



RECEIVED

WASTE MANAGEMENT
3001 SOUTH PIONEER DRIVE
SMYRNA, GEORGIA 30082
(404) 898-9288

JUL 15 2014

PLANNING & SUPPORT
AIR PROTECTION BRANCH

July 14, 2014

Transmitted via
Hand Delivery

Ms. Karen Hays
Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120
Atlanta, GA 30354

RE: Administrative Amendment Request to Title V Permit
Turkey Run MSW Landfill
Hogansville, Meriwether County, Georgia
Title V Permit No. 4953-199-0025-V-02-0
AIRS Number: 04-13-199-00025

Dear Ms. Hays:

It has come to our attention that we need an administrative amendment to the Title V permit issued to the Turkey Run Municipal Solid Waste Landfill located at 7144 Lone Oak Road, Hogansville, Georgia, 30230. This request is being made in accordance with Georgia Environmental Protection Division (EPD) Air Branch Rules For Air Quality Control chapter 391-3-1-.03(10)(e)(4). The original Title V permit, Number 4953-199-0025-V-02-0, was issued with the parent company name of Georgia Waste Systems, Inc. We request the parent company name be changed to Greenbow, LLC.

This requested name change of the parent/holding company name is not a transfer of ownership as Greenbow, LLC is a wholly owned subsidiary of Waste Management. As indicated on the EPD Air Branch website, an administrative amendment request must consist of a Title V application consisting of at least the following:

- A - Facility Information
- B - Facility Emissions
- C - Rule Applicability (for ENTIRE facility)
- Any other sections that pertain to changes being made.
- Notarized certification page signed by the "responsible official."

Enclosed you will find the Title V application with the changed information in sections A, B and C on CD and a notarized certification page. As required the electronic files have been created using the EPD Title V program and the CDs have been verified virus free.

There are no associated process or equipment changes associated with the amendment application.



MS. KAREN HAYS

JULY 14, 2014

PAGE 2

Should you have questions or need additional information, please feel free to call Tim Bassett at 404-808-8098 or Joel Scott with Atlantic Coast Consulting, Inc. at 770-594-5998.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gene Barnes'. The signature is fluid and cursive, with a long horizontal stroke at the end.

Gene Barnes

Director of Disposal Operations

Cc: Tim Bassett, Waste Management
Joel Scott, ACC
Operating Record

Certifications and Signatures

Facility Name: Turkey Run Municipal Solid Waste LF

Project Name: 2014 Administrative Ammendment

AIRS Number: 131990025

Submittal File Name: 131990025_20140711.mdb

COMPUTER DISK VIRUS EXAMINATION CERTIFICATION:

I certify that, to the best of my knowledge, the completed electronic application disk has been inspected and found free of any known viruses.

Signature: Soel Scott

Date: 7/11/14

Name (print): Soel Scott

Official Title: VP-Landfill Operations Atlantic Coast Consulting, Inc

SOFTWARE USAGE CERTIFICATION:

I certify that the software used to complete the Georgia Title V application was used as provided by the Georgia Environmental Protection Division, Air Protection Branch and was unaltered in any way. I understand that the submission of a Title V (Part 70) application completed using any altered version of the provided software constitutes the submission of an incomplete application and that such action may be subject to enforcement by the Georgia Air Protection Branch and/or the US EPA.

CERTIFICATION OF COMPLIANCE:

Except as stated on the Compliance Plan For a Non-Compliant Emission Unit or Group form of this application, I hereby certify that this facility is in compliance with all applicable requirements effective as of the date of this certification and will continue to comply with such requirements. For applicable requirements promulgated as of the date of this certification, that will become effective during the permit term, I further certify that, except as stated on the Compliance Plan For a Non-Compliant Emission Unit or Group form of this application, this facility will comply with such requirements and will continue to comply with such requirements.

I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this application and all of its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

Unless otherwise required by the Director, compliance certifications will be submitted to the Director at least annually.

SIGNATURE OF RESPONSIBLE OFFICIAL:

Signature: Gene Barnes

Date: 7/15/2014

Name (print): GENE BARNES

Official Title: Director of Operations

Address: 1850 Parkway Place

MARIETTA GA 30067

Notary Public Certification of Responsible Official's Signature:

Signature of Notary Public: [Signature]

