

Received 7/30/14 Reviewed 8/5/14

<b>C&amp;D</b>	<b>State of North Carolina</b> Department of Environment and Natural Resources Division of Waste Management	<b>CONSTRUCTION &amp; DEMOLITION WASTE LANDFILL</b> Facility Annual Report For the period of <b>July 1, 2013-June 30, 2014</b>
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According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2014 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: High Point C&D Debris Landfill Permit: 4116-CDLF-2012

Physical Address	Mailing Address
Street 1: <u>5830 Riverdale Dr</u>	Street 1: <u>5830 Riverdale Dr</u>
Street 2: _____	Street 2: _____
City: <u>Jamestown</u> County: <u>Guilford</u>	City: <u>Jamestown</u>
State: <u>North Carolina</u> Zip: <u>27282</u>	State: <u>North Carolina</u> Zip: <u>27282</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Roger Marcum</u>	Name: <u>Roger Marcum</u>
Phone: <u>(336) 886-3560</u> Fax: <u>(336) 886-7496</u>	Phone: <u>(336) 886-3560</u> Fax: <u>(336) 886-7496</u>
Email: <u>roger.marcum@wasteindustries.com</u>	Email: <u>roger.marcum@wasteindustries.com</u>

1. Tipping Fee: \$36.00 per Ton (Attach a schedule of tipping fees if appropriate.)
2. Does the tip fee above include the \$2.00 Solid Waste Tax?  Yes  No
3. Did your facility stop receiving waste during this past Fiscal Year?  Yes  No  
If so, please report the date this occurred: \_\_\_\_\_

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

<input type="checkbox"/> Recycling/Reuse Collection	<input type="checkbox"/> Scrap Tire Collection	<input type="checkbox"/> White Goods Collection	<input type="checkbox"/> Household Hazardous Waste Collection
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 If you checked Recycling/Reuse Collection, please indicate the materials accepted and amount collected: (check all that apply and provide tonnages)
 

<input type="checkbox"/> Carpet _____ tons	<input type="checkbox"/> Concrete/rubble/asphalt _____ tons	<input type="checkbox"/> Gypsum/drywall _____ tons	<input type="checkbox"/> Other Metal _____ tons
<input type="checkbox"/> Cardboard _____ tons	<input type="checkbox"/> Shingles _____ tons	<input type="checkbox"/> Electronics _____ tons	<input type="checkbox"/> Other Plastic _____ tons
<input type="checkbox"/> Wood _____ tons	<input type="checkbox"/> Other (specify) _____		

<b>Airspace (Capacity):</b> Questions in this section relate to all cells/units of the C&D facility operated under the current 4-digit permit number regardless of whether the cells/units are closed or are not contiguous at the time of this report. Tonnage questions must be based on scale records and cover the period between the opening date and the date of the last survey unless another time period is approved. Airspace measurements include weekly, intermediate and final cover.	5. Date Facility Last Surveyed: <u>1/14/2014</u> 6. Airspace Used (cubic yards): <u>1,429,273.26</u> 7. Total Tons Disposed in Airspace Used (tons): <u>1,035,721.75</u>
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10. Are there SWANA or other certified operator(s) at this facility?  Yes  No

If yes, indicate the following:

Name: <u>Roger Marcum</u>	Certification type and expiration date: <u>MOLO 8/15/2015</u>
Name: <u>William Miller</u>	Certification type and expiration date: <u>MOLO 6/7/2016</u>
Name: <u>Clyde Herrin</u>	Certification type and expiration date: <u>Landfill Operations Specialist 5/20/2016</u>
Name: <u>Bengy Austin</u>	Certification type and expiration date: <u>Landfill Operations Specialist 10/18/2016</u>
Name: <u>Joseph Richardson</u>	Certification type and expiration date: <u>Landfill Operations Specialist 10/8/2016</u>

11. Comments, suggestions or notes:

**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:

Hugh Jernigan  
585 Waughtown Street  
Winston-Salem, NC 27107-2275  
phone: 336.771.5093 email: Hugh.Jernigan@ncdenr.gov

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

Signature: \_\_\_\_\_ Date: Jul 30, 2014

Name: Roger Marcum Title: General Manager

Phone Number: (336) 886-3560 Email: roger.arcum@wasteindustries.com

Facility Name: High Point C&D Debris Landfill Permit: 4116-CDLF-2012

Address: 5830 Riverdale Dr

City: Jamestown State: North Carolina Zip: 27282

Person completing Assessment: Roger Marcum Date: Jul 30, 2014

Phone Number: (336) 886-3560 Fax: (336) 886-7496 Email: roger.marcum@wasteindustries.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? \_\_\_\_\_  
 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**