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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: Hoke County LCID Landfil Permit: 47A-LCID-1996

Physical Address	Mailing Address
Street 1: <u>700 CC Steele Rd</u>	Street 1: <u>PO Box 179</u>
Street 2: _____	Street 2: _____
City: <u>Raeford</u> County: <u>Hoke</u>	City: <u>Raeford</u>
State: <u>North Carolina</u> Zip: <u>28376</u>	State: <u>North Carolina</u> Zip: <u>28376</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Don Russell</u>	Name: <u>Patty Price</u>
Phone: <u>(910) 875-3111</u> Fax: <u>(910) 904-0804</u>	Phone: <u>(910) 875-3111</u> Fax: <u>(910) 904-0804</u>
Email: <u>drussell@hokecounty.org</u>	Email: <u>pprice@hokecounty.org</u>

1. Tipping Fee: \$19.00 per Ton

Tipping Fee: \$ _____ per _____

Tipping Fee: \$ _____ per _____

2. Estimate the amount of waste taken in an average week at this facility? 20 tons cubic yards

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

4. What are the hours/days of operation for this facility? 8:00 AM - 4:30 PM M-F ; 9:00 AM - 3:00 PM Sat.

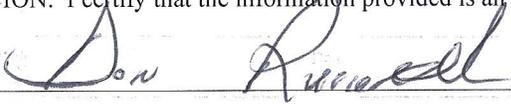
5. What is the acreage of the footprint of the waste on site as of June 30? 1/2 Acre(s)

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:
Drew Hammonds
225 Green Street, Suite 714
Fayetteville, NC 28301
phone: 910.433.3350 email: Andrew.Hammonds@ncdenr.gov

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

Signature:  Date: 7/13/2015

Name: Don Russell Title: Solid Waste Director

Phone Number: (910) 875-3111 Email: drussell@hokecounty.org

Facility Name: Hoke County LCID Landfil Permit: 47A-LCID-1996

Address: 700 CC Steele Rd

City: Raeford State: North Carolina Zip: 28376

Person completing Assessment: Don Russell Date: 7/13/2015

Phone Number: (910) 875-3111 Fax: (910) 904-0804 Email: drussell@hokecounty.org

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? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

Please list the names of the water bodies: _____

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