

IOWA DEPARTMENT OF NATURAL RESOURCES

COMPOST FACILITY

PERMIT APPLICATION FORM 50A



- ☐ New Permit
- ☐ Permit Renewal (permit number) _____ -SDP- _____ -COM
- ☐ Permit Amendment

SECTION 1. FACILITY CONTACT INFORMATION

Facility

Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

County: _____

Responsible Official for the Facility

Name: _____ Phone: _____

Address: _____

City, State, Zip: _____ E-mail: _____

Owner of Site

Name: _____ Phone: _____

Address: _____

City, State, Zip: _____ E-mail: _____

Site Legal Description

Legal Description: _____

¼, ¼, Section, Township (N), Range (E/W), County: _____

Facility Owner/Operator

Name: _____ Phone: _____

Address: _____

City, State, Zip: _____ E-mail: _____

Design Engineer (PE) (if any)

Name: _____ Phone: _____

Address: _____

City, State, Zip: _____ E-mail: _____

Iowa Engineer License #: _____ Expiration Date: _____

SECTION 2. SITE INFORMATION

- ☐ This facility is part of the following solid waste comprehensive planning area:

Planning Area: _____ Date of Last Approved Plan: _____

Days and hours of operation of the facility: _____

Open to the public? ☐ Yes ☐ No

Type and expected weight (tons) of solid waste feedstocks to be handled per day, week and year at the facility:

per day _____

per week _____

per year _____

SECTION 3. PERMIT APPLICATION CHECKLIST

Checking the appropriate boxes below certifies that the documents submitted in conjunction with this application form are complete and in compliance with the applicable chapters of the Iowa Administrative Code. While some of the documents below may have been submitted previously, updated copies of each is required to be provided with each permit renewal application, unless a prior document remains current and is identified by Doc ID# below. If an application is found by the department to be incomplete, it may be denied and returned to the applicant.

Required Documents

☐ **Section A. Executive Summary (permit renewals only)**

- Summary of modifications, if any, to the facility that occurred during the current permit cycle.
- Summary of each permit amendment, if any, that occurred during the current permit cycle to determine if it shall be included with the renewed permit, be revised or be removed.
- Provide documentation and certification as required for new permit provision requests, if any.

☐ **Section B. Site Map or Aerial Photograph (IAC [567 105.8\(1\)](#))**

No Revision Required - See Doc ID#: _____

☐ **Section C. Site Design Plan (IAC [567 105.8\(2\)](#))**

No Revision Required - See Doc ID#: _____

☐ **Section D. Site Operation Plan (IAC [567 105.8\(3\)](#))**

No Revision Required - See Doc ID#: _____

☐ **Section E. Operator Certification (IAC [567 105.10](#))**

No Revision Required - See Doc ID#: _____

☐ **Section F. Site Closure Plan (IAC [567 105.13](#))**

No Revision Required - See Doc ID#: _____

☐ **Section G. Proof of Financial Assurance (IAC [567 105.14](#))**

No Financial Assurance needed if receiving less than 5,000 tons of feedstock annually, bulking agent excluded.

SECTION 4. APPLICANT CERTIFICATION

Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

I further certify that the construction and operation of the above described facility will be in accordance with the plans, specifications, reports and related communications accepted by the Iowa Department of Natural Resources and on file in its office; and in accordance with conditions imposed in the permit issued by the Iowa Department of Natural Resources.

Signature of Permit Applicant: _____ **Date:** _____

Printed Name: _____ **Title:** _____

Application for a solid waste compost facility must be accompanied by the plans, specifications, and additional information required by the applicable solid waste rules under Iowa Administrative Code 567 Chapter 105.

Send completed application with attached information to Becky.Jolly@dnr.iowa.gov, or:

Iowa Department of Natural Resources
Land Quality Bureau
Solid Waste Section
502 E 9th St
Des Moines, IA 50319-0034

For questions concerning this application please contact the Department at 515-721-7979 or

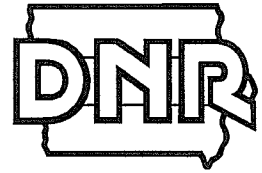
Theresa.Stiner@dnr.iowa.gov.



IOWA DEPARTMENT OF NATURAL RESOURCES

COMPOST FACILITY

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- ☐ New Permit
- ☒ Permit Renewal (permit number) 82 -SDP- 12 -93 -COM
- ☐ Permit Amendment

SECTION 1. FACILITY CONTACT INFORMATION

Facility

Name: Davenport Compost Facility Phone: 563-328-7225

Address: 2707 Railroad Ave. P.O. Box 3606 City, State, Zip: Davenport, IA 52808

County: Scott

Responsible Official for the Facility

Name: Todd Jones Phone: 563-328-7225

Address: 2707 Railroad Ave. P.O. Box 3606

City, State, Zip: Davenport, IA 52808 E-mail: Todd.Jones@davenportiowa.com

Owner of Site

Name: City Of Davenport Phone: 563-326-7711

Address: 226 W. 4th Street

City, State, Zip: Davenport, IA 52801 E-mail: _____

Site Legal Description

Legal Description: NE 1/4, SEC 8, NW 1/4, SEC 9, T77N, R3E

¼, ¼, Section, Township (N), Range (E/W), County: Scott

Facility Owner/Operator

Name: Robert Bartleson Phone: 563-888-2100

Address: 2707 Railroad Ave. P.O. Box 3606

City, State, Zip: Davenport, IA 52808 E-mail: Robert.Bartleson@davenportiowa.com

Design Engineer (PE) (if any)

Name: Robert G. Meyer PE -Environet, INC. Phone: 563-323-2262

Address: 1225 East River Drive, Suite 130

City, State, Zip: Davenport, IA 52803 E-mail: _____

Iowa Engineer License #: 06788 Expiration Date: _____

SECTION 2. SITE INFORMATION

- ☒ This facility is part of the following solid waste comprehensive planning area:

Planning Area: Bi-State Regional Planning Area-Iowa Region Date of Last Approved Plan: 05-2023

Days and hours of operation of the facility: 12-1 thru 3-31 8am-3pm M-F, 4-1 thru 11-30 730am-530pm M-F 8am-3pm Weekend

Open to the public? ☒ Yes ☐ No

Type and expected weight (tons) of solid waste feedstocks to be handled per day, week and year at the facility:

per day Yardwaste: 41 tons Wood waste: 25 tons Treated Sewage Sludge: 110 tons

per week Yardwaste: 1,138 tons Wood waste: 674 tons Treated Sewage Sludge: 2,212 tons

per year Yardwaste: 13,650 tons Wood waste: 8,086 tons Treated Sewage Sludge: 26,539 tons

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No Revision Required - See Doc ID#: _____

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☐ **Section D. Site Operation Plan (IAC [567 105.8\(3\)](#))**

No Revision Required - See Doc ID#: _____

☒ **Section E. Operator Certification (IAC [567 105.10](#))**

No Revision Required - See Doc ID#: Certifications attached

☒ **Section F. Site Closure Plan (IAC [567 105.13](#))**

No Revision Required - See Doc ID#: Attached page

☒ **Section G. Proof of Financial Assurance (IAC [567 105.14](#))**

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I further certify that the construction and operation of the above described facility will be in accordance with the plans, specifications, reports and related communications accepted by the Iowa Department of Natural Resources and on file in its office; and in accordance with conditions imposed in the permit issued by the Iowa Department of Natural Resources.

Signature of Permit Applicant: _____

Date: 12/3/2025

Printed Name: Robert Bartleson

Title: Compost Division Supervisor

Application for a solid waste compost facility must be accompanied by the plans, specifications, and additional information required by the applicable solid waste rules under Iowa Administrative Code 567 Chapter 105.

Send completed application with attached information to Becky.Jolly@dnr.iowa.gov, or:

Iowa Department of Natural Resources
Land Quality Bureau
Solid Waste Section
502 E 9th St
Des Moines, IA 50319-0034

For questions concerning this application please contact the Department at 515-721-7979 or
Theresa.Stiner@dnr.iowa.gov.



SWANA CERTIFIED PROFESSIONAL

This is to certify that

Todd Jones

**has met the Solid Waste Association of North America's eligibility requirements
and passed a comprehensive examination. Therefore, SWANA hereby designates
Todd Jones as a**

**Certified Manager
of**

Managing Composting Programs

as November 27, 2024 of until November 27, 2027

Amy Lestition Burke, CAE FASAE
Chief Executive Officer

SWANA

SITE CLOSURE COST ESTIMATE [IAC 567 105.14(2)]

In the event that the site is closed, the Scott County Landfill has agreed to accept onsite materials for beneficial reuse at the landfill. The materials will be used for final or intermediate cover on areas of the landfill that have been disturbed. The nutrients in the material will promote growth of a vegetative cover in these disturbed areas.

Upon a Planned Site Closure, Davenport Compost Facility would cease new compost production and sell on-hand product. Estimated remaining 8,000 tons of total solids would be loaded on trucks and transported to an approved local landfill. This is a round trip of about twelve miles. A truck could haul ten tons and make two trips per hour. If a fleet of ten trucks were used, they could haul 8,000 tons in a forty-hour week. Using \$150 per hour per truck and \$187.50 per hour for the loader:

10 trucks x 40 hrs x \$150/hr	= \$60,000
1 loader x 40 hrs x \$187.50/hr	= \$ 7,500
Total	= \$67,500

The Closure Account is established. The financial assurance mechanism is the Local Government Dedicated Fund in the amount of \$67,500, referenced in the Permit Special Provision #3.

Prepared May 9, 2022

Robert G. Meyer, P.E.
State of Iowa Certificate No. 06788

Signature: _____

Date: May 16, 2022

STATE OF IOWA



OPERATOR CERTIFICATION

CERTIFICATE EXPIRES 6/30/2019.
WHEN THIS CERTIFICATE EXPIRES A CURRENT
RENEWAL CERTIFICATE MUST BE ATTACHED.

ROBERT BARTLESON IS QUALIFIED IN
ACCORDANCE WITH STATE LAW AS A COMPOST
FACILITY OPERATOR.

CERTIFICATE #CF105

GIVEN UNDER THE HANDS OF THE
IOWA DEPARTMENT OF NATURAL RESOURCES
ON 4/20/2016

FOR THE DIRECTOR:

William A. Ehm

WILLIAM A. EHM, DIVISION ADMINISTRATOR

THIS CERTIFICATE REMAINS THE PROPERTY OF THE DEPARTMENT

IOWA DEPARTMENT OF NATURAL RESOURCES

RENEWAL CERTIFICATE

EXPIRES JUNE 30, 2028



Robert Bartleson
Compost Facility Operator
CERTIFICATE #CF105

EXECUTIVE SUMMERY

Permit Application Form 50A

The City of Davenport Compost Facility had no permit modifications during the previous permit cycle. We are nearing the completion of a multi-year construction project that will help protect the facility to a 1000-year flood level. Our SWPPP plan has not been updated since 2018 and our SPCC has not been updated since 2020. We are planning to have both plans updated based on IDNR inspectors as well as our local engineering firms recommendations when construction is concluded in early 2026 as there have been some changes to outfall construction and layout. We have continued to have Environet conduct annual inspections of the facility as a best management practice to ensure proper daily operations as well as SWPPP/SPCC compliance.

The Compost Manager is Todd Jones and is certified through SWANA until 11/27/2027, The Compost Division Supervisor is Robert Bartleson and is certified through SWANA and the DNR through 6/30/2028. Attached you will find supporting documents showing certifications, If you need any additional information to process this renewal please let me know and we will provide it. Please contact Todd Jones at 563-326-7933 or Robert Bartleson at 563-888-2100 with any questions.