Waste transfer Station |
| <input type="checkbox"/> Demolition/Construction Debris | <input type="checkbox"/> Recycling Center: |
| <input type="checkbox"/> Compost facility | <input type="checkbox"/> Water Detention/Retention |
| <input type="checkbox"/> Water Treatment/Oxidation | <input type="checkbox"/> Other _____ |

Check as appropriate:

Facility will process or store putrescible waste material outdoors:

Yes **No**

Facility is within 5,000 feet of a public-use airport utilized by piston engine aircraft:

Yes **No**

Facility is within 10,000 feet of a public-use airport utilized by turbine engine aircraft:

Yes **No**

Facility is within a 6 mile radius of a public-use airport:

Yes **No**

Distance to nearest runway end in feet: _____

Consult FAA Advisory Circular 150/5200-33A for procedure to determine distance to runway end.

Reported hazardous wildlife activity at airport

Yes **No**

Reported hazardous wildlife activity at facility:

Yes **No**

USDA/WS evaluation conducted:

Yes **No**

If yes, determination: Non-hazard Hazard

Submitted By:

Date _____

Name

Company

Address

Phone

WASTE DISPOSAL/PROCESSING FACILITY COORDINATION FORM
Page 2 of 2

SECTION 2 – AIRPORT INFORMATION
To be completed by GDOT

Associated Public Use Airport:

FAA LOC ID _____

Air Traffic Control Tower operating on airport? **Yes** **No**

Military Aviation On-Site: **Yes** **No**
(If yes, FAA regional military liaison will be notified)

Longest Runway in feet _____

Instrument Runway **Yes** **No**

Jet fuel Available **Yes** **No**

Total Annual Operations _____

Annual Piston Operations _____

Annual Turbine Operations _____

Completed By:

Name

Title

Date