

TRANS

State of North Carolina
 Department of Environment and Natural Resources
 Division of Waste Management

TRANSFER STATION
 Facility Annual Report
 For the period of **July 1, 2014-June 30, 2015**

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2015 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: Alexander Co. Transfer StationPermit: 0202T-TRANSFER_1998

Physical Address		Mailing Address	
Street 1: <u>2500 Payne Dairy Rd</u>		Street 1: <u>621 Liledoun Rd Box 12</u>	
Street 2: _____		Street 2: _____	
City: <u>Taylorsville</u>	County: <u>Alexander</u> <input checked="" type="checkbox"/>	City: <u>Taylorsville</u>	
State: <u>North Carolina</u>	Zip: <u>28681</u>	State: <u>North Carolina</u>	Zip: <u>28681</u>
Primary Facility Contact Person		Billing Contact Person	
Name: <u>Josh mitchell</u>		Name: _____	
Phone: <u>8386321101</u>	Fax: <u>8286320059</u>	Phone: _____	Fax: _____
Email: <u>jmittchell@alexandercountync.gov</u>		Email: _____	

1. Tipping Fee: \$60 _____ per Ton (Attach a schedule of tipping fees if appropriate.)

Does the tip fee above include the \$2.00 Solid Waste Tax? Yes No

2. Did your facility stop receiving waste during this past Fiscal Year? Yes No

If so, please report the date this occurred: _____

3. Are there SWANA or other certified operator(s) at this facility? Yes No

If yes, indicate the following:

Name: Freddy Mitchell Certification type and expiration date: 2/4/18

Name: RD Story Certification type and expiration date: 2/22/17

Name: Monty Payne Certification type and expiration date: 9/4/17

4. What other activities occur at this facility? (check all that apply)

Recycling/Reuse Collection Scrap Tire Collection White Goods Collection Household Hazardous Waste Collection

If you checked Recycling/Reuse Collection, please indicate the materials accepted and amount collected: (check all that apply and provide tonnages)

Carpet _____ tons Concrete/rubble/asphalt _____ tons Gypsum/drywall _____ tons Other Metal _____ tons

Cardboard 200 tons Shingles 556 tons Electronics 100 tons Other Plastic _____ tons

Wood _____ tons Other (specify) _____

5. If required to file NC E-500K forms with NC Dept. of Revenue, provide the four quarterly tonnages this facility reported for fiscal year 2014-2015.

Quarter	Tons Reported
July 1 - September 30	
October 1 - December 31	
January 1 - March 31	
April 1 - June 30	
Total	

