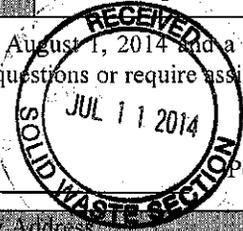


**MSW**

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

**MUNICIPAL SOLID WASTE LANDFILL**  
 Facility Annual Report  
 For the period of **July 1, 2013-June 30, 2014**

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: Surry County Municipal Solid Waste Landfill

Permit: 8606-MSWLF-1998

Physical Address	Mailing Address
Street 1: <u>237 Landfill Road</u>	Street 1: <u>PO Box 342</u>
Street 2: _____	Street 2: _____
City: <u>Mt. Airy</u> County: <u>Surry</u>	City: <u>Dobson</u>
State: <u>North Carolina</u> Zip: <u>27030</u>	State: <u>North Carolina</u> Zip: <u>27017</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Dennis Bledsoe</u>	Name: <u>Dennis Bledsoe</u>
Phone: <u>(336) 401-8375</u> Fax: <u>(336) 401-8380</u>	Phone: <u>(336) 401-8375</u> Fax: <u>(336) 401-8380</u>
Email: <u>bledsoed@co.surry.nc.us</u>	Email: <u>bledsoed@co.surry.nc.us</u>

1. Tipping Fee: \$38.00 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)
  - Recycling/Reuse Collection  Scrap Tire Collection  White Goods Collection  Household Hazardous Waste Collection
 If you checked Recycling/Reuse Collection, please indicate the materials accepted: (check all that apply)
  - Paper  Wood  Concrete/rubble/asphalt  Gypsum/drywall
  - Cardboard  Glass  Aluminum Cans  Steel Cans
  - PETE (#1) Plastic  HDPE (#2) Plastic  Computer Equipment  Televisions
  - Fluorescent lightbulbs  Used oil/oil filters  Other Metal  Other Plastic
  - Other (specify) \_\_\_\_\_

<b>Airspace (Capacity):</b> Questions in this section relate to all cells/units of the lined 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 daily, intermediate and final cover.	5. Date Facility Last Surveyed: <u>06/16/2014</u>
	6. Airspace Used (cubic yards): <u>1,873,925</u>
	7. Total Tons Disposed in Airspace Used (tons): <u>995,354.7</u>

8. How is your leachate transported to the waste water treatment plant?  Sewer Connection  Pump Truck



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

If yes, indicate the following:

Name: <u>Jerry D Simmons</u>	Certification type and expiration date: <u>LF-2011026 4/19/2017</u>
Name: <u>Ronnie C Sprinkle</u>	Certification type and expiration date: <u>LF-2011028 4/19/2017</u>
Name: <u>Justin Collins</u>	Certification type and expiration date: <u>LF-2012072 11/30/2015</u>
Name: <u>Billy Southard</u>	Certification type and expiration date: <u>MOLO 6/7/2016</u>
Name: <u>Dennis Bledsoe</u>	Certification type and expiration date: <u>MOLO 4/28/18</u>

12. Comments, suggestions or notes:

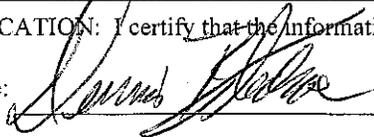
Ricky Hawks MOLO 6/15/16  
Donald Williams MOLO 11/30/2015

**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:

C.T. Gerstell  
610 East Center Avenue  
Mooresville, NC 28115  
phone: 704.235.2144 email: Charles.Gerstall@ncdenr.gov

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

Signature: 

Date: Jul 8, 2014

Name: Dennis Bledsoe

Title: Public Works Director

Phone Number: (336) 401-8375

Email: bledsoed@co.surry.nc.us

Facility Name: Surry County Municipal Solid Waste Landfill Permit: 8606-MSWLF-1998

Address: 237 Landfill Road

City: Mt. Airy State: North Carolina Zip: 27030

Person completing Assessment: Dennis Bledsoe Date: Jul 8, 2014

Phone Number: (336) 401-8375 Fax: (336) 401-8380 Email: bledsoed@co.surry.nc.us

**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? 5  
What are the three closest distances from the *Edge of Waste*? 515 Feet 840 Feet 920 Feet

2. Are there Potable Wells Within 1,500 feet of the Edge of Waste?  Yes  No  
If Yes, how many? 6  
What are the three closest distances from the *Edge of Waste*? 300 Feet 515 Feet 840 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? 4  
What are the three closest distances from the *Edge of Waste*? 300 Feet 535 Feet 840 Feet

Please list the names of the water bodies: Tributaries of Stony Creek and the Ararat River

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**