Limited Liability Company Landowner’s Authorization to Operate a Septage Detention or Treatment Facility

North Carolina Department of Environmental Quality
Division of Waste Management - Solid Waste Section
1646 Mail Service Center, Raleigh, NC 27699-1646

I hereby certify that the undersigned limited liability company, ____________________________, owns ________ acres of land located ___________________________ and identified by ___________________________ (book and page of recorded deed or tax map parcel) and that the limited liability company agrees to allow ___________________________ (SDTF permit applicant) to use said land for a septage detention or treatment facility for a period of ________ (length of time) beginning _________________ (give date), and that on behalf of the limited liability company, I have read the North Carolina Septage Management Rules*. ___________________________ (name of limited liability company) further understands that no septage may be stored or treated until the Division of Waste Management has issued a permit for a detention or treatment facility. The above described property is owned solely by the undersigned limited liability company, or jointly with ___________________________ ___________________________ (name all co-owners, or state none).

Date: __________________________

________________________
Limited Liability Company (Print Name)

________________________
Signature (Authorized Member or Manager)  Print Name and Title

North Carolina
__________________________ County

I, __________________________, a Notary Public for said County and State do hereby certify that ___________________________ (name of authorized member or manager of limited liability company) personally appeared before me this day and, being first duly sworn, acknowledged that he (she) is a (the) ___________________________ (member or manager) of ______________________________, a limited liability company, and that by authority duly given and as the act of the limited liability company, the foregoing instrument was signed in its name by its authorized ___________________________ (member or manager), and that the statements contained therein are true. Witness my hand and official seal, this the __________ day of __________________________, 20__________.

__________________________
Notary Public
My Commission expires: ____________ .

* 15A N.C. Admin. Code 13B Section .0800