VIRGINIA POLLUTION ABATEMENT PERMIT APPLICATION MODIFICATION REQUEST FORM

- **Owner Name:** Synagro Central, LLC 1 Mailing Address: 1681 Tappahannock Blvd, Tappahannock, VA 22560 804-443-2170 Telephone Number: **Email Address:** wwebb@synagro.com and cwhiteside@synagro.com **Owner Contact:** 2 Wayne Webb Title: Technical Services Manager 1681 Tappahannock Blvd, Tappahannock, VA 22560 Mailing Address: **Telephone Number:** 804-443-2170 Email Address: wwebb@synagro.com and cwhiteside@synagro.com VPA Permit No: VPA 00835 3. Location of Operation: Westmoreland County 4. Total Acreage to be Added: 5. 1,863.4
- 6. VPA Public Notice Billing Information Attached:
- 7. Consent to Receive Electronic Mail:

The Department of Environmental Quality (DEQ) may deliver permits, certifications and plan approvals to recipients, including applicants or permittees, by electronically certified mail where the recipients notify DEQ of their consent to receive mail electronically (§ 10.1-1183). Check *only one* of the following to consent to or decline receipt of electronic mail from DEQ as follows:

- Applicant or permittee agrees to receive by electronic mail the permit and any plan approvals associated with the permit that may be issued for the proposed pollutant management activity, and to certify receipt of such electronic mail when requested by the DEQ. Please provide email: Wwebb@synagro.com and Cwhiteside@synagro.com
- Applicant or permittee declines to receive by electronic mail the permit and any plan approvals associated with the permit that may be issued for the proposed pollutant management activity.
- 8. Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering information, the information submitted is to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations. I further certify that I am an authorized signatory as specified in the VPA Permit Regulation (9VAC25-32).

T.).) II ~ Signature:

Date: 11-15-2022

Printed Name: Wayne Webb

Title: Technical Services Director