# HAZARDOUS WASTE/SOLID WASTE PERMIT APPLICATION DISCLOSURE FORM STATE OF MISSISSIPPI

Under the authority of Mississippi Code Annotated Section 17-17-501, et seq. (Supp. 1994) and the Mississippi Commission on Environmental Quality regulations promulgated thereunder, each applicant (other than a public agency) for the issuance, reissuance or transfer of a permit for the treatment, processing, storage or disposal of solid waste at a commercial hazardous or nonhazardous solid waste management facility, must file a disclosure statement with the Permit Board at the time the application is filed. If the applicant is a public agency and proposes to operate a facility by contract with an individual or a business concern, such individual or business concern must file a disclosure statement, and for purposes of doing so, shall complete this form as if it is the "applicant".

Instructions for completing this form:

- 1. All information must be typed.
- 2. Do not leave any sections blank. If a section is not applicable, or if there is no information to be provided as called for, type "Not Applicable", "N/A" or "NONE", as appropriate, on the first blank line of the section.
- 3. Where individual names are requested, provide <u>full</u> names, not initials. Where an individual's full name includes one or more initials, indicate this in a note to the side of the name.
- 4. Attach additional pages as necessary. Where a section includes a note to provide a separate page for each name, copies of that page may be made.
- 5. Race and Gender are requested only to confirm identification of disclosed individuals.

#### **SECTION 1. GENERAL INFORMATION**

Applicant's full name	
Business address: street or box number	
City, state, zip	
Business telephone number	
Applicant is [check one]:	1
If the applicant is an individual, provide the following	ng information:
Applicant's date of birth	Race
Social Security number	Gender
If the applicant is a business concern, provide the following	llowing information:
Date of establishment	
Federal employer identification number	
Is the applicant business concern a publicly traded co	orporation?
Are there any environmental violations for applicant  Yes  No	listed in Section 7.1 of this form?
Are there any criminal violations for applicant listed  Yes No	in Section 7.2 of this form?

## SECTION 2. OFFICERS, DIRECTORS, PARTNERS AND KEY EMPLOYEES OF APPLICANT

F	Full Name	
В	Business address: street or box number	ſ
C	City, state, zip	
D	Date of birth	
S	Social security number	
R	Race	
G	Gender	
В	Business telephone number	
Jo	Job title or description	
	re any environmental violations for dis- Section 7.1 of this form?	sclosed officer, director, partner or key em
<u> </u>	Yes No	

#### **SECTION 3. SUBSIDIARIES OF APPLICANT**

3.1	For each business concern that collects, transports, trenonhazardous solid waste or hazardous waste which the of five percent (5%) or more, provide the following	ne applicant hol	ds an equ	ity interest
	separate page for each business concern).			
	Business concern's name			
	Business address: street or box number			
	City, state, zip			
	Date of establishment			
	Federal employer identification number			
	Business telephone number			
The bu	siness named above [check <u>all</u> that are appropriate]:			
	collects nonhazardous waste hazardous	waste		
	☐ transports ☐ nonhazardous waste ☐ hazardous	waste		
	☐ treats ☐ nonhazardous waste ☐ hazardous waste	waste		
	processes nonhazardous waste hazardous	waste		
	stores nonhazardous waste hazardous	waste		
	disposes nonhazardous waste hazardous	waste		
	ere any environmental violations for disclosed subsidia form?	ry of applicant	listed in	Section 7.1
	Yes No ere any criminal violations for disclosed subsidiary of a	pplicant listed i	n Sectior	n 7.2 of this
form?	□ Yes □ No			

#### SECTION 4. EQUITY OR DEBT LIABILITY HOLDERS

- \* (Note: Section 4 applies to the equity and debt liability holders of the applicant business concern and any other disclosed business concerns unless expressly noted).
- 4.1 For each business concern disclosed in this statement (including each business concern disclosed in this section) that is not a publicly traded corporation, provide the following information for each person, other than a business concern, holding any equity in such disclosed business concern: (Note: Provide a separate page for each person). Full Name Business address: street or box number City, state, zip Date of birth Social security number Race Gender Business telephone number Name of disclosed business concern in which this person holds interest % of equity Are there any environmental violations for disclosed person listed in Section 7.1 of this form? Yes No.

Are there any criminal violations for disclosed person listed in Section 7.2 of this form?

No

Yes

4.2	For each business concern disclosed in this statement (including each business concern disclosed in this section) that is not a publicly traded corporation, provide the following information for any other business concern (other than a chartered lending institution or an investment company which is publicly traded) holding any equity in such disclosed business concern:  (Note: Provide a separate page for each business concern).
	Business concern's name (Equity or debt liability holder)
	Business address: street or box number
	City, state, zip
	Date of establishment
	Federal employer identification number
	Business telephone number
	Name of disclosed business concern in which the above business concern holds interest
	% of equity
Are the this for	ere any environmental violations for disclosed business concern listed in Section 7.1 of rm?
	☐ Yes ☐ No
Are th form?	ere any criminal violations for disclosed business concern listed in Section 7.2 of this  Yes No

	l holding any equity in such disclosed le a separate page for each charter	
company which	ch is publicly traded).	_
investment co (Note: The lis investment co not subject t unless addit	ding institution's name or name or ompany which is publicly trade ted chartered lending institution or ompany which is publicly traded in further disclosure requirement tional information is express!	d r s s
requested).		
Business addre	ess: street or box number	_
City, state, zip		_
Business telep	hone number	_
		_
	losed business concern in which thi ing institution or investment compan	

For each business concern disclosed in this statement disclosed in this section) that is not a publicly trade information for each individual or business concern husiness concern:	d corporation	, list the	following
(Note: Provide a separate page for each individual o any debt liability in such business concern).	r business	concern	holding
Full Name (*Note: The listed individual or business concern is not subject to further disclosure requirements unless additional information is expressly requested).			
Business address: street or box number			
City, state, zip			
Federal employer identification number (if applicable)			
Name of disclosed business concern in which the above individual or business concern holds debt liability			
Amount of debt liability held in U.S. Dollars			
% of total debt liability held			

4.5	For each business concern disclosed in this statement (including each business concern disclosed in this section) that is a publicly traded corporation, provide the following information for individuals related within the third degree holding a cumulative of five percent (5%) and any other person(s), other than a business concern, holding more than five percent (5%) of the equity in such disclosed publicly traded corporation: (Note: Provide a separate page for each person).
	Full Name
	Business address: street or box number
	City, state, zip
	Date of birth
	Social security number
	Race
	Gender
	Business telephone number
	Name of disclosed corporation in which this person holds interest
	% of equity
Are t	here any environmental violations for disclosed person listed in Section 7.1 of this form?  Yes  No
Are t	here any criminal violations for disclosed person listed in Section 7.2 of this form?  Yes No

4.6	For each business concern disclosed in this statement (including each business concerdisclosed in this section) that is a publicly traded corporation, provide the following information for any other business concern (other than a chartered lending institution of an investment company which is publicly traded) holding more than five percent (5%) of the equity in such disclosed publicly traded corporation:  (Note: Provide a separate page for each business concern)			
	Business concern's name (Equity holder)			
	Business address: street or box number			
	City, state, zip			
	Date of establishment			
	Federal employer identification number			
	Business telephone number			
	Name of disclosed corporation in which this business concern holds interest			
	% of equity			
Are this fo	here any environmental violations for disclosed business concern listed in Section 7.1 of orm?			
	☐ Yes ☐ No			
Are the form?	here any criminal violations for disclosed business concern listed in Section 7.2 of this  Yes  No			

For each business concern disclosed in this statement (including each business concerdisclosed in this section) that is a publicly traded corporation, provide the following information for each chartered lending institution or investment company which publicly traded holding more than five percent (5%) of the equity in such disclose publicly traded corporation:  (Note: Provide a separate page for each chartered lending institution or investme company which is publicly traded).		
Chartered lending institution's name or name of investment company which is publicly traded(Note: The listed chartered lending institution or investment company which is publicly traded is not subject to further disclosure requirements unless additional information is expressly requested).		
Business address: street or box number		
City, state, zip		
Business telephone number		
Name of disclosed corporation in which this chartered lending institution or investment company which is publicly traded holds interest		

% of equity

For each business concern disclosed in this statement (including each business condisclosed in this section) that is a publicly traded corporation, list the followinformation for each individual or business concern holding more than five percent (or individuals related within the third degree holding a cumulative of five percent (5% more debt liability in such disclosed publicly traded corporation:  (Note: Provide a separate page for each individual or business concern).
Full Name (*Note: The listed individual or business concern is not subject to further disclosure requirements unless additional information is expressly requested).
Business address: street or box number
City, state, zip
Federal employer identification number (if applicable)
Name of disclosed publicly traded corporation in which the above individual or business concern holds debt liability
Amount of debt liability held in U.S. Dollars

% of total debt liability held

4.9	For each business concern disclosed in this statement (other than the applichartered lending institution, investment company which is publicly traded of liability holder), provide the following information for each officer, director or partner).  (Note: Provide a separate page for each officer, director or partner).	r a debt
	Business Concern's Name	
	Full Name of officer, director or partner	
	Business address: street or box number	
	City, state, zip	
	Date of birth	
	Social security number	
	Race	
	Gender	
	Business telephone number	
	Job title or description	
	here any environmental violations for disclosed officer, director or partner listed in f this form?  Yes  No	Section
Are th this fo	here any criminal violations for disclosed officer, director or partner listed in Section orm?  Yes  No	on 7.2 of

#### SECTION 5. BUSINESS EXPERIENCE OF APPLICANT AND ITS OFFICERS, DIRECTORS, PARTNERS AND KEY EMPLOYEES

Provide a description of the business experience and credentials of the applicant relate to the treatment, processing, storage or disposal of nonhazardous solid waste of hazardous waste. A separate description of business experience and credentials shoul also be included for each of the applicant's key employees, officers, directors an partners.
(Note: Provide a separate page for the applicant and each of the applicant's ke employees, officers, directors and partners).

b ti	Provide the following information for any past or present permits or licenses possess by the applicant, or any officer, director, partner or key employee of the applicant, for treatment, processing, storage or disposal of nonhazardous solid waste or hazardous waste:						
(.	(Note: Provide a separate page for each permit or license).						
Ī	Name of Permittee or Licensee						
F	Permit or License						
Po	Permit/License number (if any)						
Ī	ssuance date						
Ē	Expiration date (if any)						
N	Name of regulatory authority						
Ā	Address of regulatory authority: street or box number						
<del>-</del>	City, state, zip						
_ R	Regulatory authority telephone number						

Provide the following information for any other agency outside of Mississippi not listed in Section 5.2 that has or has had regulatory responsibility over the applicant and any parent, subsidiary and sister business concern disclosed in this disclosure statement (except those listed in Section 6.3) regarding the treatment, processing, storage or disposal of nonhazardous solid waste or hazardous waste within the five-year period immediately preceding the filing of the application:  (Note: Provide a separate page for each regulatory agency).
Name of regulatory authority
Regulatory authority address: street or box number
City, state, zip
Regulatory authority telephone number
Name(s) of disclosed persons regulated by the above authority:

### SECTION 6. SISTER BUSINESS CONCERNS

6.1	(This sub-section is applicable only if the applicant is seeking a permit to operate and/or construct a commercial nonhazardous solid waste management facility.)					
	If either the applicant or a parent business concern has engaged in the commercial treating, processing, storage or disposal of nonhazardous solid waste in Mississippi for fewer than five (5) years preceding the filing of the application, provide the following information about each sister business concern of the applicant that has engaged in the commercial treating, processing, storage or disposal of nonhazardous solid waste or hazardous waste within such five-year period:  (Note: Provide a separate page for each sister business concern).					
	Full name of sister business concern					
	Business address: street or box number					
	City, state, zip					
	Date of establishment					
	Federal employer identification number					
	Business telephone number					
Are the of this	ere any environmental violations for disclosed sister business concern listed in Section 7.1 form?  Yes  No					
Are the form?	ere any criminal violations for disclosed sister business concern listed in Section 7.2 of this  Yes  No					

6.2	(This sub-section is applicable only if the applicant is seeking a permit to operate and/or construct a commercial hazardous waste management facility.)				
	If either the applicant or a parent business concernating, processing, storage or disposal of hazardout five (5) years preceding the filing of the application about each sister business concern of the applicant treating, processing, storage or disposal of nonhazar within such five-year period:  (Note: Provide a separate page for each sister business)	ns waste in Mississippi for fewer than n, provide the following information that has engaged in the commercial rdous solid waste or hazardous waste			
	Full name of sister business concern				
	Business address: street or box number				
	City, state, zip				
	Date of establishment				
	Federal employer identification number				
	Business telephone number				
Are the	ere any environmental violations for disclosed sister form?	business concern listed in Section 7.1			
	☐ Yes ☐ No				
	ere any criminal violations for disclosed sister busines	ss concern listed in Section 7.2 of this			
form?					

Full name of sister bus	siness concern			
T dir ridirio or sister out				
Business address: stre	eet or box number			
City, state, zip				
Date of establishment				
Federal employer iden	tification number			
Business telephone nu	mber			
List and explain each environmental enforcement action and the name and address or regulatory agency involved in each action.				

#### SECTION 7. CIVIL OR CRIMINAL VIOLATIONS

·	7.1	For any person (including business concerns) listed in this disclosure statement, except those listed in Section 6.3, disclosed chartered lending institutions, any disclosed investment company which is publicly traded and disclosed debt liability holders, provide a listing and explanation of any:
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- (1) notices of violations
- (2) prosecutions
- (3) administrative orders (whether by consent or otherwise)
- (4) license or permit revocations or suspensions, &
- (5) enforcement actions of any other sort,

by any state or federal authority within the five-year period immediately preceding the filing of the application, which are pending or have concluded in a finding of violation or entry of consent agreement regarding any allegation of the civil or criminal violation of any law, regulation or requirement related to the treatment, processing, storage or disposal of nonhazardous solid waste or hazardous waste. Include the name and address of the regulatory agency involved in each action. (Note: Provide a separate sheet for each person).

· · · · · · · · · · · · · · · · · · ·		

For each person listed in this disclosure statement final convictions of and pleas of guilty or nolo of felony in any jurisdiction within the five-year per the application.  (Note: Provide a separate sheet for each person	ontendere to any crime punishable iod immediately preceding the fili
Name of disclosed person	
Jurisdiction in which felony occurred	
Description of felony:	

#### **SECTION 8. ADDITIONAL INFORMATION**

Iississippi Dep		-	

#### **SECTION 9. CERTIFICATION AND SIGNATURE**

I certify that the information provided in representation of that which is requested.	n this disclosure statement is a true and correct				
EXECUTED, this the day of	,·				
	Signature				
	Typed Name (as signed)				
	Title				
	Applicant				
	Business Address: street or box number				
	City, state, zip				
STATE OF					
COUNTY OF					
PERSONALLY APPEARED BEFO	ORE ME, the undersigned authority in and for the				
jurisdiction aforesaid, the within named	, who, after				
being by me first duly sworn, stated on oath that all of the matters and facts set forth in this					
disclosure statement are true and correct as h	erein stated.				
SWORN TO AND SUBSCRIBED B	EFORE ME, this the day of,				
My Commission Expires:	Notary Public				

10/97 rev.- RF\BADBOY\DISCLOSE.97