

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: Key Properties LCID Landfill Permit: 0107-LCID-2014

Physical Address	Mailing Address
Street 1: <u>2380 Sandy Cross Road</u>	Street 1: _____
Street 2: _____	Street 2: _____
City: <u>Burlington</u> County: <u>Alamance</u>	City: _____
State: <u>North Carolina</u> Zip: <u>27217</u>	State: <u>North Carolina</u> Zip: _____

Primary Facility Contact Person	Billing Contact Person
Name: <u>Roger Q. Maness</u>	Name: <u>Priscilla Maness</u>
Phone: <u>(336) 578-5665</u> Fax: <u>(336) 578-4558</u>	Phone: <u>(336) 578-5665</u> Fax: <u>(336) 578-4558</u>
Email: <u>wiseowl2001@yahoo.com</u>	Email: <u>wiseowl2001@yahoo.com</u>

- 1. Tipping Fee: \$25.00 per small loads
- Tipping Fee: \$ 35.00 per single axle
- Tipping Fee: \$45.00 per tandem axle

2. Estimate the amount of waste taken in an average week at this facility? 275 tons cubic yards

3. How many weeks did you operate this year? 52 weeks

4. What are the hours/days of operation for this facility? 8 am to 5 pm

5. What is the acreage of the footprint of the waste on site as of June 30? +/- 3 Acre(s)

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

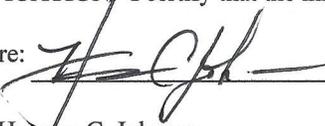
If so, please report the date this occurred: _____

REMINDER: According to (G.S. 130A-309.09D(b)), this report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

Please return your completed report to:

John Patrone
 PO Box 5123
 High Point, NC 27262
 phone: 336.776.9673 email: John.Patrone@ncdenr.gov

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature:  Date: 6/30/2015

Name: Herman C. Johnson Title: President

Phone Number: (336) 578-5665 Email: keyproperties2380@yahoo.com

Facility Name: Key Properties LCID Landfill Permit: 0107-LCID-2014

Address: 2380 Sandy Cross Road

City: Burlington State: North Carolina Zip: 27217

Person completing Assessment: Priscilla Maness Date: 6/30/2015

Phone Number: (336) 578-5665 Fax: (336) 578-4558 Email: wiseowl2001@aol.com

Instructions: Please indicate either *Yes* or *No* for each Receptor and Post Closure Maintenance question. Then please determine the distance or distances for each Receptor from the *Edge of Waste* (using range finders and/or GIS maps) and type that information into the form. Please attach additional information including GIS maps, lists of potable well locations, etc.

Receptors

1. Are there Residential Dwellings Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? 500 Feet _____ Feet _____ Feet
2. Are there Potable Wells Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? 300 Feet _____ Feet _____ Feet
3. Are there Community/Municipal Wells Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet
4. Are there Surface Water Bodies Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? 140 Feet 150 Feet 350 Feet
 Please list the names of the water bodies: Unnamed Tributary, Private Pond, Private Pond
5. Is Public Water Available Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many of the Residential Dwellings noted above are connected? _____

Corrective Measures

6. Is there an active methane extraction system (blower, flare, etc.)? Yes No
 7. Is there a passive methane extraction system (trench, vents in cap, flare, etc.)? Yes No
 8. Is there groundwater remediation taking place on site? Yes No
- If Yes, what is the specific remedial technology used? _____

Comments