

WASTE LICENCE APPLICATION FORM#

PART 4: APPLICATION FORM FOR CLOSURE

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Section of this form to fill:

Section 2, 3a, 3b, 3c of part 2 of this form.

Documentation Requirements:

Every closure application for facilities shown in the table below must as a minimum be accompanied by documentation as indicated hereafter

Requirements	Recycling &/ recovery Facility	Storage &/ transfer Facility	Treatment facility	Disposal facility
Design of storm-water management	X	Х	X	Х
Design of leachate management				Х
Design & duration of landfill gas monitoring and management				Х
Design of settlement/surface pondage				Х
Design of access roads				Х
Topographic Map indicating the property	Х	Х	Х	
Topographic Map indicating the landfill property boundary, cells (fill				Х
areas), wells, and structures within and surrounding the landfill site				
Plan Drawings (including Final Contour Grade Map) indicating				Х
(a) the final contours and vegetation in relationship to the surrounding				
land and any run-off control structures				
Plan Drawings (including Final Contour Grade Map) indicating				Х

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(b) well location(s), depth to groundwater and flow direction				
Plan Drawings (including Final Contour Grade Map) indicating				Х
(c) the locations at which gas monitoring takes place				
drawings showing the proposed final restored profile for the landfill				Х
accompanied by calculations of the remaining tonnages of waste (void				
space) and materials necessary to close, cap and restore the landfill				
Provision of services that were provided by the facility being closed	Х	Х	X	Х
Post Closure Site management & Operation	Х	Х	Х	Х
Monitoring Plan	Х	Х	Х	Х
Emergency Preparedness plan	Х	Х	Х	Х
Rehabilitation measures including removal of site structures,	Х	Х	Х	Х
Rehabilitation measures including waste compaction and capping;				Х
application of topsoil & vegetation establishment				
Procedures for the inspection or auditing of the rehabilitation process	Х	Х	Х	Х
and mechanisms for reporting to the licensing authority.				
long and short term stability				Х
procedures and timescales for ensuring final levels are achieved				Х

Signature of Applicant
Name of company:
Date:
Signature of the Commissioner of Oaths:
Date:
Designation:
Official stamp (Above)

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