



APPLICATION FOR A PERMIT TO SPRAY IRRIGATE WASTEWATER

Ground Water 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 applicants only):

Please attach the following: Local Zoning Approval, a draft Trust Indenture (if applicable), and a copy of the Material Safety Data Sheets applicable to the facility.

2. Tax Map Number: 234-18.00-1.00

3. Permit Number (For renewals only): 359000-05

4. Facility Owner/Permittee Information:

Name of Facility: ANGOLA BEACH & ESTATES WASTEWATER TREATMENT FACILITY

Name of Facility Owner/Permittee:
HOMETOWN ANGOLA BEACH, LLC
C/O HOMETOWN AMERICA COMMUNITIES

Telephone Number: (856) 392-5650

Fax Number: (312) 205-1255

Facility Owner or designee's Email Address : TEdmonds@hometownamerica.net;

Facility Owner's Business Mailing Address (street, city, state and zip code):

ANGOLA BEACH & ESTATES
22971 SUBURBAN BOULEVARD
LEWES, DE 19958

Location of Facility (street, city, state and zip code):

23063 SUBURBAN BOULEVARD
LEWES, DE 19958

5. Facility Operator Information:

Facilities with more than two operators, please attach a separate listing of operator information including a chain of command.

Name of Operator in Direct Responsible Charge:

Winfield S. Walls III

Telephone Number: (302) 387-3105

Fax Number: (

Operator in Direct Responsible Charge's Business Mailing Address (street, city, state and zip code):

White Marsh Environmental Systems, Inc.
1100 S Little Creek Road
Dover, DE 19901

License Number: 963



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Name of Back Up Operator(s): **Ron Griffith**

Telephone Number:

Fax Number:

Back Up Operator's Business Mailing Address (street, city, state and zip code):
**White Marsh Environmental Systems,
Inc.
1100 S Little Creek Road
Dover, DE 19901**

License Number(s): **114**

6. Permit Changes (For renewal applicants only):

Are there any requested changes to the existing permit?

Yes No If yes, please attach a detailed explanation of requested changes.

7. Activities: Please refer to the Construction Application Permit 10.27.16

Will the activities at the site vary from those detailed in the approved Design Development Report?

Yes No If yes, please attach a detailed explanation of any changes made.

8. Public Notification

Pursuant to 7 Del. C., 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 Del. C., 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 One Hundred Forty Dollars (\$140.00), 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.

Printed Name of Applicant or Responsible Official:
Ms. Tara Edmonds

Title of Applicant or Responsible Official:
Regional Manager

Signature of Applicant or Responsible Official:

Date:
06/14/2024

Tara Edmonds

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 Del. C., Chapter 60, Section 6013, Criminal Penalties.)

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The document has been completed.