

Solid Waste Permit - ATTACHMENT D

PERMISSION TO MORTGAGE A CERTIFICATE

| Name on Certificat | te: | | | | | |
|---|-------------------|--------------------------------|--------------------------------|------------------------|--|--|
| Trade Name (if app | olicable): | | | | | |
| Mailing Address: | | | | | | |
| Physical Address: | | | | | | |
| Phone Number: | | | | | | |
| Fax Number: | r: Email address: | | | | | |
| Contact Name: | | Certificate Number: G - | | | | |
| Type of Business | | | | | | |
| Individual | Partnership | Corporation | Other (LP, LLP, LLC) | State of Incorporation | | |
| List the name, title and percentage of all partner's share or stock distribution for major stockholders: | | | | | | |
| Name | Name Title | | Stock Distribution/% of Shares | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| You must attach a copy of the mortgage and a Profit and Loss Statement for the 12-month period indicated below. | | | | | | |
| Amount of Mortgage: | | D | Date Mortgage is in Effect: | | | |
| Mortgage will be due and payable as follows: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Mortgage is incurred for the following purpose: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Indicate other property to be secured by the mortgage: | | | | | | |

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Solid Waste Permit - ATTACHMENT D continued

| For the most recent 12-month period er certificate holder consist of the followin | _ | the internally | generated funds of the |
|--|-----------------------------|----------------|-------------------------------|
| | D | epreciation | \$ |
| | N | let Income | \$ |
| | 0 | ther | \$ |
| | T | otal: | \$ |
| Less the estimated payments during the | next 12-month period for: | | |
| Int | erest in existing debt | | \$ |
| Int | erest on proposed debt | | \$ |
| Pri | ncipal payments on existing | debt | \$ |
| Pri | ncipal payments on propose | ed debt | \$ |
| Pa | yments on other long-term o | obligations | \$ |
| | Т | otal: | \$ |
| Balance of internal funds available for o | ther purposes: \$ | | |
| If internally generated funds are insufficed report the source and amount of other to | | • | erest and principal payments |
| I certify this information is true and cor of the applicant, and that all information | | o execute an | d file this document on behal |
| | | | |
| Name of Applicant | Signature | | Date |

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