



# Illinois Environmental Protection Agency

Bureau of Land . 1021 N. Grand Avenue E. . Springfield . Illinois . 62702

## Application for General Construction or Demolition Debris Recovery Facility Permit (LPC – PA724)

This form must be used for General Construction or Demolition Debris (GCDD) Recovery Facility permit application from the Bureau of Land, in compliance with 35 Illinois Administrative Code (IAC) Part 820. One original, and two copies, of all permit application forms must be submitted. Attach the original and appropriate number of copies of any necessary plans, specifications, reports, etc. to fully support and describe the activities and modifications being proposed. Attach sufficient information to demonstrate the compliance with all regulatory requirements. Incomplete applications will be rejected. Please refer to the instructions for further guidance. **Note: Applicants must provide a physical address; the post office will not deliver a certified letter (final action letter) to a P.O. Box only. Please provide an extended ZIP+4 code for the site identification and owner/operator information.**

**You may complete this form online, save a copy locally, print, sign and submit it to the Bureau of Land at the address below.** Note: Hand-delivered permit applications must be delivered between 8:30 am and 5:00 pm, Monday through Friday (excluding State holidays) to:

Bureau of Land, Permit Section, Mail Code #33  
1021 North Grand Avenue East  
Springfield, IL 62702

### 1. Site Identification:

IEPA ID Number: \_\_\_\_\_  
Facility Name: \_\_\_\_\_ County: \_\_\_\_\_  
Street Address: \_\_\_\_\_ P.O. Box: \_\_\_\_\_  
City or Township: \_\_\_\_\_ State: IL Zip Code: \_\_\_\_\_  
Existing DE/OP Permit Numbers (if applicable) \_\_\_\_\_

B. Legal description of the site and legal description of the facility boundary, if different than the property boundary. You may provide additional information, if necessary, by clicking on the button below.

(Approximate center of the facility Latitude and Longitude should be four (4) decimal places).

Latitude: \_\_\_\_\_

Longitude: \_\_\_\_\_

## 2. Applicant Identification

Owner

Operator

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

P.O. Box: \_\_\_\_\_

P.O. Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_

Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mail Agency Correspondence to: \_\_\_\_\_

Other: \_\_\_\_\_

### Site Ownership

Presently owned by Applicant

Presently owned by a Trust

Presently owned by a Corporation

To be Leased by Applicant for \_\_\_\_\_ years.

Beginning Date of Lease: \_\_\_\_\_

Years of Lease remaining \_\_\_\_\_ years.

Ending Date of Lease: \_\_\_\_\_

### Operated by:

Illinois Corporation

Trust

Individual

Government

Partnership

Other: \_\_\_\_\_

### 3. Description of this Permit Request: (Note: The box below will expand as needed)

#### 4. Completeness Requirements

1. Have all required public notice letters been mailed in accordance with the LPC-PA16 instructions? Yes  No  N/A   
 (If so, provide a list of those recipients of the required public notice letters for Illinois EPA retention.  
 Such retention shall not imply any Illinois EPA review and/or confirmation of the list. Please attach a list if more space is required)

#### Public Notice Recipients

Name: _____	Title: _____
Street Address: _____	P.O. Box: _____
City: _____	State: _____ Zip Code: _____

Name: _____	Title: _____
Street Address: _____	P.O. Box: _____
City: _____	State: _____ Zip Code: _____

Name: _____	Title: _____
Street Address: _____	P.O. Box: _____
City: _____	State: _____ Zip Code: _____

Name: _____	Title: _____
Street Address: _____	P.O. Box: _____
City: _____	State: _____ Zip Code: _____

Name: _____	Title: _____
Street Address: _____	P.O. Box: _____
City: _____	State: _____ Zip Code: _____

Name: _____	Title: _____
Street Address: _____	P.O. Box: _____
City: _____	State: _____ Zip Code: _____

5. Has the required 39(i) certification been submitted? A 39(i) certification must be submitted with information concerning the following persons or entities:
- |   | Yes                   | No                    | N/A                   |
|---|-----------------------|-----------------------|-----------------------|
| • the owner of the business entity applying for the permit;   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| • the operator of the business entity applying for the permit;  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| • each employee or officer of the owner or operator who signed the permit application or has managerial authority at the site; and  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| • any additional owner, operator, or officer or employee of the owner or operator from whom a certification is requested by the Illinois EPA, including any officer or employee who will be responsible for overseeing or implementing regulated activities governed by the permit. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## 6. Required Signatures

I hereby affirm that all information contained in this application is true and accurate to the best of my knowledge and belief. I do herein swear that I am a duly authorized representative of the owner/operator and I am authorized to sign this permit application form.

***Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))***

_____	_____
Owner Signature	Date
_____	_____
Printed Name	Title

**Notary:** Subscribed and Sworn before me this \_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

_____	_____
Operator Signature	Date
_____	_____
Printed Name	Title

**Notary:** Subscribed and Sworn before me this \_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

My commission expires on: \_\_\_\_\_

\_\_\_\_\_

Signature & Stamp/Seal of Notary Public

Preparer's Signature: _____	Date: _____
_____	
Printed Name and Title	

All information submitted as part of the Application is available to the public except when specifically designated by the Applicant to be treated confidentially as a trade secret or secret process in accordance with Section 7(a) of the Illinois Environmental Protection Act, applicable rules and regulations of the Illinois Pollution control Board and applicable Illinois EPA rules and guidelines.