

**APPLICATION TO MODIFY A SOLID WASTE
DISPOSAL FACILITY PERMIT**

Date: _____ County: _____

Send to:

Solid Waste Permitting Unit
Waste Management Division
Dept. of Environmental Quality
707 N. Robinson (PO Box 1677)
Oklahoma City, OK 73101-1677

FOR DEQ USE	
DEQ Log No.	_____
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Date Received:	_____

_____ proposes to modify the permit of
(Applicant's Name)
the _____, located at _____
(Facility Name) *(Exact legal description:*

metes & bounds, platted lot, or land survey. Append extra sheets if necessary)

in _____ County, Oklahoma. We hereby make application for a modification of existing permit number _____ as required by the **Oklahoma Solid Waste Management Act** and the Rules pursuant thereto.

Remarks & brief description of proposed modification:

Applicant or Authorized Agent:

Preparing Engineer:

Signature

Typed Name

Signature

Typed Name

Address: _____
City: _____ State: _____

Address: _____
City: _____ State: _____

Date signed: _____
Phone: _____

Date signed: _____
Phone: _____

Facility Address (if any): _____

DEQ USE ONLY
