



**STATE OF TENNESSEE
DEPARTMENT OF ENVIRONMENT AND CONSERVATION**

Division of Solid Waste Management
William R. Snodgrass Tennessee Tower
312 Rosa L. Parks Avenue, 14th Floor
Nashville, Tennessee 37243

Landfill Operator Re-Certification

The undersigned landfill operator has obtained twenty-four (24) credit hours for re-certification in accordance with Tennessee Department of Environment and Conservation, Division of Solid Waste Management (TDEC-SWM) Rule 0400-11-01-.12(1)(c)4.

Further, the undersigned will submit a check or credit card payment for \$100.00 in order to receive a Tennessee Department of Environment and Conservation certificate in accordance with TDEC-SWM Rule 0400-11-01-.12(1)(c)9(ii).

Method of Payment

Please make check payable to **Treasurer, State of Tennessee** and in the amount of **\$100.00**.

Signature: _____

Print Name: _____

(as to appear on certificate)

Social Security Number: _____

Name of Facility: _____

Title: _____

Address: _____

City/State/Zip: _____

E-mail Address: _____

Phone: () _____ Fax: () _____

Please return to the above address, attention **Division of Solid Waste Management**.