

201800090



Michigan Department Of Environmental Quality - Air Quality Division

RENEWABLE OPERATING PERMIT APPLICATION
C-001: CERTIFICATION

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This information is required by Article II, Chapter 1, part 55 (Air Pollution Control) of P.A. 451 of 1994, as amended, and the Federal Clean Air Act of 1990. Failure to provide this information may result in civil and/or criminal penalties. Please type or print clearly.

This form is completed and included as part of Renewable Operating Permit (ROP) initial and renewal applications, notifications of change, amendments, modifications, and additional information.

Form Type C-001	SRN N2688
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Stationary Source Name Advanced Disposal Services Arbor Hills Landfill, Inc.	
City Northville	County Washtenaw

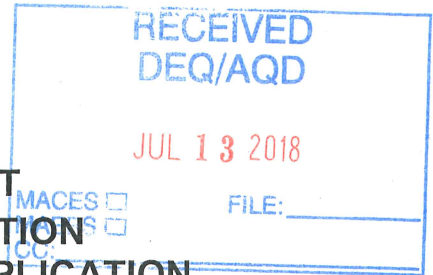
SUBMITTAL CERTIFICATION INFORMATION	
1. Type of Submittal <i>Check only one box.</i>	
<input type="checkbox"/> Initial Application (Rule 210)	<input checked="" type="checkbox"/> Notification / Administrative Amendment / Modification (Rules 215/216)
<input type="checkbox"/> Renewal (Rule 210)	<input type="checkbox"/> Other, describe on AI-001
2. If this ROP has more than one Section, list the Section(s) that this Certification applies to <u>01</u>	
3. Submittal Media <input type="checkbox"/> E-mail <input type="checkbox"/> FTP <input type="checkbox"/> Disk <input checked="" type="checkbox"/> Paper	
4. Operator's Additional Information ID - Create an Additional Information (AI) ID that is used to provide supplemental information on AI-001 regarding a submittal.	
AI	

CONTACT INFORMATION	
Contact Name Robert D Walls	Title General Manager
Phone number 248-412-0704	E-mail address bob.walls@advanceddisposal.com

This form must be signed and dated by a Responsible Official.				
Responsible Official Name Robert D. Walls			Title General Manager	
Mailing address 10690 West Six Mile Road				
City Northville	State MI	ZIP Code 48168	County Washtenaw	Country USA
As a Responsible Official, I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this submittal are true, accurate and complete.				
Signature of Responsible Official 			Date 7-12-18	



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RENEWABLE OPERATING PERMIT M-001: RULE 215 CHANGE NOTIFICATION RULE 216 AMENDMENT/MODIFICATION APPLICATION

This information is required by Part 55, Air Pollution Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, and the Federal Clean Air Act of 1990. Failure to obtain a permit required by Part 55 may result in penalties and/or imprisonment.

1. SRN N2688	2. ROP Number MI-ROP-N2688-2011	3. County Washtenaw
4. Stationary Source Name Advanced Disposal Services Arbor Hills Landfill, Inc.		
5. Location Address 10690 West Six Mile Road		6. City Northville
7. Submittal Type - <i>The submittal must meet the criteria for the box checked below. Check only one box. Attach a mark-up of the affected ROP pages for applications for Rule 216 changes.</i> <input type="checkbox"/> Rule 215(1) Notification of change. Complete Items 8 – 10 and 14 <input type="checkbox"/> Rule 215(2) Notification of change. Complete Items 8 – 10 and 14 <input type="checkbox"/> Rule 215(3) Notification of change. Complete Items 8 – 11 and 14 <input type="checkbox"/> Rule 215(5) Notification of change. Complete Items 8 – 10 and 14 <input type="checkbox"/> Rule 216(1)(a)(i)-(iv) Administrative Amendment. Complete Items 8 – 10 and 14 <input type="checkbox"/> Rule 216(1)(a)(v) Administrative Amendment. Complete Items 8 – 14. Results of testing, monitoring & recordkeeping must be submitted. See detailed instructions. <input checked="" type="checkbox"/> Rule 216(2) Minor Modification. Complete Items 8 – 12 and 14 <input type="checkbox"/> Rule 216(3) Significant Modification. Complete Items 8 – 12 and 14, and provide any additional information needed on ROP application forms. See detailed instructions. <input type="checkbox"/> Rule 216(4) State-Only Modification. Complete Items 8 – 12 and 14		
8. Effective date of the change. (MM/DD/YYYY) See detailed instructions. <u>01/29/2018</u>		9. Change in emissions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10. Description of Change - <i>Describe any changes or additions to the ROP, including any changes in emissions and/or pollutants that will occur. If additional space is needed, complete an Additional Information form (AI-001).</i> Advanced Disposal Services Arbor Hills Landfill was issued an extension to a Permit to Install for a temporary utility flare as back-up landfill gas control. This request is to incorporate the extension to PTI 19-17A permit conditions into the facilities' ROP		
11. New Source Review Permit(s) to Install (PTI) associated with this application? If Yes, enter the PTI Number(s) <u>19-17A</u> - - - - -		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12. Compliance Status - <i>A narrative compliance plan, including a schedule for compliance, must be submitted using an AI-001 if any of the following are checked No.</i>		
a. Is the change identified above in compliance with the associated applicable requirement(s)?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Will the change identified above continue to be in compliance with the associated applicable requirement(s)?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. If the change includes a future applicable requirement(s), will timely compliance be achieved?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13. Operator's Additional Information ID - <i>Create an Additional Information (AI) ID for the associated AI-001 form used to provide supplemental information.</i>		AI
14. Contact Name Robert D. Walls	Telephone No. 248-412-0704	E-mail Address bob.walls@advanceddisposal.com
15. This submittal also updates the ROP renewal application submitted on <u>04/23/2015</u> (If yes, a mark-up of the affected pages of the ROP must be attached.)		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A