LCID	State of North Carolina Department of Environment and Natural Resources Division of Waste Management	**LAND CLEARING & INERT DEBRIS LANDFILL** 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: Cieszko LCID Permit: 25I-LCID

Physical Address		Mailing Address	
Street 1: 1090 NC Highway 101		Street 1: PO Box 690	
Street 2:		Street 2: 249 US Highway 70 West	
City: Havelock	County: Craven	City: Havelock	
State: North Carolina	Zip: 28532	State: North Carolina	Zip: 28532

Primary Facility Contact Person		Billing Contact Person	
Name: Martin G. Cieszko		Name: Same	
Phone: (252) 447-2096	Fax: (252) 447-0687	Phone:	Fax:
Email: martin@cieszkoconstruction.com		Email:	

1. Tipping Fee: $75.00 per tandem truck

   Tipping Fee: $ 100.00 per triaxle truck

   Tipping Fee: $ 125.00 per Quad, Quint, or Dump Trailer

2. Estimate the amount of waste taken in an average week at this facility? 70 ☐ tons ☒ cubic yards

3. How many weeks did you operate this year? 50

4. What are the hours/days of operation for this facility? 07:00 to 15:30 Monday - Friday, by appointment

5. What is the acreage of the footprint of the waste on site as of June 30? 5.8 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:

Ray Williams
943 Washington Square Mall
Washington, NC 27889
phone: 252.948.3955 email: Ray.Williams@ncdenr.gov

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

Signature: Martin G. Cieszko Date: 2 July 2015

Name: Martin G. Cieszko Title: President

Phone Number: (252) 447-2096 Email: martin@cieszkoconstruction.com

NC DENR
Division of Waste Management - Solid Waste Section

Risk Assessment Form

Facility Name: Cieszko LCID Permit: 25I-LCID

Address: 1090 NC Highway 101

City: Havelock State: North Carolina Zip: 28532

Person completing Assessment: Martin G. Cieszko Date: 2 July 2015

Phone Number: (252) 447-2096 Fax: (252) 447-0687 Email: martin@cieszkoconstruction.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*? _____ 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*? _____ 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? 1
   What are the three closest distances from the *Edge of Waste*? 1005 Feet 1050 Feet 1650 Feet

   Please list the names of the water bodies: Hancock Creek

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