



Enter your transmittal number

E586204

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://www.state.ma.us/scripts/dep/trasmfrm.stm> or call DEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application. Copy 2 must accompany your fee payment. Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

DEP
P.O. Box 4062
Boston, MA
02211

* Note:
For BWSC Permits,
enter the LSP.

A. Permit Information

BWS02

TIER IB PERMIT

1. Permit Code: 7 or 8 character code from permit instructions

2. Name of Permit Category

INITIAL APPLICATION FOR TIER I PERMIT

3. Type of Project or Activity

B. Applicant Information – Firm or Individual

AVX CORPORATION

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

SLAVITT

EVAN

2. Last Name of Individual

3. First Name of Individual

4. MI

PO BOX 867 801 17TH AVENUE SOUTH

5. Street Address

MYRTLE BEACH

SC

295780867

8439650624

6. City/Town

7. State

8. Zip Code

9. Telephone #

10. Ext. #

11. Contact Person

12. e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

AEROVOX INC

1. Name of Facility, Site Or Individual

740 BELLEVILLE AVE

2. Street Address

NEW BEDFORD

3. City/Town

MA

027400000

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. DEP Facility Number (if Known)

9. Federal I.D. Number (if Known)

4 601

10. BWSC Tracking # (if Known)

D. Application Prepared by (if different from Section B)*

WADE

MARILYN M

1. Name of Firm Or Individual

5 INDUSTRIAL WAY,URS CORP

2. Address

SALEM

NH

030790000

6038930616

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

4513

9. LSP Number (BWSC Permits only)

E. Permit - Project Coordination

1. Is this project subject to MEPA review? yes no

If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

F. Amount Due

DEP Use Only

Special Provisions:

1. Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).

There are no fee exemptions for BWSC permits, regardless of applicant status.

2. Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).

3. Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).

4. Homeowner (according to 310 CMR 4.02).

Reviewer:

Check Number

Dollar Amount

Date

Permit No:

8/15/2013 6:26:47 PM

Rec'd Date: