



Delaware Department of Natural Resources and Environmental Control
Solid & Hazardous Waste Management Branch

Solid Waste Management Facility Application – Part I

Please type or print all information

1. Facility Permit Information: (if applicable)

A. Permit Number: SW 98/01

B. Date of Expiration: January 15, 2007

C. Are you requesting any changes to the conditions required by the current solid waste facility permit?

Yes

No

(If "Yes", please attach the request and supporting documents.)

2. Facility Information:

Facility Name: INVISTA S.à r.l. – Seaford

Street: 25876 DuPont Road

City: Seaford County: Sussex State: Delaware

Zip: 19973 Phone(s): (302) 629-1100 Fax: (302) 629-1809

Total Site Area (Acres): 60 Latitude: 38/37/24 N Longitude: 75/38/01 E

3. Owner Information:*

Owner's Name: INVISTA S.à r.l.

Contact Person: Gary R. Knight Title: Site Manager

Street Address: 25876 DuPont Road

City: Seaford State: Delaware Zip: 19973

Phone: (302) 629-1376 Fax: (302) 629-1809 Email: Gary.R.Knight-1@invista.com

4. Operator Information:

Operator's Name: INVISTA S.à r.l. – Seaford

Contact Person: Michael A. Terry Title: Environmental Manager

Street Address: 25876 DuPont Road

City: Seaford State: Delaware Zip: 19973

Phone: (302) 629-1221 Fax: (302) 629-1839 Email: Michael.A.Terry@invista.com

5. Type of Facility:

- Sanitary Landfill Industrial Landfill
 Transfer Station Materials Recovery Facility
 Thermal Recovery Other _____

6. Types of Solid Waste to be Accepted (check all that apply):

- Municipal Industrial Infectious Other (specify) _____

7. Service Area (political jurisdictions and unincorporated area to be served by the facility):

INVISTA Seaford Site Powerhouse Facilities

8. Estimated Quantities of Waste Expected to be Handled at the Facility:

- A. Average daily tonnage expected during peak season (may be a range): _____ N/A _____
B. Maximum daily tonnage expected: _____ N/A _____ tons
C. Average weekly tonnage expected during peak season (may be a range): _____ N/A _____
D. Maximum weekly tonnage expected: _____ 340 - 480 _____ tons

Note: Maximum daily and weekly tonnages must consider operating hours and days specified in Section 11 of this form. Analysis required by the Environmental Assessment must consider maximum expected tonnages whenever estimates of waste handling activity are needed. The Engineering Report required by the DRGSW must indicate the maximum tonnage which the facility is designed to process (per hour/per day).

9. Disposal Capacity of Proposed Landfill Cells (if applicable):

- A. Cell Designation: _____ Active: Cells 1-12; Inactive: not designated _____
B. Cell Acreage: _____ Active: 12.25 acres _____
C. Cell Capacity (years): _____ Active: 21 years _____
D. Cell Capacity (cubic yards): _____ Active: 690,000 c.y. _____

10. Disposal Capacity Remaining in Existing Landfill (if applicable):

_____ 600,000 c.y. _____

11. Operating Hours:

A. Daily Operating Hours (include all time periods when waste may be handled): 24 hours/day

Site Mfg. Operation

B. Daily Business Hours (i.e. hours open to the public): N/A

C. Days of Operation: 7 days/week

D. Operating Days Per Year: 365 days/year

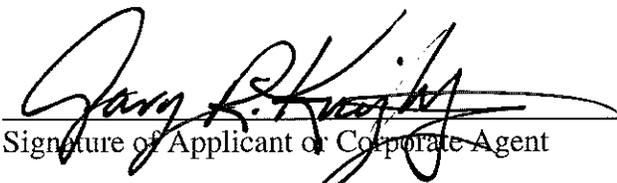
12. Applicant Background Information:

If an Application Background Statement is required by 7 Del. C., Chapter 79, please complete the Solid Waste Facility Permit Application – Part II.

Has a Solid Waste Facility Permit Application – Part II been completed and attached? Yes No
Is any information in the Solid Waste Facility Permit Application – Part II considered by the applicant to be confidential? Yes No

INSTRUCTION: The applicant may claim that some of the information presented in the Applicant Background Statement is confidential. An applicant wishing to make such a claim should write, preferably in red ink, "claimed confidential information" at each point in the response where such confidentiality is claimed, and provide an explanation of why the release of such information would constitute an invasion of personal privacy or would seriously affect the applicant's business or competitive situation. The confidentiality determination will be subject to the **FOIA Regulation, Section 6.**

I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in the application and all attachments and that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

7/27/2007 Date  Signature of Applicant or Corporate Agent

Name: Gary R. Knight Phone: (302) 629-1376

Title: Site Manager Email: Gary.R.Knight-1@invista.com

Company: INVISTA S.à r.l.

Address: 25876 DuPont Road

Seaford, Delaware 19973