

APPLICATION FOR A PERMIT TO SPRAY IRRIGATE WASTEWATER

Groundwater Discharges Section, Division of Water Resources Delaware Department of Natural Resources and Environmental Control 89 Kings Highway, Dover DE 19901

	302-739	-9948
Please complete all items in print or type		
1. Required Documentation (For new ap	plicants only):	
Please attach the following: Local Zoni Material Safety Data Sheets applicable t	O 11	raft Trust Indenture (if applicable), and a copy of the
2. Tax Map Number:	235-6.00-28.09	
3. Permit Number (For renewals only):	359288-02	
4. Facility Owner/Permittee Information	:	
Name of Facility: Sussex Region	nal Recla	mation Facility (SRRF)
Name of Facility Owner/Permittee: Artesian Wastewater Management, Inc. Contact: Rodney Wyatt		Telephone Number: (302) 453-7319
		Fax Number: (302) 645-8233
Facility Owner or designee's Email Address:	vyatt@artesianv	water.com
Facility Owner's Business Mailing Address (street, city, state and zip code): 14701 Coastal Highway, Milton, DE 19968		Location of Facility (street, city, state and zip code): 12941 Isaacs Rd. Milton DE 19968
5. Facility Operator Information:		
Facilities with more than two operators, pleacommand.	ase attach a separat	te listing of operator information including a chain of
Name of Operator in Direct Responsible Charge	:	Telephone Number:
Stanley Siegfried		(302) 230-6364
		(302) 250-8364 Fax Number: (302) 645-8233
Operator in Direct Responsible Charge's Busine		(street, city, state and zip code):
14701 Coastal Highway, Milton, DE 1	19968	

License Number: 164



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Name of Back Up Operator(s): Sean Bowden	Telephone Number: (302) 218-5438		
	Telephone Number: (302) 218-5438 Fax Number: (302) 645-8233		
Back Up Operator's Business Mailing Address (street, city, state and zip code): 14701 Coastal Highway, Milton, DE 19968			
License Number(s): 721			
6. Permit Changes (For renewal applicants only):			
Are there any requested changes to the existing permit?			
YesNo If yes, please attach a detailed explanation of requested changes.			
7. Activities:			
Will the activities at the site vary from those detailed in the approved Design Development Report?			
X Yes No If yes, please attach a deta	iled explanation of any changes made.		
8. Public Notification			
Pursuant to 7 <u>Del. C.</u> , Chapter 60, §6004, an advertisement shall be placed in a newspaper of general circulation in the county(ies) in which the activity is proposed and in a daily newspaper of general circulation through the State, notifying the public that the application has been received by the Department and offering a brief description of the nature of the proposed activity. In accordance with 7 <u>Del. C.</u> , Chapter 60, §6004, the cost of such advertisement shall be borne by the applicant. This application will not be considered complete and cannot be processed unless accompanied by an advertising fee in the amount of Two Hundred Ten Dollars (\$210.00), payable to the State of Delaware.			
9. Certification:			
I certify that I am familiar with the information contained in the application and that to the best of my knowledge and belief such information is true, complete, and accurate.			
	Title of Applicant or Responsible Official: Vice President of Wastewater		
Signature of Applicant or Responsible Official:	Date: 2/4/2021		
Any person who knowingly makes any false statements, representation or certification on this application may be punished by a fine of not more that \$5,000 or by imprisonment for not more than six months, or both. (Delaware Environmental Protection Act, 7 <u>Del. C.</u> , Chapter 60, Section 6013, Criminal Penalties.)			

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