STATE OF CALIFORNIA
DEPARTMENT OF RESOURCES RECYCLING AND RECOVERY
REGIONAL WATER QUALITY CONTROL BOARD
APPLICATION FOR SOLID WASTE FACILITY PERMIT AND WASTE DISCHARGE REQUIREMENTS
CALRECYCLE E-1-77 (Rev. 11-15)

NOTE: This form has been developed for multiple uses. It is the transmittal sheet for documents required to be submitted to the appropriate agency. Please refer to the attached instructions for definitions of terms and for completing this application form in a complete and correct manner.

FOR OFFICIAL USE ONLY

SWIS/WDID/Global ID NUMBER: 56-AA-0005
FILING FEE: $10,000.00
RECEIPT NUMBER: RP0102821
DATE ACCEPTED: JAN 29 2021
DATE REJECTED: 
ACCEPTANCE DATE OF INCOMPLETE APPLICATION: 
DATE DUE: 

Part 1. GENERAL INFORMATION
A. ENFORCEMENT AGENCY:
Ventura County Environmental Health Division
B. COUNTY:
Ventura
C. TYPE OF APPLICATION (Check one box only):

☐ 1. NEW SWFP and/or WDRS
☐ 2. CHANGE TO SWFP and/or WDRS
☐ ☐ REVISION  ☐ MODIFICATION  ☐ OTHER (As authorized by law)
☐ 3. WAIVER
☐ 4. PERMIT REVIEW
☐ 5. AMENDMENT OF APPLICATION
☐ 6. RF/ROWD/JTD AMENDMENTS

Part 2. FACILITY DESCRIPTION
A. NAME OF FACILITY:
Toland Road Landfill
B. LOCATION OF FACILITY:
1. PHYSICAL ADDRESS OR LOCATION AND ZIP CODE:
3500 Toland Road, Santa Paula, CA 93060
2. LATITUDE AND LONGITUDE:
34°24'06" : 18°00'49"
3. LEGAL DESCRIPTION OF PERMITTED BOUNDARY BY SECTION, TOWNSHIP, RANGE, BASE, AND MERIDIAN, IF SURVEYED:
See Solid Waste Facility Permit
C. TYPE OF ACTIVITY: (Check applicable boxes):

☐ 1. DISPOSAL
☐ ☐ 3. TRANSFORMATION
☐ ☐ 5. C&D/INERT DEBRIS PROCESSING
☐ a. TYPE: Class III MSW
☐ ☐ 2. COMPOSTABLE MATERIALS HANDLING
☐ ☐ 4. TRANSFER/PROCESSING
☐ ☐ 6. IN-VESSLE DIGESTION
☐ ☐ 7. OTHER (describe): 
☐ ☐ 2. ASBESTOS Friable ☐ Non-friable
☐ ☐ 8. DEAD ANIMALS
☐ ☐ 9. INDUSTRIAL
☐ ☐ 10. INERT
☐ ☐ 11. LIQUIDS
☐ ☐ 12. MUNICIPAL SOLID WASTE (MSW)
☐ ☐ 13. SEWAGE SLUDGE
☐ ☐ 14. WASTE TIRES
☐ ☐ 15. OTHER (describe):
D. IDENTIFICATION OF FACILITY IN CIWMP [CONFORMANCE FINDING]:

☐ 1. FACILITY IS IDENTIFIED IN (Check one):
☐ ☐ SITING ELEMENT DATE OF DOCUMENT 11/01/2000 PAGE #
☐ ☐ NONDISPOSAL FACILITY ELEMENT DATE OF DOCUMENT 
PAGE #
E. TYPE OF PERMITTED WASTES TO BE RECEIVED: (Check applicable boxes):

☐ 1. AGRICULTURAL
☐ ☐ 6. CONSTRUCTION/DEMOLITION
☐ ☐ 11. LIQUIDS
☐ ☐ 2. ASBESTOS Friable ☐ Non-friable
☐ ☐ 7. CONTAMINATED SOILS
☐ ☐ 12. MUNICIPAL SOLID WASTE (MSW)
☐ ☐ 3. ASH
☐ ☐ 8. DEAD ANIMALS
☐ ☐ 13. SEWAGE SLUDGE
☐ ☐ 4. AUTO SHREDDER
☐ ☐ 9. INDUSTRIAL
☐ ☐ 14. WASTE TIRES
☐ ☐ 5. COMPOSTABLE MATERIAL (describe):
### Part 3. FACILITY INFORMATION

#### A. FACILITY INFORMATION:

1. INFORMATION APPLICABLE TO ALL EXISTING FACILITIES:

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Maximum Daily Tonnage</td>
<td>1500 tpd</td>
</tr>
<tr>
<td>b. As-Designed Daily Tonnage</td>
<td>1500 tpd</td>
</tr>
<tr>
<td>c. Facility Size (acres)</td>
<td>216.5</td>
</tr>
<tr>
<td>d. Maximum Traffic Volume Per Day (vpd)</td>
<td>210 vpd</td>
</tr>
<tr>
<td>e. Days and Hours of Operation</td>
<td>See JTD</td>
</tr>
</tbody>
</table>

2. PROPOSED CHANGE(S) OR INFORMATION APPLICABLE TO NEW S AND/OR WDRs

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Maximum Daily Tonnage</td>
<td>2864 tpd</td>
</tr>
<tr>
<td>b. As-Designed Daily Tonnage</td>
<td>2964 tpd</td>
</tr>
<tr>
<td>c. Facility Size (acres)</td>
<td>216.5</td>
</tr>
<tr>
<td>d. Maximum Traffic Volume Per Day (vpd)</td>
<td>210 vpd</td>
</tr>
<tr>
<td>e. Days and Hours of Operation</td>
<td>See JTD</td>
</tr>
</tbody>
</table>

#### 3. ADDITIONAL INFO. REQUIRED FOR COMPOSTABLE MATERIALS HANDLING FACILITIES ONLY:

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Total Site Capacity (cu yds)</td>
<td>30,000,000 cu yds.</td>
</tr>
</tbody>
</table>

#### 4. ADDITIONAL INFORMATION REQUIRED FOR LANDFILLS ONLY:

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Average Daily Tonnage (TPD)</td>
<td>1900 tpd (projected) 1394 tpd (current)</td>
</tr>
<tr>
<td>b. Site Capacity Currently Permitted (Airspace) (cu yds)</td>
<td>30,000,000 cu. yds.</td>
</tr>
<tr>
<td>c. Site Capacity Proposed (Airspace) (cu yds)</td>
<td>30,000,000 cu. yds.</td>
</tr>
<tr>
<td>d. Site Capacity Used To Date (Airspace) (cu yds)</td>
<td>14,753,161 cu. yds.</td>
</tr>
<tr>
<td>e. Site Capacity Remaining (Airspace) (cu yds)</td>
<td>8,298,614 cu yds.</td>
</tr>
<tr>
<td>f. Date of Capacity Information (Date) (See instructions):</td>
<td>06/11/2020</td>
</tr>
<tr>
<td>g. Last Physical Site Survey (Date)</td>
<td>06/11/2020</td>
</tr>
<tr>
<td>h. Estimated Closure Date (month and year)</td>
<td>April 2033</td>
</tr>
<tr>
<td>i. Disposal Footprint (acres)</td>
<td>91.4</td>
</tr>
<tr>
<td>j. Site Capacity Planned (cu yds)</td>
<td>0</td>
</tr>
<tr>
<td>k. 1. (i) In-Place Waste Density (lbs of waste per cu yd of waste)</td>
<td>1283</td>
</tr>
<tr>
<td>(ii) Waste-to-Cover Ratio (Estimated) (v:v)</td>
<td>5:1</td>
</tr>
<tr>
<td>2. Airspace Utilization Factor (tons of waste per cu yd of landfill airspace)</td>
<td></td>
</tr>
</tbody>
</table>

### Part 4. SOURCE OF WATER SUPPLY (Check applicable boxes)

- [ ] A. Municipal or Utility Service:
- [ ] B. Individual (wells):
  - Toland Road Deep Well
- [ ] C. Surface Supply:
  1. Name of Stream, Lake, ETC. :
  2. Type of Water Rights:
     - [ ] Riparian
     - [ ] Appropriation

3. State Permit or License number, if applicable: [ ]
Part 5. COMPLIANCE WITH CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) (Check applicable boxes)

A. CHECK BOX(ES) IF ENVIRONMENTAL DOCUMENT WAS OR WILL BE PREPARED FOR THIS PROJECT:

- [ ] ENVIRONMENTAL IMPACT REPORT (EIR) SCH# 95031009
- [ ] NEGATIVE DECLARATION (ND)/MITIGATED NEGATIVE DECLARATION (MND) SCH#
- [ ] ADDENDUM TO (Identify environmental document) Toland Optimization Plan Draft SEIR SCH# 2018011026

B. IF ENVIRONMENTAL DOCUMENT(S) WAS NOT PREPARED, PLEASE PROVIDE THE FOLLOWING INFORMATION:

- [ ] CATEGORICAL/STATUTORY EXEMPTION (CE/SE)

Part 6. LIST OF ATTACHMENTS (Fill in the date for each document checked)

A. REQUIRED WITH ALL APPLICATION SUBMITTALS:

- [ ] RFV/1TD 12/31/2020
- [ ] LOCATION MAP 12/31/2020
- [ ] MITIGATION MONITORING & REPORTING PROGRAM
- [ ] LIST OF PUBLIC HEARINGS AND OTHER MEETINGS OPEN TO THE PUBLIC

B. ADDITIONAL REQUIRED DOCUMENTS FOR DISPOSAL FACILITIES ONLY:

- [ ] OPERATING LIABILITY FINANCIAL MECHANISM
- [ ] CLOSURE/POST CLOSURE MAINTENANCE PLAN

C. IF APPLICABLE:

- [ ] REPORT OF WASTE DISCHARGE
- [ ] STORMWATER PERMIT APPLICATION
- [ ] NPDES PERMIT APPLICATION
- [ ] OTHER

Part 7. OWNER INFORMATION (For disposal site, if operator is different from land owner, attach lease or other agreement)

- [] GOVERNMENT AGENCY

OWNER(S) OF LAND
(Name):
Ventura Regional Sanitation District

ADDRESS, CITY, STATE, ZIP
1001 Partridge Drive, Suite 150, Ventura, CA 93003

TELEPHONE #: (805) 658-4678
FAX #: 952-67-9561
Part 8. OPERATOR INFORMATION (For disposal site, if operator is different from land owner, attach lease or other agreement)

<table>
<thead>
<tr>
<th>TYPE OF BUSINESS:</th>
<th>□ SOLE PROPRIETORSHIP</th>
<th>□ PARTNERSHIP</th>
<th>□ CORPORATION</th>
<th>✔ GOVERNMENT AGENCY</th>
</tr>
</thead>
</table>

**FACILITY OPERATOR(S):**

(Name):
Ventura Regional Sanitation District

**ADDRESS, CITY, STATE, ZIP:**
1001 Partridge Drive, Suite 150, Ventura, CA 93003

**ADDRESS WHERE LEGAL NOTICE MAY BE SERVED:**

**TYPE:**

- [ ] SOLE PROPRIETORSHIP
- [ ] PARTNERSHIP
- [ ] CORPORATION
- [X] GOVERNMENT AGENCY

**SSN OR TAX ID #:**
952-67-9561

**TELEPHONE #:**
(805) 658-4678

**FAX #:**

**E-MAIL ADDRESS:**
edwardpettit@vrsd.com

**CONTACT PERSON (Print Name):**
Edward Pettit

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**Part 9. SIGNATURE BLOCK**

**Owner:** Ventura Regional Sanitation District

I certify under penalty of perjury that the information I provided for this application and for any attachments is true and accurate to the best of my knowledge and believe that the operator intends to operate a solid waste facility at the site specified above pursuant to this application and understand that I may be responsible for it should the operator fail to meet applicable requirements.

**SIGNATURE (LAND OWNER OR AGENT):**

[Signature]

**PRINTED NAME:**
Edward Pettit

**TITLE:** Regulatory Compliance Officer

**DATE:** 12/31/2020

**Lessee:**

I certify under penalty of perjury that the information I provided for this application and for any attachments is true and accurate to the best of my knowledge and believe that the operator intends to operate a solid waste facility at the site specified above pursuant to this application.

**SIGNATURE (LESSEE):**

[Signature]

**PRINTED NAME:**

**TITLE:**

**DATE:**

**Operator:**

I certify under penalty of perjury that the information contained in this application and all attachments are true and accurate to the best of my knowledge and belief.

**SIGNATURE (FACILITY OPERATOR OR AGENT):**

[Signature]

**PRINTED NAME:**
Edward W. Pettit

**TITLE:** Regulatory Compliance Officer

**DATE:** 2/4/21